

# Yamhill CCO Community Health Improvement Plan

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## A little background about Yamhill CCO

- a. Grassroots startup
- b. Community owned, 501c3
- c. One single county, which makes us unique
- d. Pop = 100,000, 25% OHP, 65% of those are children,
- e. Hispanic pop = 30%
- f. Geographically rural, with two urban-ish areas (Mac & Newberg)
- g. West Valley Community Paramedicine
- h. Community Health Worker Hub
- i. Project Able Peer Support
- j. Persistent Pain Clinic coming Winter 2015
- k. Chronic Self-Management Programs
- l. Maternal Medical Home model
- m. Early Learning Hub is the YCCO
- n. Behaviorists imbedded in PCPCH
- o. PCPCH (VG) in YC HHS

# Our CAC was the driving force behind the process

- a. Our CAC makes up 1/4 of the triad of the CAC, CAP & ELC. We have a charter and is currently led by two co-chairs, who are consumer/advocates, specifically not 'government' proper or YCCO staff. The CAC is governed by the Board of Directors.
- b. Our relationship is close; free and frequent communication; advisory role, direct connection of CAC co-chairs sitting on the CAP & Board who bring reports back to CAC each meeting. The ELC Hub coordinator attends the CAC to share information. For example, the Board requested the Vision, Mission, and Guiding Principles be developed by the CAC and sent to the CAP for input, then approval by the Board. The CHA/CHIP process was inclusive of the CAP & Board, but driven by the CAC.
- c. Awesome, supportive, engaged; representatives of Head Start, Project Able, Developmental Disabilities, Addiction Services, the YCCO CEO, Our Innovator Agent regularly attends our CAC meetings and provides valuable communications between us and the OHA.

## How did you approach the development of your community health improvement plan?

- After studying the available approaches Yamhill CCO could use, the CAC Co-Chairs made a recommendation to the CAP and the Board stating they believed contracting with Yamhill County Public Health to do the Community Health Assessment and develop the Community Health Improvement Plan was in the best interest of Yamhill CCO because that is where the expertise resides in our community.
- Public Health had just completed the same process for their Public Health Accreditation process.
- The Board approved the CAC's recommendation to contract the work to Public Health.

## What partners did you engage with in order to develop your community health improvement plan?

- Community Advisory Council (CAC),
- Clinical Advisory Panel (CAP)
- Yamhill CCO's Innovator Agent
- Love In Action
- Head Start
- Early Learning Hub
- Yamhill County Health & Human Services
- Providence Newberg Medical Center
- Newberg Public Schools
- Housing Authority of Yamhill County
- Cover Oregon
- Trappist Abbey
- Love Inc.
- WIC
- Project Able
- Northwest Senior and Disability Services
- Care Oregon
- Willamette Valley Medical Center

How did your organization benefit from partnering with other organizations in order to meet your community health improvement plan requirement?

- Built new partnerships
- Information sharing between agencies improved
- Alignment between Yamhill CCO CHIP, Public Health CHIP and others such as Providence Newberg and HeadStart



## Please tell us about your CHA and CHIP process

- The CAC members and agencies they represent played a large part of getting the assessment surveys out into the public and planning and implementing community forums in the Hispanic communities.
- The CAC helped narrow down the key health indicators. Made recommendations to the CAP & Board.

# What are your CHIP priorities? What does implementation of these priorities look like?

1. Promote overall well-being by reducing prevalence of chronic conditions
2. Integrate oral health with physical and behavioral health
3. Leverage existing providers and health care teams' capacities in more innovative and creative ways
4. Value the mind-body connection by integrating behavioral and physical health prevention, education and treatment



Briefly share the outcomes from your community health improvement planning process



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## Share information about one or two community health improvement strategies or projects that your organization/community is *currently implementing*

A few examples from our CHIP include:

- Provide classes like Walk with Ease, Living Well with Chronic Conditions and Tomando Salud classes in English and Spanish,
- Promote Student Nutrition and Activity Clinic for Kids (SNACK) program throughout Yamhill County clinics serving children,
- Promote the services of community health workers in managing chronic conditions, high ED usage, and transitions of care,
- Community Based EMS by West Valley Fire Department, that will work with discharge planners WVMC and providers to reach clients in one community with few providers and only one SBHC

## What's one new thing your organization learned in the process of developing the community health improvement plan?

- Patience. Flexibility. Creative thinking.
- Health and wellness is about more than medical care;
- The best medical care does not have as much impact if other needs, such as mental health and oral health are not addressed at the same time;
- Our approaches must be based on the social of determinants of health as much as medical, behavioral and oral health needs;
- Start anywhere, do not quit trying!



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