

OREGON PARTNERSHIP

Tuesday, September 18th
Portland State Office Building
800 NE Oregon St. Portland, OR 97232
Conference Room 1E



Webinar Link: <https://register.gotowebinar.com/register/100429784217456641>

Conference call line for audio: 1-877-873-8017

Access code: 767068#

Meeting Objectives:

- Get to know other members of the PartnerSHIP
- Understand history, role and landscape of state and community health improvement plans in Oregon
- Understand process for developing the 2020-2024 State Health Improvement Plan
- Determine criteria for identifying strategic issues

9:00 – 9:45 **Welcome, Introductions & an Icebreaker**
Be prepared to share a bit about your agency, why you joined the PartnerSHIP, what you’re looking forward to. Conduct meaningful ice breaker

9:45 – 10:20 **Understood history, role and landscape of SHIPs and CHIPs in Oregon**

10:20 -10:30 **Break**

10:30 – 11:00 **MAPP process and developing the 2020-2024 SHIP**

11:00 – 11:45 **Adopt vision, values and charter for the SHIP**

11:45 – 12:15 **Lunch**

12:15 – 1:15 **Ground rules for the PartnerSHIP**

1:15 – 2:00 **Determine criteria for identifying strategic issues**

2:00 – 2:10 Public Comment

2:10 – 2:20 Meeting evaluation

**2:20 – 2:30 Wrap-up and next steps in preparation for October 11th
meeting**

2020-2024 State Health Improvement Plan PartnerSHIP Meeting #1



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Plan for the Day

- Welcome & Introductions
- Understand history and landscape of SHIPs and CHIPs
- Understand MAPP framework
- Adopt vision, values and charter
- Develop ground rules
- Determine criteria for identifying strategic issues

Introductions

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Welcome & introductions

What is your preferred name and pronoun?

Tell us a bit about your vocation. What do you do, and what is the purpose of your agency or organization?

Why were you interested in joining the PartnerSHIP?

Name Game

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Health Improvement Planning

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What are your experiences?

- Share your experiences in community health assessment and planning
- Have you used the State Health Assessment or State Health Improvement Plan in your work? What was helpful and were there any barriers?

What is a health improvement plan?

- Identifies population health priorities based on findings from a health assessment
- Identifies actionable strategies and measurable outcomes to serve as basis for taking collection action with cross-sector partners
- Requirement of Public Health Accreditation

Requirements for health improvement plans

Per the Public Health Accreditation Board, health improvement plans must:

- Use a collaborative planning process with broad participation from community partners
- Use data collected in health assessments
- Identify priorities with measurable outcomes
- Outline strategies, including policy changes, needed to alleviate health inequities
- Designate partner organizations that will help implement strategies

Health Assessment & Improvement Plans

Agency	Assessment and Plan	Timeline
Oregon Health Authority, Public Health Division	State Health Assessment (SHA) & State Health Improvement Plan (SHIP)	Every 5 years
Local Public Health Authorities and Tribal Health Departments	Community Health Assessment (CHA) & Community Health Improvement Plans (CHIP)	Every 5 years
Coordinated Care Organizations	Community Health Assessment (CHA) & Community Health Improvement Plans (CHIP)	Every 5 years
Hospitals	Community Health Needs Assessments (CHNA)	Every 3 years

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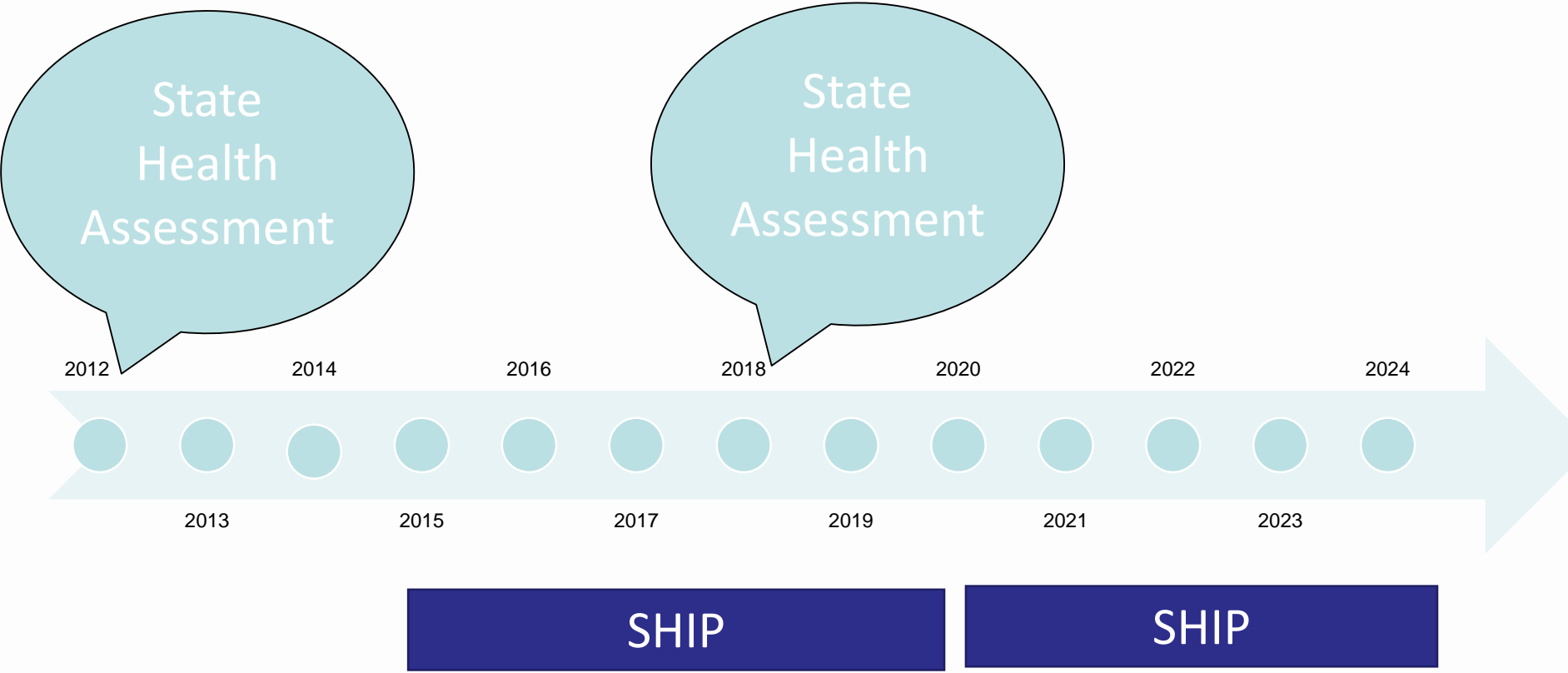
Common health priorities from Oregon CHIPs

- Substance abuse & mental health (including tobacco and alcohol)
- Access to health care
- Chronic diseases (obesity and diabetes)
- Physical activity & access to healthy food
- Maternal and child health
- Trauma, Adverse Childhood Experiences (ACEs) and resilient communities
- Housing, transportation and built environment
- Economic stability and education
- Oral health

CCO 2.0 – Potential impacts

- Increased emphasis on social determinants, particularly housing
- Metrics that address social determinants and health equity
- Require alignment with at least two priorities
- Increased resources for CHIPs

History of SHA & SHIP in Oregon



State Health Improvement Plan 2015-2019 Priorities

- Prevent and reduce **tobacco use**
- Slow the increase of **obesity**
- Improve **oral health**
- Reduce harms associated with **substance use**
- Prevent deaths from **suicide**
- Improve **immunization** rates
- Protect the population from **communicable diseases**

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Mobilizing for Action through Planning and Partnerships (MAPP) Framework

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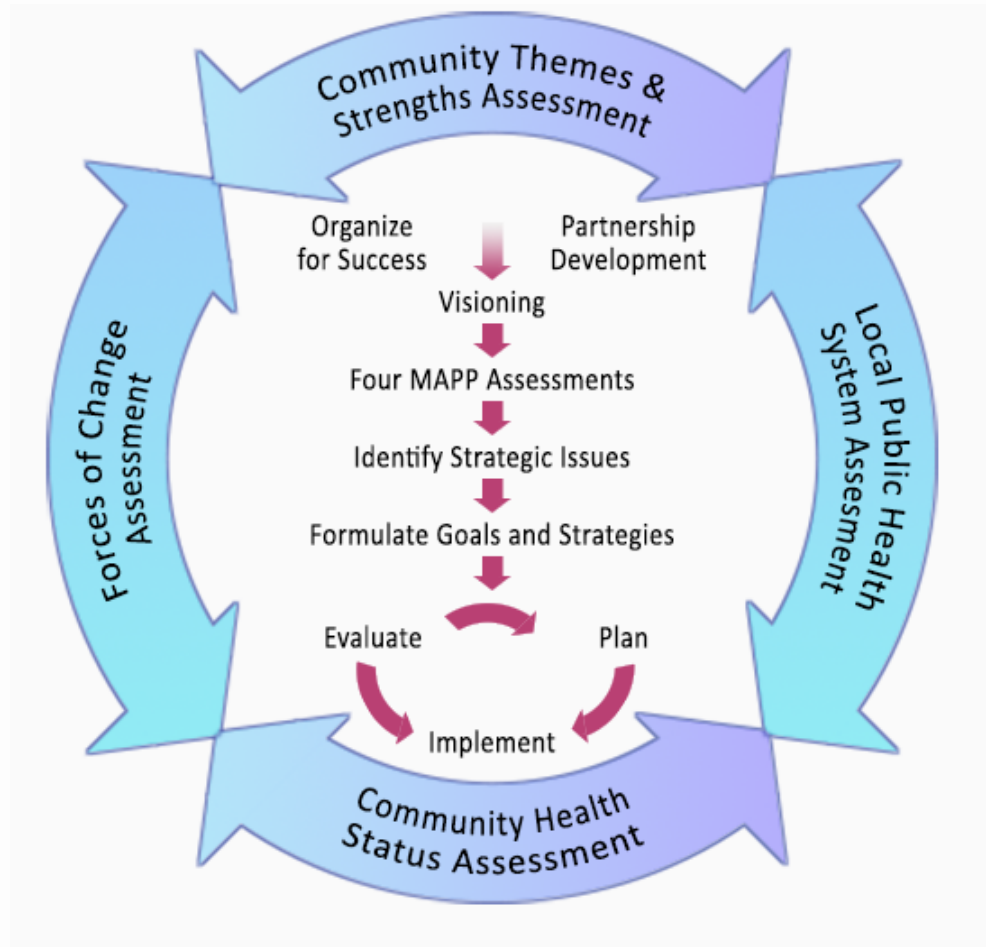
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Overview of the MAPP process

- Mobilizing for Action through Planning and Partnerships (MAPP)
- Strategic planning process for improving public health
- Three circles of involvement: Core Group, Steering Committee & Community at large
- Six phases, from assessment through plan implementation
- Developed by National Association of County & City Health Officials (NACCHO)

Overview of the MAPP process



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The MAPP Paradigm Shift

From	To
Operational planning	Strategic planning
Focus on Public Health system	Focus on any system concerned about health
Needs assessment	Emphasis on assets and resources
Medically oriented model	Broad, upstream definition of health
OHA is responsible for health	Everyone is responsible for health
Equality	Equity

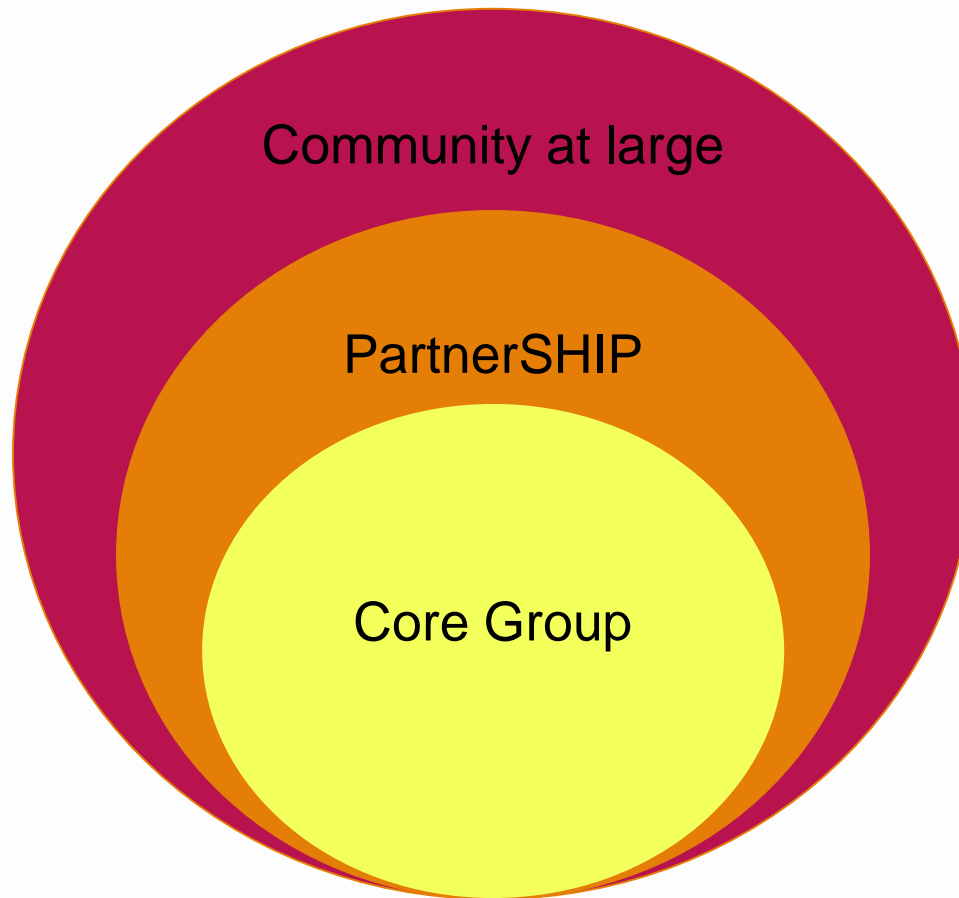
Phases of MAPP

State Health Assessment	Organize for Success & Partnership Development
	Visioning
	Four Assessments
State Health Improvement Plan	Identify Strategic Priorities
	Formulate Goals & Strategies
	Action Cycle

Building the SHIP

Phase	Objectives	Timeline
Identify Strategic Priorities	PartnerSHIP will first identify approximately 12 strategic issues based on selected criteria. The strategic issues will go out to community for prioritization. PartnerSHIP will determine final priorities in February based on community feedback.	September 2018 – February, 2019.
Formulate Goals & Strategies	Subcommittees formed for each priority. Additional subject matter experts recruited. Subcommittees will identify goals and strategies and develop work plans for implementation. Community will provide feedback on strategies and work plans.	March – September, 2019.
Action Cycle	Implementation of work plans begin. Role of PartnerSHIP TBD	January 2020 – December 2024.

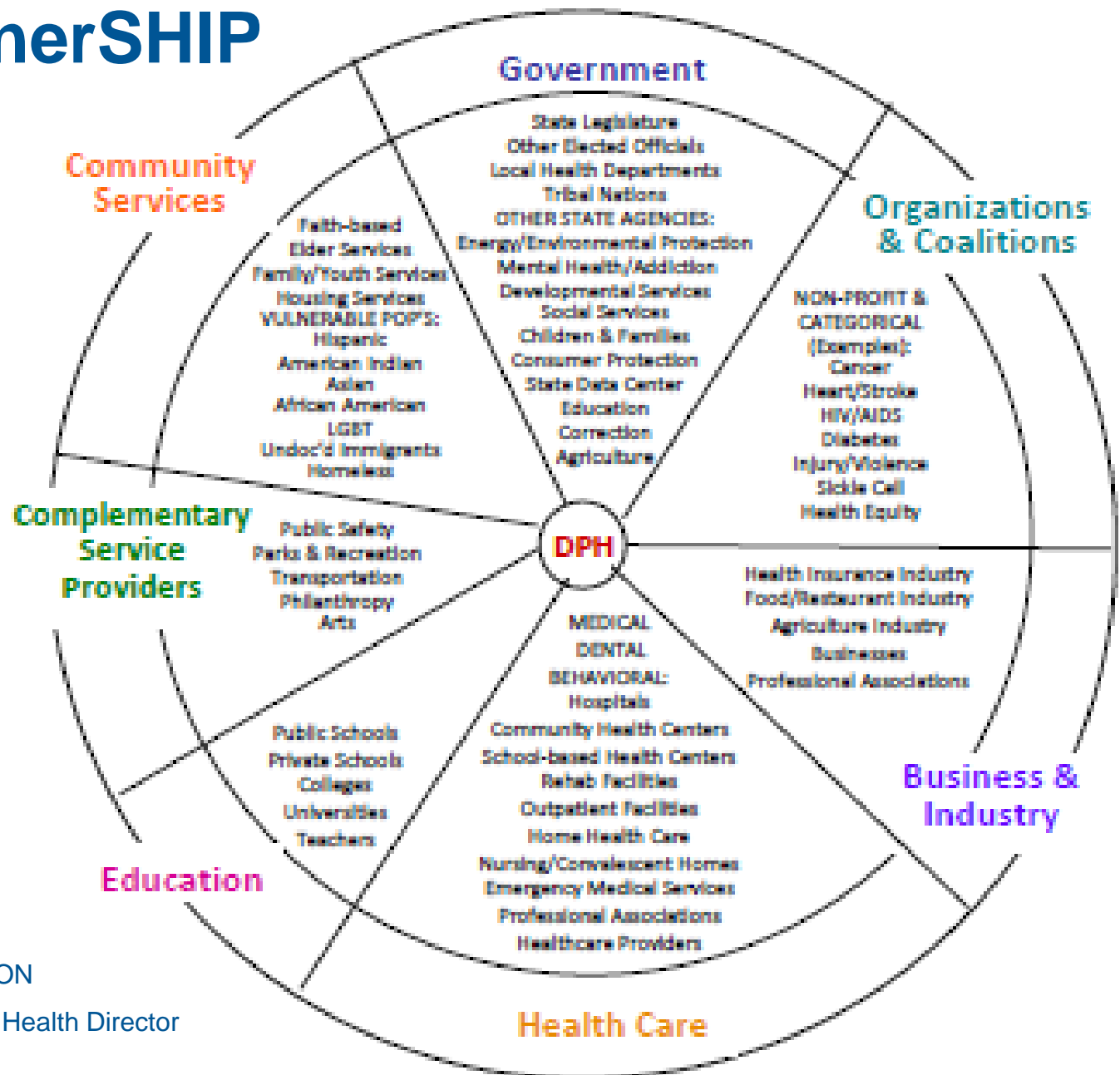
Who is building the SHIP?



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The PartnerSHIP



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Why you?

- You want to improve the health of our state
- Hold equity front and center – you work with communities that experience disparities
- Represent Oregon geographically
- Potential implementer of the SHIP or are involved with a CHIP
- Subject matter expert in health interventions

Community at Large

- Mini-grants
- Other community meetings or input opportunities
- Online surveys



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Vision, Values and Charter

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Vision & Values Development

- Phase 2 of MAPP process
- Developed by the SHA Steering Committee last summer
 - Steering committee developed themes
 - Core group drafted language based on themes
 - Steering committee approved final vision and value
- Used in strategic planning, implementation and communication
- Answers the Why? and How?

Values

Equity

Accountability

Empowerment

Transparency

Inclusion

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Vision

Oregon will be a place where optimal health is achieved for everyone across the lifespan, regardless of race, ethnicity, ability, gender, sexual orientation, socioeconomic status, nationality and geography.

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PURPOSE

The purpose of Oregon's State Health Improvement Plan (SHIP) is to identify population-wide priorities and strategies for improving the health of people in Oregon. The SHIP serves as the basis for taking collective action on key health issues in Oregon. The SHIP should reflect the results of a collaborative planning process that includes significant involvement by communities experiencing disproportionate health disparities.

BACKGROUND

Per Standard 5.2 of the Public Health Accreditation Board, Standards and Measures, accredited health departments are required to participate in or lead a collaborative process resulting in a comprehensive health improvement plan at least once every five years. The improvement plan requires:

- a. A collaborative process that includes a variety of partners
- b. Use of data from the State Health Assessment and consideration for local priorities identified in community health improvement plans (CHIPs)
- c. Identification of assets and resources
- d. Use of measurable outcomes
- e. Use of policy changes

The Oregon PartnerSHIP will provide guidance and oversight of the process to develop a comprehensive SHIP for the period of 2020-2024. The Oregon Public Health Advisory Board provides oversight for the SHIP.

MEMBERSHIP

The Oregon PartnerSHIP is comprised of representatives from a wide range of sectors and communities that are potential partners in SHIP implementation.

LEADERSHIP

The Oregon Health Authority, Public Health Division (PHD) will convene the PartnerSHIP and its subcommittees. The Policy and Partnerships team within the Office of the State Public Health Director will provide meeting support. Co-chairs of the PartnerSHIP will be the State Health Officer (also executive sponsor for the PHD) and one other member to be identified by the PartnerSHIP.

PROCESS

The process will be guided by the [Mobilizing for Action through Planning and Partnerships \(MAPP\)](#) framework, as developed by the National Association of County and City Health Officials (NACCHO). While the SHA was developed over the first three phases of the MAPP, the SHIP will be developed and implemented over the second three phases of the MAPP: Identify Strategic Issues, Formulate Goals and Strategies and the Action Cycle.

SCOPE

From September 2018 through January 2020, the PartnerSHIP will provide leadership and engage the public health community in the following efforts to develop a state health improvement plan for Oregon.

- Develop a SHIP that aims to achieve the vision set forth by the SHA steering committee.
- Design a SHIP prioritization process, including identification of criteria that will address health inequities.
- Identify cross-cutting health and strategic issues based on the SHA and priorities identified in CHIPs.
- Inform the development and membership representation for subcommittees based on identified priorities.
- Provide input on the community engagement process and assist in sharing engagement opportunities with other stakeholders throughout development with maximum transparency.
- Communicate about the SHIP to stakeholders, networks and the public at large
- Provide input and recommendation for process of implementing the 2020-2024 State Health Improvement Plan.

RESPONSIBILITY

Members of the Oregon PartnerSHIP will use their experience, expertise, and insight to create a SHIP that identifies strategic priorities as defined and interpreted by community members, specifically those experiencing health disparities. Members should have a basic understanding of public health practice, be genuinely interested in the success of the SHIP, and be able to actively participate in the process.

Steering Committee member responsibilities are to:

- Maintain vision, values and direction for the SHIP.
- Bring ideas and solicit input from other stakeholders and the community at large.
- Participate in a subcommittee of interest and provide two-way communication between the PartnerSHIP and subcommittees.
- Approve SHIP measures, objectives and work plans.
- Attend all PartnerSHIP and subcommittee meetings (or provide a delegate)
- Review materials ahead of the meeting and come prepared to discuss and participate.
- Facilitate conversation with community groups to gather feedback on strategic issues and strategies.

Chair responsibilities are to:

- Work with PHD staff to develop materials and agendas for meetings.
- Represent the PartnerSHIP at meetings or presentations with other stakeholders and partners as necessary.

DECISION-MAKING PROCESS

Decisions will be based on consensus.

MEETING EXPECTATIONS & TIME COMMITMENT

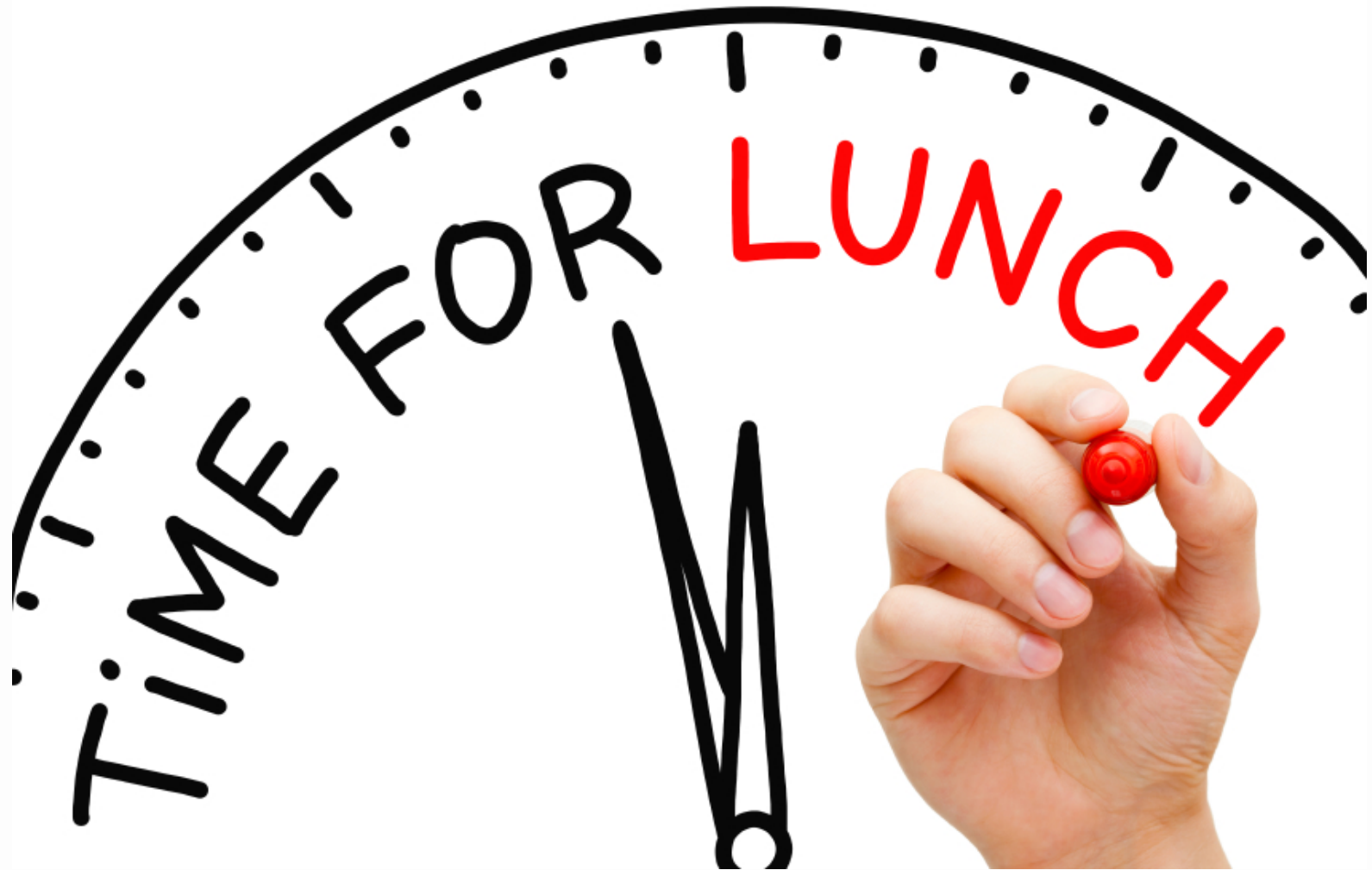
- Four to five half-day in person meetings (remote meeting options will also be available) to be held between September 2018 and January 2020 with ongoing work as necessary in between meetings (document review etc.).
- Subcommittee work March – September, 2019. Will include in-person meetings with a remote option or phone call and documentation review. Subcommittees will likely meet on a monthly basis.
- Meetings will be conducted in accordance with Oregon’s Public Meetings Law (ORS 192.610 through 192.710) and Public Records Law (ORS 192.001 through 192.505) and documented on the SHIP website: www.healthoregon.org/ship.
- A public meeting notice will be provided to the public and media at least 10 days in advance of each regular meeting and at least five days in advance of any special meeting.
- Written minutes will be taken at all regular and special meetings.
- Option for Steering Committee members to continue participation in the Action Cycle of the State Health Improvement Plan.

COMPENSATION

Lunch and refreshments will be provided during in person PartnerSHIP meetings. Parking or parking reimbursement will also be provided. For members travelling more than 70 miles to in-person meetings, mileage reimbursement or airfare and the cost of lodging and meals at Federal per diem rates will be provided.

CHARTER REVIEW

Charter will sunset at final online posting and distribution of the 2020-2024 State Health Improvement Plan.



Develop Ground Rules

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Ground Rules

- What ground rules do you want to set to ensure you work effectively to achieve the vision?

CONSENSUS BUILDING

The following seven people are currently on our hospital's liver transplant waiting list. All seven are in equally serious condition. There is little doubt that those who do not get the transplants will die. We have just been notified that two suitable livers will be available tomorrow morning. Please select TWO PERSONS from the waiting list who will receive those transplants. Per hospital policy, this committee decision must be unanimous.

DAVID is 7, white, and has lived in an orphanage for the past two years. His father died of alcoholism and his mother has constant bouts with mental illness, requiring David's current living arrangements.

STANLEY is 10 years old, white, and has been in five different elementary schools throughout his elementary school experience. His teachers all speak of him as a quite, good boy and an average student. He and his mother are very close.

TOM is 18, white, and in his senior year of high school. His physician has required him to take six months off of school for a nervous breakdown. His parents regard him as quite odd since he makes up his own religion and chants hymns to himself. He is not doing well in school and has few friends.

JOHN is 13, black and lives in a state institution for delinquent boys. He was placed there by the courts as punishment for indiscriminately firing a revolver from the front steps of his home. Neither parent seems to care what happens to John.

MARTHA is 5, white, and completely deaf and blind. She has not learned how to communicate her thoughts in any manner at all and is "out of control" most of the time.

GEORGE is 15, white, and is being home schooled by his mother since being diagnosed as mentally ill by one of his teachers. However, his mother seems to really believe in him and angrily denies that he is incompetent at all.

DEAN is 15 years old, black, and appears to be quite gifted. He has skipped school three grades since beginning school and is ready to begin college next year. His family is very close and parents appear very devoted to each other.

Determining Consensus

- Have you used consensus decision making before?
- In your experience, what is consensus making or how does it work?
- How will you determine consensus has been achieved?

Determine Criteria

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What criteria should we use to identify strategic issues?

Criteria	Definition
Magnitude	Size of population impacted, rate
Seriousness	Associated with death or disability
Trend	Moving in wrong direction
Rank	Worse compared to other states
Achievable	Ability to do something about it- evidence based interventions
Disparities	Subgroups disproportionately impacted
Alignment	Also identified as national, state or community priority
Upstream determinant	Root cause of health, social determinant
Feasible	Political will, existing resources, initiatives or relationships

Public Comment

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Identify a co-chair

Co-chairs of the PartnerSHIP will be Katrina Hedberg and one other member to be identified by the PartnerSHIP

Chair responsibilities are to:

- Work with PHD staff to develop materials and agendas for meetings.
- Represent the PartnerSHIP at meetings or presentations with other stakeholders and partners as necessary.

Next Steps & Final Thoughts

-+/Delta on meeting

- Next PartnerSHIP meeting will be held October 11th in Portland

-Please read the entire State Health Assessment and identify issues that stand out to you based on criteria.