



Central Oregon Justice, Equity, Diversity and Inclusion (JEDI) Committee

July 3, 2024; 8:30am – 10:00am

Join by computer: <https://us02web.zoom.us/j/89357211655?pwd=NnkxQnRJYVRrQjhydS90dzkrYVMYQT09>

Join by phone: 1 253 215 8782 or 1 669 900 6833

Meeting ID: 893 5721 1655

Passcode: 168048

- 8:30 am - 8:50 am Welcome, Guiding Principles, Introductions and learning activity.
- Updates on the selection of health topics
- 8:50 am –10:30 am Context setting for today’s meeting. (**Advocacy**)
- Identify equity principles for the RHIP
  - Explore opportunities to include more equity into the RHIP process.

Links to Shared Documents

COHC Webpage:

<https://cohealthcouncil.org/>

Shared Google Drive:

<https://drive.google.com/drive/folders/1Y3-hzNmUV9aZ5rxh9iORVtA4jPp87U2N?usp=sharing>

Regional Health Improvement Currently Funded Projects:

<https://www.centraloregonhealthdata.org/tiles/index/display?id=254047713344660685>

Next Meeting –August 7

## Land Acknowledgment

*We recognize and acknowledge the indigenous land on which we live, work, learn, play, and grow. This is the land of the Warm Springs, Wasco, Northern Paiute, Tenino, Klamath, Molalla, and Yahooskin. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land that we partner to improve the health and well-being of Central Oregonians. We aspire to be good guests honoring the concept in the Warm Springs culture: "This land is for you to know and live upon and pass on to the children."*

**Central Oregon Diversity, Equity and Inclusion Committee**

Central Oregon Health Council Committee



As the *Central Oregon Diversity, Inclusion and Equity Committee* we collectively and individually practice and believe in:

- Solidarity
  - We move toward action in solidarity with our neighbors to actively and positively impact our agencies and communities.
  
- Humility
  - We carry the burden of history and a better future together, responsible to each other and ourselves for the space and energy we give and take.
  
- Curiosity
  - The direction we seek is bigger than any one of ourselves or agencies. We actively work to see a broader perspective, gain deeper insight, self-reflect and work towards equitable representation of diverse identities.
  
- Courage
  - This is courageous work. We choose to lean into the discomfort we experience knowing we grow in understanding and relationships.
  
- Transformation
  - Our lived experiences and need for safety are as true and diverse as we are. It is through invitation, curiosity, and listening that we reach our greatest shared understanding and commitment to transformative action.



## Central Oregon Justice, Equity, Diversity & Inclusion (JEDI) Action Plan 2024-2025

Plan summary: The plan aims to advance the work of the JEDI Committee as part of the Community Engagement strategy for the COHC, the advancement of the equity agenda among the workgroups, committees and BOD and the support of the underserved communities in Central Oregon and North Klamath.

GREEN=Done ORANGE=In Progress

<p><b>JEDI Presence and collaboration Goal:</b> By December 2024, the JEDI workgroup will have rebranded its name and establish relations and visibility among the rest of Committees and Workgroups of the COHC, contributing to advance the equity agenda in the region.</p>
<p><b>Activities (What We Do)</b></p>
<ul style="list-style-type: none"> <li>● Rebrand JEDI Committee.</li> </ul>
<ul style="list-style-type: none"> <li>● Establish visibility and collaboration with the rest of the Committees and Workgroups.</li> </ul>
<ul style="list-style-type: none"> <li>● Outline, clarify and communicate JEDI needs and trends to the COHC Workgroups and leadership.</li> </ul>

<p><b>Collaborative learning Goal:</b> By December 2024, the COHC will develop and implement a learning plan and foster ongoing DEI learning and growth for board, staff, committees and workgroups.</p>
<p><b>Activities (What We Do)</b></p>
<ul style="list-style-type: none"> <li>● Implement at least one JEDI related learning opportunity appropriate for board, staff, committees or workgroups.</li> </ul>
<ul style="list-style-type: none"> <li>● Ongoing communicating with COHC workgroups and communities about JEDI learnings and opportunities.</li> </ul>

<p><b>Advocacy Goal:</b> By December 2024, the JEDI Committee will support at least one community advocacy need identified in the region.</p>
<p><b>Activities (What We Do)</b></p>
<ul style="list-style-type: none"> <li>● Ensure diverse populations represent their experiences in the RHA-RHIP process.</li> </ul>
<ul style="list-style-type: none"> <li>● Participate in the development of the RHIP.</li> </ul>
<ul style="list-style-type: none"> <li>● Listen and support upcoming community needs.</li> </ul>

# July 3 JEDI Agenda

## **Updates on the selection of health topics**

- BOD+CAC meeting on June 13th

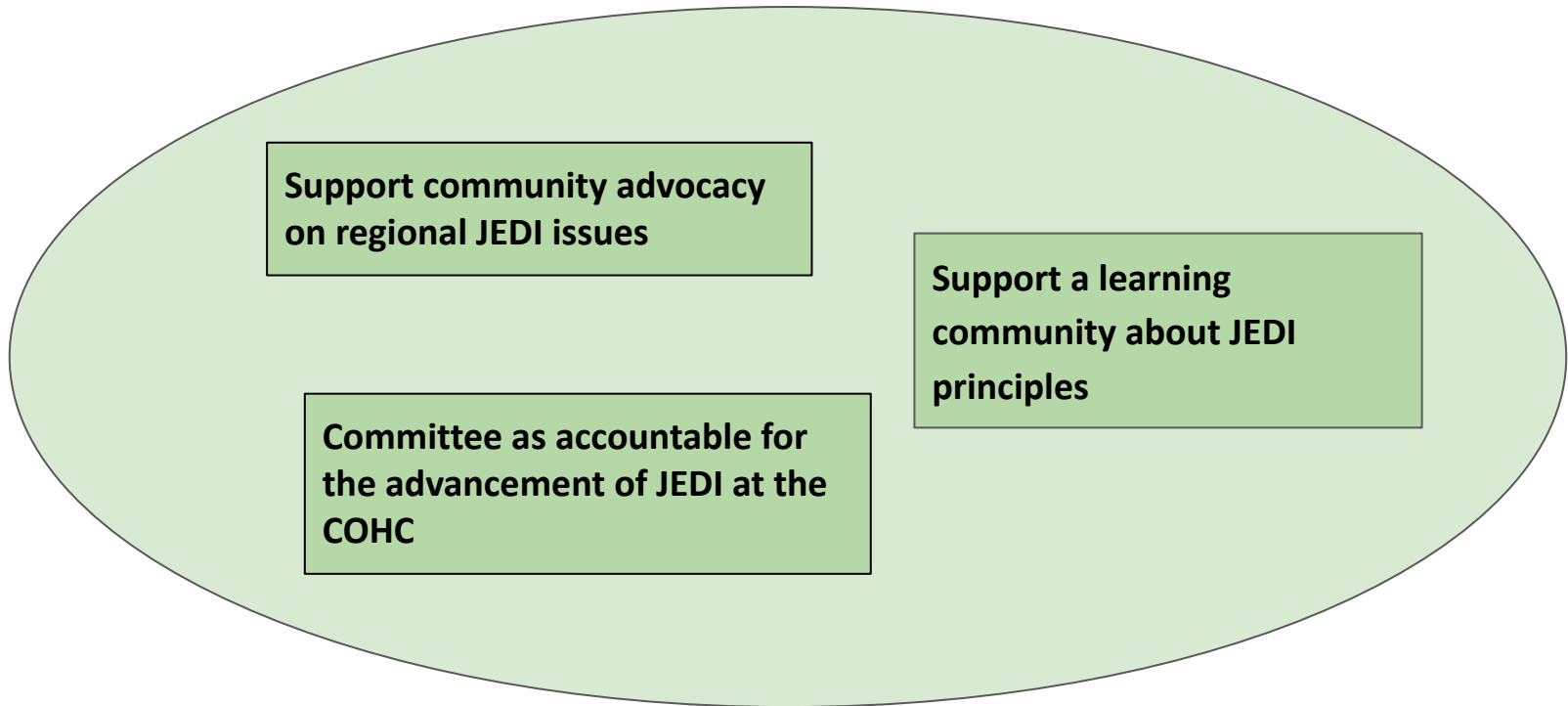
## **Transitioning from RHA to RHIP with an equity lens**

- Explore opportunities to include more equity into the RHIP process.

## **Identifying equity principles for the RHIP**

- What equity principles are important for the RHIP and how to operationalize them?

# JEDI's annual plan



# Useful links:

## JEDI 2024 Work Plan

I-Presence and Collaboration (workgroups collaboration, grants)

II-Learning Opportunities (calendar opportunities, trainings)

III-Advocacy (RHIP participation, advocacy)

[Updated Charter](#)

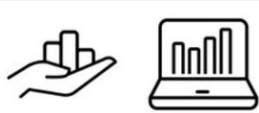
[2024 Action plan](#)

[One pager](#)

[Final report of the Focus Group](#)

[Community Health Survey](#)

# RHA/RHIP Updates



## RHA

## Data Analysis

## Prioritization

## Selection

## RHIP

## Workgroups

The Regional Health Assessment is a snapshot of health and wellness in Central Oregon.

Analyzes input from surveys, focus groups, interviews, and publicly available health data.

Different groups help identify regional health priorities.

The Board of Directors and Community Advisory Committee select final priorities for RHIP.

The Regional Health Improvement Plan outlines region's health priorities, improvement goals, and potential ways to take action.

Groups work together taking tangible action to improve the regional health priority areas.



# 2025-29 RHIP Health Topics selected!

## The 2025 - 2029 Regional Health Improvement Plan Focus Areas include:

Mental/Behavioral Health

Housing

Access to and Quality of Health Care

Alcohol, Tobacco, and Other Drugs

Nutrition, Physical Activity, and Weight Status

Transportation

FAQ

[Public.2025-29 RHIP Health Topics FAQ .pdf](#)

# Timeline

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan
Focus Area Prioritization & Selection			RHIP Document Development						Publish RHIP

## 2025-29 Health Topics selected!

On June 13th, the Board of Directors and the Community Advisory Council selected the 2025-29 health topics.

- Over a year-long process, thousands of people participated.
- A curated list of ten prioritized topics was presented.
- Board and CAC members analyzed results and community feedback.
- Six new topics were agreed upon for the 2025-29 RHIP.
- This achievement marks the end of the Regional Health Assessment and the start of the next Regional Health Improvement Plan.

# JEDI Challenge!

**How to make sure that equity is present during the 2025 RHIP process?**

Identify the equity principles that we want to see embedded into the RHIP

Recommend minimal conditions to implement the principles, to bring more community participation in the RHIP.

# RHIP process overview. What is the RHIP about?

The RHIP is a plan, made collaboratively, that focuses on the six selected priorities, made to support the work of all organizations in the region. The building of the plan has basically three moments:

## **Overview of the problem and root cause analysis**

Participate on group activities to:

-Understand the RHA: (metrics, and qualitative data)

-Analyze the problems, describe the background of the problem (Why are we talking about this?)

-Describe the current condition and make the root cause analysis: (What's happening right now?)

## **Think about possible solutions**

-Analysis: (What's keeping us from solving the problem?)

## **Create the goals and the strategic directions**

-Build the goal Statement: (Where do we want to be in 4 years?)

-Describe the strategy to address the problem (How to solve the problem)

-Define what are the specific actions needed? (who, what, when, where?)

# OHA and OHPB Health Equity Definition

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Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments to address:

- The equitable distribution or redistribution of resources and power; and
- Recognizing, reconciling and rectifying historical and contemporary injustices.

<https://www.oregon.gov/oha/ei/pages/health-equity-committee.aspx>

# COHC Principles

## COHC Commitment to DEI principles

Engaging our diverse Central Oregon communities.

Listening to and elevating the voices of communities most impacted

Co-creating with communities to meet their diverse needs.

Applying a health equity analysis to be more culturally responsive.

Striving to provide regional leadership and advocacy for health equity

## RHIP Workgroup Guiding Principles

Shared Focus

Shared Metrics

Partner with Priority Populations

Collaborate to Solve Complex Issues

Coordinate Collective Efforts

Learn and Adapt Together

## Steering Committee Principles

Collaborative

Health Equity

Centering Humanity

Mutually Beneficial

Sharing Power

Active Accountability

Transparency

Innovation

Mandate to Serve Our Entire Region

Recognizing our Limitations

Honoring Lived Experience

Action

Data-informed

**How could equity principles be included in the RHIP?**

# Community Engagement Plan

These are the **four** resonating themes

Diversity, Equity Inclusion and Social Justice (DEIJ) as shared priority at the region: Making DEIJ a priority was a common idea but also taking action to include more consumer representatives and partnering with non-healthcare community organizations to reduce siloed workgroups and increase member participation.

Community presence and inclusion from COHC: We hear that we need to be more present in the community and make changes to our structure to become more welcoming, inclusive, and culturally appropriate.

Build readiness in community representation: Provide a comprehensive onboarding process of new community representatives, arm them with enough knowledge to feel competent and support them as needed to feel confident participating in the workgroups and committees.

Community Leadership Development: Identify and offer clear ways for community members to get involved in the work with the COHC but, in alignment with their passions and interests. Provide or support any desired or needed training for example.

*Presented at the Community Advisory Council of Board of Directors Retreat 06/08/23*

*Full CAC Feedback working document here:*

[https://docs.google.com/presentation/d/1R-2t\\_Z3LuU6Ld9vRdXp\\_MTkKJkXepkBp1U\\_zRdTH7RY/edit?usp=sharing](https://docs.google.com/presentation/d/1R-2t_Z3LuU6Ld9vRdXp_MTkKJkXepkBp1U_zRdTH7RY/edit?usp=sharing)



# Board of Directors Feedback

## **About making Diversity, Equity Inclusion and Social Justice (JEDI) a shared priority for the region:**

The Board of Directors needs to discuss if the work to advance JEDI is part of the Mission of the COHC. There was some discussion about the fact that its advancement will require long-term investment and about the difficulty of changing system from inside.

There was a discussion around whether we need it as a specific part of the Strategic Plan or if we make it part of the mission of COHC or do both. More discussion is needed on how to articulate this and act upon it.

## **About becoming more inclusive, support community leadership and build readiness in community representation.** The Board of Directors saw this part of the work with at least **two components**:

- **Internal**: The need to build a common understanding around JEDI to eventually become a more inclusive organization. (Recognizing that there is a challenge because our workgroups are high technical space of collaboration)
- **External**: The Board of Directors thinks that the COHC should continue to be a convener to advance the JEDI agenda in the region rather than to advance the work alone. The opinion is that the COHC should keep supporting external initiatives as Healthier Oregon for example.

## JEDI Committee Report to COHC Board: Equity in the RHA and RHIP

- ❑ According to Board-approved charter, the JEDI Committee will be providing regular reports to the COHC Board
- ❑ This would be the JEDI Committee's first report to the COHC Board
- ❑ This first JEDI Committee report would thank COHC Board for including the JEDI Committee and health equity principles in the just-completed RHA process
- ❑ The report would also highlight the importance of health equity principles as the COHC now begins development of the next RHIP

## JEDI Committee Report to COHC Board: Equity in the RHA and RHIP

- ❑ The JEDI Committee strongly recommends that the COHC Board include the OHA definition of health equity and the COHC's Commitment to JEDI in the new RHIP
- ❑ The JEDI Committee recommends that the development of the RHIP reflects that commitment to *co-creating with communities throughout our region to achieve more inclusive decision-making to meet their diverse needs* and *applying a health equity analysis to build and revise our programs, policies, practices, and grants to be more culturally responsive*

Final thoughts