This guidance helps Coordinated Care Organizations (CCOs) address contractual requirements for the Community Health Improvement Plan (CHP) Progress Report. The CHP Progress Report requirement is described in **Exhibit K, Section 7, Paragraph l** of the [2024 CCO Contract](https://www.oregon.gov/oha/HSD/OHP/CCO/2024-M-CCO-Contract-Template.pdf#page=272) and in **Oregon Administrative Rule** [**410-141-3730**](https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=265590)**(10)**.

1. CCO Community Advisory Councils (CACs) are required to annually publish a CHP Progress Report. CCOs should work with their CACs to complete the CHP Progress Report questionnaire on pages 2-3 of this document, which will serve as the annual CHP Progress Report. The questionnaire is due to OHA on or before December 31, 2024. The questionnaire must be submitted via the [CCO](https://oha-cco.powerappsportals.us/) Portal. (The submitter must have an OHA account to access the portal.) All CCOs must submit a CHP Progress Report in 2024. The reporting period for this progress report is July 1, 2023 to June 30, 2024 for CCOs who are not closing out a CHP. For those CCOs closing out their CHP, the reporting cycle is the entire length of the CHP. If your CCO has multiple CHPs, it must complete a separate questionnaire for each CHP. If your CCO has multiple Service Area contracts, it must submit a separate questionnaire for each contract.
2. Evaluation criteria: The annual CHP Progress Report should document progress made towards the goals, strategies and measures for priority areas as identified in the CHP and include the following:

(a) Changes in community health priorities, resources, or community assets

(b) Strategies used to address the health priorities identified in the CHP

(c) Parties outside and within the community who have been involved creating and implementing strategies used to address CHP health priorities

(d) Progress and efforts made (including services provided and activities undertaken) to date toward reaching the metrics or indicators for health priority areas identified in the CHP

(e) Identification of the data used, and the sources and methodology for obtaining such data, to evaluate and validate the progress made towards metrics or indicators identified in the CHP

(f) Progress of the integration strategies and implementation of the plan for working with programs developed by the Early Learning Council, Early Learning Hubs, the Youth Development Council, and school health providers in the region

## **CHP Progress Report Questionnaire**

## **1. Please list any changes since July 1, 2023 to community health priorities, goals, strategies, resources, or assets. If your CCO is closing out its CHP, please list the most significant changes during the period of the CHP. Please state whether any of the priorities, goals or strategies will be carried over into the next CHP cycle.**

**2. Please list the strategies used since July 1, 2023 to address CHP health priority areas. Please note which of these strategies involve working with programs developed by the Early Learning Council, Early Learning Hubs, the Youth Development Council, and school health providers in the region. If your CCO is closing out its CHP, please list the most successful strategies used during the period of the CHP.**

**3. Please indicate which of the following partners were involved in creating and implementing strategies to address CHP priorities since July 1, 2023 (select all that apply). If your CCO is closing out its CHP, please indicate which of the following partners were involved at any point during the period of the CHP.**

[ ]  CCO tribal liaison

[ ]  Federally Recognized Tribes of Oregon

[ ]  Indian Health Care Providers

[ ]  Culturally specific organizations

[ ]  Early Learning Hub

[ ]  Early Learning Council

[ ]  Youth Development Council

[ ]  Federally Qualified Health Centers

[ ]  Hospitals

[ ]  Local public health authority

[ ]  Local mental health authorities and community mental health programs

[ ]  Physical, behavioral, and oral health care providers

[ ]  Representatives from populations who are experiencing health and health care disparities

[ ]  School nurses, school mental health providers and other individuals representing child and adolescent health services such as those listed in ORS 414.578

[ ]  Social determinants of health & equity partners

[ ]  Local government

[ ]  Traditional health workers

**4. If applicable, identify any gaps in making connections to the key players listed above.**

**5. For CHP priorities related to children or adolescents (prenatal to age 24), describe how the CHP activities improve the coordination of effective and efficient delivery of health care to children and adolescents in the community.**

**6. In the table below or through supplemental documentation, please list and/or reference progress in meeting all CHP metrics and indicators. Please include data sources for all metrics. Please refer to the example below in *italics.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Strategy*** | ***Measure*** | ***January 2023 (baseline)*** | ***2024 (most recent data)***  | ***2024 (target)*** |
| *Provide culturally and linguistically specific information to youth that includes consequences of alcohol and drug use and corrects misconceptions.* | *Decrease the percentage of 11th graders in Johnson County who drank alcohol in the last month by 3% by 2025.* | *24.1%* | *22.5%* | *21.1%* |

Source: 2022 Student Health Survey