



AllCare®
HEALTH PLAN

Community Health

Improvement Plan

2014

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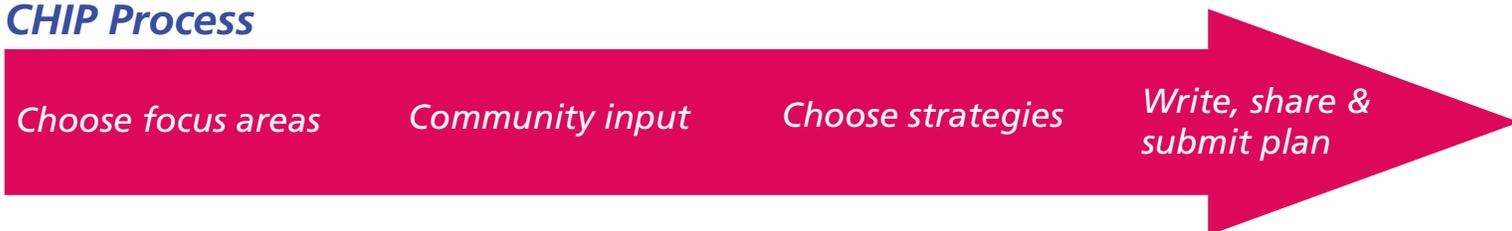
We would also like to thank Jackson Care Connect and PrimaryHealth of Josephine County for their continued collaboration.

Summary

The health of individuals and our community is a very large topic. Measuring health and effectively addressing health problems is complex. Improving the health of a community requires resources, efforts, innovation and community engagement. The CHIP is a plan that is based on the CHA data and prioritizes issues that CCOs in the three county region of Jackson, Josephine and Curry counties feel are important to address. In order to tackle such a large undertaking, several Coordinated Care Organizations (CCOs) came together in 2013 to collaborate on a single, collective community health assessment for Jackson and Josephine Counties. Jackson Care Connect, AllCare Health Plan and Primary Health of Josephine County and their Community Advisory Councils (CACs) collaborated to create a single health assessment for Jackson and Josephine Counties. The AllCare Community Health Assessment in Curry County was based on the Curry County Public Health Community Health Assessment. The next step, to create a Community Health Improvement Plan (CHIP), began in January 2014.

Focus areas were chosen collectively for all three CCOs, continuing the spirit of collaboration set with the previous CHA. CAC members from all three CCOs, Jackson, Josephine and Curry Counties reviewed CHA data and chose three general focus areas. They are: **Healthy Beginnings, Healthy Living** and **Health Equity**.

CHIP Process



The next collaborative step involved the collection of extensive community input about possible strategies to address the health priority areas. Surveys, public meetings and focus groups captured over 1300 unique comments and survey data from 751 community participants, both community members and service providers in Jackson, Josephine and Curry Counties. All three CCOs shared in the cost and data analysis of the community input part of the process for Jackson and Josephine Counties. AllCare sponsored focus groups and surveys in Curry County.

Useful Acronyms

| | |
|------|-----------------------------------|
| CCO | Coordinated Care Organization |
| CHIP | Community Health Improvement Plan |
| CHA | Community Health Assessment |
| CAC | Community Advisory Council |

Strategies were then chosen from the community input. Each CCO chose strategies based on their guiding philosophies, organization resources and priorities and their individual CAC input. Each CCO drafted their own CHIP but continued to have shared health priority focus areas, format and design.

The CHIP includes strategies for members of AllCare Health Plan and some strategies for the community at large. Progress on the CHIP will be reviewed annually by each of AllCare's three CACs (Jackson, Josephine and Curry CACs).

For a copy of the 2013 Jackson and Josephine County Community Health Assessment, the Curry County Community Health Assessment and full copies of the 2014 AllCare Community Health Improvement Plan, please visit www.allcarehealthplan.com or call (541) 471-4106

What is a Community Health Improvement Plan?

A Community Health Improvement Plan, or CHIP, is a process and a document that outlines strategies to support improved health of individuals and the community. This CHIP outlines prioritized health issues and ways to address them locally. The process included input from community members and service providers in Jackson, Josephine and Curry Counties. The CHIP is based on the Community Health Assessments that were sponsored by local Coordinated Care Organizations.



CHIP High Level Strategies Map

2014

Healthy Beginnings

Early Investment

Identify Early Learning Hub tasks and opportunities to collaborate

Adverse Childhood Experiences/Trauma

Increase awareness of ACEs body of research and implications for practice

Healthy Food and Physical Activity

Collaborate to increase physical activity opportunities and healthy food access for youth

Collaborate with local community gardens to engage youth in gardening

School-Based Health Centers

Support school-based health centers, explore possible expansion to include dental and addictions prevention

Healthy Living

Chronic Pain, Prescription Drug Abuse

Continue to support Opioid Prescribers Group (OPG) task force, including media campaigns

Mental Health

Identify opportunities for future CAC engagement in improving mental health integration and access

Built Environment

Identify opportunities for collaboration on improving built environment projects

Health Equity

Housing

Identify opportunities for collaboration on reducing the number of youths that are experiencing homeless

Food Insecurity

Support current food bank programs

Cultural Competency and Language Access

Increase provider cultural competency

Increase number of medical interpreters

Transportation

Improve quality and availability of non-emergent medical transportation

Oral Health

Support recent expansion of oral health services in Curry County



**Community
Health**

**Improvement
Plan**

2014

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Introduction, Process and Methods

Understanding the picture of health in a community is the first step in planning to improve a community's health. The health, causes of disease and disability for people living in all three counties of AllCare's service area (Jackson, Josephine and Curry counties) has changed over the last several decades, with chronic diseases now being the major cause of premature death. Risk factors of chronic disease include tobacco use, obesity, limited access to healthy food and nutrition. Supporting people that live in these counties through promoting healthy living, improving the health of our children and youth and addressing health disparities are all factors in creating a healthier community.

Measuring health and effectively improving the health of individuals and the community is complex and requires intentional planning. It begins by recognizing that health is beyond just the health care one receives and is influenced by many other factors such as health behaviors, environments that we live and work in, health care services, education and the health and social supports around us. Addressing these factors requires resources, efforts, collaboration, innovation and community engagement.

The first step in improving health is to understand the state of health in a community.

Jackson & Josephine County Community Health Assessment (CHA) Process

Three Coordinated Care Organizations (CCOs) came together in January of 2013 to collaborate on a single, collective community health assessment over two counties in Southwestern Oregon. Pooling resources, reducing duplication of effort and meeting funding mandates motivated the three organizations to secure a contract with a consultant to lead and facilitate a community health assessment. The Josephine and Jackson County Community Health Assessment was completed to meet the needs for AllCare Health Plan, PrimaryHealth and Jackson Care Connect. The document was released in the winter of 2013 and the next step, to create a Community Health Improvement Plan (CHIP), was started in January 2014. The CHIP is a plan that seeks to make sense of the data and prioritize issues that community organizations feel are important to address.

Curry County Community Health Assessment (CHA) Process

The process of accomplishing the CHA in Curry County was different in Curry than in Jackson and Josephine Counties. Curry County Public Health, as part of their process of seeking accreditation, was already well into their Community Health Needs Assessment when the Curry County CAC was organized. After several discussions with the CAC, CCO staff leadership and an outside facilitator/consultant, it was decided that the Curry CAC would submit the final drafts of the Community Health Needs Assessment (CHNA) and its supporting documents (Forces for Change, Themes and Strengths and Public Health System Assessment documents) from Public Health with an addendum overseen and written by the Curry CAC.

CHIP Process

The CHIP is a plan that seeks to make sense of the data and prioritize issues that the community organizations feel are important to address.

Jackson & Josephine County CHIP

After completion of the collective CHA, the three CCOs continued to collaborate on the CHIP process, beginning with a collaborative process to identify three major topic areas. CAC members from all three CCOs reviewed data collected and highlighted in the 2013 Community Health Assessment and arrived at three general focus areas. The three focus areas were: **Healthy Beginnings, Healthy Living and Health Equity.**

Curry County CHIP

The Curry CAC discussed and adopted the same three general health priority focus areas of: **Healthy Beginnings, Healthy Living and Health Equity**, with special emphasis on education, food/nutrition, access to education, substance abuse and mental health, health maintenance/physical activity and access to health care. The subcategories are within the three general health priority focus areas.

The next step in the CHIP involved the collection of extensive community input about possible strategies to address the health priority areas. Several methods were used to solicit feedback from the community. Methods included focus groups and surveys both online and in paper format. The focus groups utilized an audience response system that polled audiences for their ideas, allowing all participants the opportunity to provide their input anonymously. Both types of meetings also utilized a world café model where participants dialogued with other community members, eliciting many community-based ideas.

CHIP Focus Areas

- Healthy Beginnings
- Healthy Living
- Health Equity

CHIP Process

Choose focus areas

Community input

Choose strategies

Write, share & submit plan

The surveys themselves were written for easy reading and comprehension, resulting in a 97% completion rate. The questions asked in the public meetings and the surveys were organized around the three health priority areas and the hope was to gather ideas and solutions from community members, providers of health and human services and organizations. A summary of survey findings may be found in the appendix.

Significant outreach to recruit participants to the public meetings and for community members and providers to take the surveys (both paper and online versions) was completed by members of the Community Advisory Council and CCO staff. Surveys were distributed across all three counties and captured over 1300 unique comments from 751 participants.

The Community Advisory Councils then worked with AllCare staff and an outside facilitator to choose strategies for each of the counties that AllCare serves. The selection process began with review of the collected data and development of core planning principles. Strategies were chosen based on AllCare's organization resources and priorities and input from all three CACs.

Core Planning Principles

- Strategies that meet a need and address health disparities
- Meets Oregon Health Authority and Public Health Accreditation rules and mandates
- Evidence-informed
- Strategies that are balanced across all ages
- Emphasizes coordination and leveraging local assets, programs and resources
- Incorporates voices of those we serve, including members of the Oregon Health Plan
- Engages the Community Advisory Council members and provides activities for consumers to be involved in improving health
- Based on the 2013 Community Health Assessment
- Creates positive, measurable changes in the health of individuals and/or the community
- Strategies that can be built upon, over the 1-3 year timeline

All three CCOs in the region shared a similar process, the three health priority focus areas and a similar format, but chose their own strategies and drafted their own CHIP. AllCare and Jackson Care Connect also collaborated with Jackson County Public Health to create a CHIP that would meet public health accreditation needs. The resulting CHIP includes strategies that will ultimately benefit members of the AllCare Health Plan and strategies that will impact the community at large. The CHIP meets CCO requirements from Oregon Health Authority.

Progress on the CHIP will be reviewed every six months with additional strategies being evaluated and added annually.

Focus Areas and Strategies

Priority Health Issue: Healthy Beginnings

Goal: To engage in efforts to improve the health of children, adolescents and young adults from 0 to 24 years

Ensuring that children and youth are healthy, safe and ready to learn requires investment in prevention and attention to interventions that help the most at-risk children. Nurturing children before they enter school and supporting families as the first teachers of their children is correlated with higher learning outcomes and better health outcomes long term. The Early Learning Hub's core purposes are based in early investment, supporting families and kindergarten readiness. Supporting these efforts and tying them to health outcomes is an important priority in the CHIP.

Understanding how exposure to childhood emotional, physical and sexual abuse and trauma affects behavior and disease in adulthood is vital to creating better health services. A large body of research from the Centers of Disease Control and Kaiser Permanente consisting of over 17,000 patients provides substantial data about how childhood trauma affects adult health. Increasing knowledge of the Adverse Childhood Experiences Study (**ACEs**) will help to improve how we provide services to the most at-risk children, affecting the life-long health and wellness outcomes of people living in all three counties.

Accessing health care services for children and youth are highly correlated with long-term health. In remote rural areas, school-based health centers are often the only local medical services available. Supporting expansion of dental and alcohol, tobacco and drug prevention programs to local school-based health centers will help to increase access for children and youth.

“We need to expand availability of quality, affordable preschool programs, universal access should be the goal. The gap between children entering kindergarten with good preschool experience and those without is so enormous.” —Survey Participant

CHIP Priorities for 2014

The AllCare Community Advisory Councils (CACs) recognize that there are many organizations already working on early investment, healthy food and physical activity promotion and school-based health centers. Connecting with current efforts, avoiding duplication and promoting successful programs are high priorities for the CACs. Collaborating with newly formed Early Learning Hubs and current efforts to increase knowledge about ACEs are core objectives. Supporting the current school-based health centers in Curry County and promoting current programs to engage more youth in community gardens and physical activities are also CAC priorities.

Four high-level strategy areas were chosen by the CACs to focus on in the first year of the CHIP. Specific operation level activities will be established in July, 2014 and progress of the strategies and objectives will be tracked. Additional strategies will be evaluated and possibly added to the CHIP in 2015.

Increasing knowledge of the CAC members about current community assets and gaps is also a priority. The planning principles place value on not duplicating efforts, leveraging current community assets and choosing strategies informed by evidence. Increasing CAC members' knowledge will help the CAC to adhere to these principles and ensure a well-informed CHIP process and document.

Healthy Beginnings: 2014 CHIP Strategies and Objectives

Goal: To engage in efforts to improve the health of children, adolescents and young adults from 0 to 24 years

| High level strategy | Objective | When | Status |
|--|---|------|--------|
| Early investment Identify Early Learning Hub tasks and opportunities to collaborate | Jackson, Josephine and Curry Identify opportunities to collaborate with the HUB specific to parenting skills and supports and family activities | 2014 | |
| Adverse childhood experiences/trauma Increase awareness of ACEs body of research and implications for practice | Jackson, Josephine and Curry Collaborate with community partners for trainings on ACEs and trauma informed care | 2014 | |
| Healthy food and physical activity Collaborate to increase physical activity opportunities and healthy food access for youth | Jackson and Josephine Sponsor memberships at organizations such as the YMCA, sponsor kids activities at KidZone Curry Partner with organizations such as City, FEAST, RARE OSU and WIC to promote Master Gardener program and community gardens to children and families Identify opportunities for future CAC engagement with presentation from RARE food assessment project | 2014 | |
| School-based Health Centers Support school-based health center, explore possible expansion to include dental and addictions prevention | Curry Identify opportunities for CAC involvement in supporting and expanding current school based health center | 2014 | |

Community Advisory Council learning opportunities and implementation role

Training on ACEs research for CAC, identify future CHIP strategies

Presentation to CACs on Early Learning Hub efforts

Presentation on current School-Based Health Center in Curry County

Priority Health Issue: Healthy Living

Goal: To promote Healthy Living and improve health outcomes

Health encompasses the full spectrum of physical, mental and social well-being. The absence of health and causes of chronic disease are a complex mixture of genetics, diet, physical activity, access to care, environment and geography. Leading healthy lives promotes health and helps to manage chronic disease.

Many people live with chronic pain associated with chronic disease. Managing pain effectively while reducing the high mortality (death) rates associated with prescription drug misuse and abuse continue to be a significant challenge in Josephine and Jackson Counties. Raising awareness and providing education in a comprehensive way about how to manage chronic pain effectively is vital to improve health.

People living in in Jackson, Josephine and Curry Counties continue to have higher rates of mental health challenges including depression and suicide. Overall health is highly correlated with mental well-being. Services for addressing mental health are currently undergoing significant transition. New models of care for Oregon Health Plan Members will be more integrated, people with access to to recovery services will increase and the mental well-being of people that live in Jackson, Josephine and Curry counties will improve.

Built environment refers to the space around us that is made by humans. It includes buildings, parks, sidewalks, green spaces and places where people work, play and live. Walkability and bikeability are often ways to measure how built environment supports or doesn't support Healthy Living. Improving access to physical fitness such as more walking paths or an aquatic center is a strategy that promotes Healthy Living and improved health outcomes.

“Please support safety in our community that directly effects folks wanting to walk and enjoy the out of doors. [We need] healthy and well-kept streets....we have so many retired adults that could enjoy walking through town on a daily basis if they felt safer.” —Survey participant

CHIP Priorities for 2014

The AllCare Community Advisory Councils (CACs) recognize that there are many organizations already working on Healthy Living, mental health and built environment. Connecting with current efforts, avoiding duplication and promoting successful programs are high priorities for the CACs.

Three high-level strategy areas were chosen by the CACs to focus on in the first year of the CHIP. Due to the significant statewide shift in models of care for mental health and substance abuse services, the 2014 CHIP strategies in this particular strategy area will involve collecting information and identifying opportunities for future CAC activities. Strategies for chronic pain and built environment are focused on supporting current community efforts.

Specific operation level activities for all three high-level strategy areas will be established in July, 2014 and progress of the strategies and objectives will be tracked. Additional strategies will be evaluated and possibly added to the CHIP in 2015.

Increasing knowledge of the CAC members about current community assets and gaps is also a priority. The CAC values the planning principles of not duplicating efforts, leveraging current community assets and choosing strategies that are informed by evidence. Increasing CAC members' knowledge will help the CAC to adhere to these principles and ensure a well-informed CHIP process and document.

Healthy Living: 2014 CHIP Strategies and Objectives

Goal: To promote Healthy Living and improve health outcomes

| High level strategy | Objective | When | Status |
|--|--|------|--------|
| <p>Chronic pain, prescription drug abuse Increase information for providers on local efforts to treat complex chronic non-cancer pain</p> | <p>Jackson and Josephine Support community forum to provide education and raise awareness of patients and community about OPG efforts</p> | 2014 | |
| <p>Mental health Identify opportunities for future CAC engagement in improving mental health integration and substance abuse services</p> | <p>Jackson, Josephine and Curry Increase CAC understanding of mental health integration efforts, identify opportunities for future CAC engagement in improving mental health integration and substance abuse service</p> | 2014 | |
| <p>Built environment Identify opportunities for collaboration on built environment projects</p> | <p>Jackson and Josephine Identify opportunities for collaboration on improving built environment projects with Public Health and/or Pioneering Healthy Communities</p> <p>Curry Support efforts for assessment of possible Aquatic Center in Brookings</p> | 2014 | |

Community Advisory Council learning opportunities and implementation role

Presentation/training for CAC on current mental health integration efforts

Presentation/training on OPG Task Force

Priority Health Issue: Health Equity

Goal: To increase awareness of health equity and address social determinants of health

Health Equity is achieved when everyone has a fair opportunity to live a long and healthy life. Addressing health equity requires recognition of many factors that put people at a social or economic disadvantage. These factors are called health disparities. Poverty levels in Jackson and Curry counties are similar to Josephine County, with with one in four children living in poverty. Housing, food and transportation are all high needs for those living in poverty.

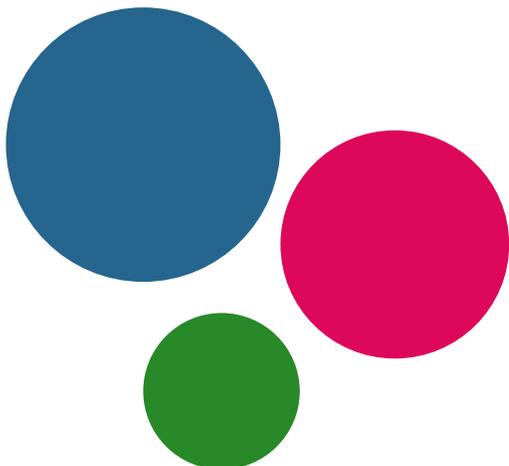
In addition to socioeconomic factors, race and ethnicity can play a part in determining health outcomes. People identifying as Latino in the region continue to experience worse health outcomes, including nearly three times the county averages for teen pregnancy.

CHIP Priorities for 2014

Five high-level strategy areas were chosen by the CACs to focus on in the first year of the CHIP. Strategies related to basic needs like housing, food insecurity and transportation are high priorities for all three CACs. Cultural competency, language services and access to dental services are also prioritized.

Specific operation level activities for all three high-level strategy areas will be established in July, 2014 and progress on the strategies and objectives will be tracked. Additional strategies will be evaluated and possibly added to the CHIP in 2015.

Increasing knowledge of the CAC members about current community assets and gaps is also a priority. The planning principles place value on not duplicating efforts, leveraging current community assets and choosing strategies that were informed by evidence. Increasing CAC members' knowledge will help the CAC to adhere to these principles and ensure a well-informed CHIP process and document.



Health Equity: 2014 CHIP Strategies and Objectives

Goal: To increase awareness of health equity and address social determinants of health

| High level strategy | Objective/work | When | Status |
|---|--|------|--------|
| Housing Identify opportunities for collaboration to reduce homelessness | Jackson, Josephine and Curry Convene conversations about housing availability, specifically for youth and those living with chronic disease | 2014 | |
| Food Insecurity Support current food bank programs | Jackson, Josephine and Curry Support current food bank programs, expand chronic disease-specific food boxes Curry Partner with organizations to promote access to community gardens, healthy eating classes and increased physical activity | 2014 | |
| Cultural Competency and language access Increase cultural competency, increase number of medical interpreters | Jackson and Josephine Increase cultural competency training opportunities for providers Jackson and Josephine Identify local community members to complete medical interpreter certification training | 2014 | |
| Transportation Assess and improve quality and availability of non emergent medical transportation | Curry Support assessment of non emergent medical transportation services in Curry County Identify opportunities for future CAC engagement to improve transportation | 2014 | |
| Oral Health Support recent expansion of oral health services | Curry Identify opportunities for CAC engagement to expand dental access in Curry County | 2014 | |

Community Advisory Council learning opportunities and implementation role

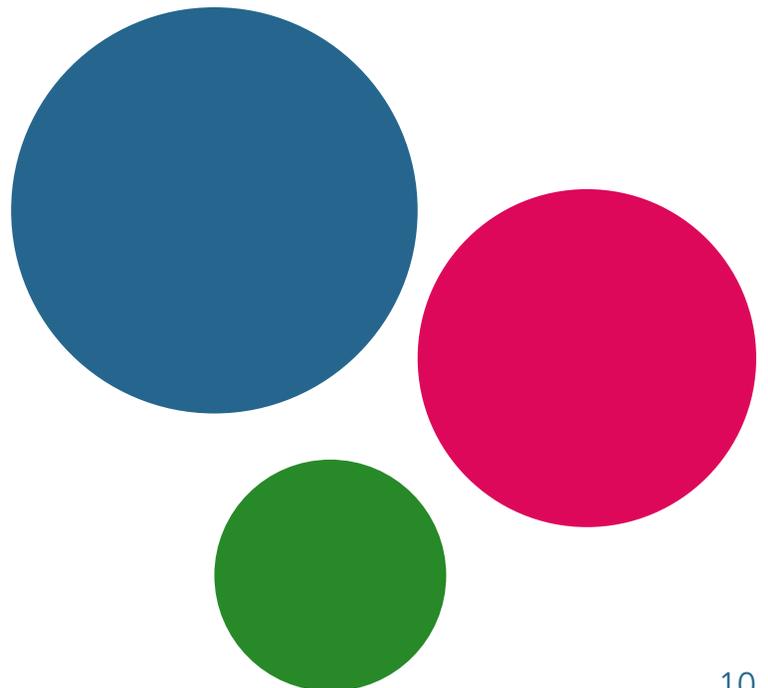
Presentation on current nonmedical transportation needs and gaps in Curry County

CAC presentation of housing services and needs for youth experiencing homelessness

Next Steps

The 2013 Community Health Assessment and the 2014 Community Health Improvement Plan draws attention to many health challenges and many opportunities for change. The documents and processes are designed to complement one another, not stand on their own. These efforts mark the first step in an ongoing process of community health assessment, planning and improvement. The process and the documents will remain dynamic and will be added to and changed over the next several years as community health and perceptions of health change. Engagement of the CAC members will continue to be instrumental in the process, as will listening to community members priorities and concerns.

For hard copies of this CHIP or the Community Health Assessment, please visit www.allcarehealthplan.com or call (541) 471-4106.



Appendix

Survey Data Summary

Jackson, Josephine and Curry County

Process and Methods

Several methods were used to solicit feedback from the community. The purpose of the survey and public meetings was to get ideas about how to improve health from community members and providers of health and human services in Jackson, Josephine and Curry Counties. Methods included public meetings, focus groups and surveys in both online and paper formats.

AllCare Health Plan collaborated with Jackson Care Connect and Primary Health to complete public meetings and surveys in Josephine and Jackson Counties. AllCare sponsored the surveys and focus groups in Curry County.

The community survey was written for easy reading and comprehension, resulting in a 97% completion rate. Survey questions sought input on possible strategies and activities in the three focus areas of **Healthy Beginnings, Healthy Living** and **Health Equity**. Respondents were asked to choose three strategies from a list and provide additional options in an open-ended question. Surveys were available online, via surveymonkey and in paper/hard copy format.

The public meetings utilized an audience response system that polled audiences for their ideas, allowing all participants an opportunity to provide their input anonymously. The questions asked in the public meetings were the same as the surveys. The public meetings also utilized a world café model where participants dialogued with other community members, eliciting many community-based ideas.

Community Advisory Council members and staff from all three CCOs implemented significant outreach. They recruited community members for public meetings, focus groups and encouraged people to take the surveys (both paper and online versions). Community input included over 1300 unique comments from 751 participants.

Quantitative Excel data and all qualitative comments from the community survey, provider surveys and community meetings were reviewed for themes. Data and themes were then presented to the CCO executive staff and CACs. Categorized comments are available upon request to CCO staff.

Summary Results and Themes

Jackson Josephine and Curry County Community Health Improvement Plan 2014

Community Survey Statistics

| | |
|---|---------|
| Total participants community survey | 673 |
| Total participants provider survey | 78 |
| Total all surveys | 751 |
| Total participants public meetings | 60 |
| Total comments from surveys and public meetings | 1320 |
| Completion rate | 97% |
| Survey open | 30 days |

Survey Themes

Healthy Beginnings

including:

Early childhood
Children and teens
Families

- Parenting support and skill development
- Early intervention and home visiting programs
- Physical activities for youth
- Healthy food access for children and youth
- Sex education and pregnancy intention programs
- Programs for youth that are experiencing homelessness
- Family violence and affects of trauma on children
- Prenatal programs
- School-based health centers

Healthy Living

including:

Healthy active living
Alcohol, tobacco, other drugs
Mental health

- Assistance for low cost fitness events/memberships
- Nutrition/healthy eating classes
- Built environment projects (sidewalks, walking paths etc)
- Worksite wellness programs
- Youth alcohol tobacco and other drug prevention
- Increase treatment quality, volume, accessibility of mental health and addictions programs
- Chronic pain, prescription medication use and prescribing
- Tobacco policy and cessation benefits
- Provider training: mental health and trauma informed services
- Community gardens
- Aquatic center (Curry)

Health Equity

including:

Access
Special populations
Social determinants of health

- Benefits for alternative providers
- Navigators to help coordinate and navigate system
- Transportation
- Recruitment/retention of all providers
- Programs for seniors and disabled
- Trauma/intimate partner violence (IPV)
- Language access and cultural competency
- Economic development
- College programs for youth
- Access to specific services such as dental



Healthy Beginnings

Early Investment

Identify Early Learning Hub tasks and opportunities to collaborate

Adverse Childhood Experiences/Trauma

Increase awareness of ACEs body of research and implications for practice

Healthy Food and Physical Activity

Collaborate to increase physical activity opportunities and healthy food access for youth

Healthy Living

Chronic Pain, Prescription Drug Use and Abuse

Continue to support OPG task force, including media campaigns

Mental Health

Increase CAC understanding of mental health integration efforts

Identify opportunities for future CAC engagement in improving mental health integration and access

Built Environment

Identify opportunities for collaboration on improving Built Environment projects with Public Health and Pioneering Healthy Communities

Health Equity

Housing

Identify opportunities for reducing the numbers of youth that are experiencing homelessness

Food Insecurity

Support current food bank programs, expand chronic disease specific food boxes

Cultural Competency and Language Access

Increase cultural competency training opportunities for providers

Identify local community members to pursue and support interpreter certification training

Core Planning Principles

- Strategies that meet a need and address health disparities
- Meets Oregon Health Authority and Public Health Accreditation rules and mandates
- Evidence-informed
- Strategies that are balanced across all ages
- Emphasizes coordination and leveraging local assets, programs and resources
- Incorporates voices of those we serve, including members of the Oregon Health Plan
- Engages the Community Advisory Council members and provides activities for consumers to be involved in improving health
- Based on the 2013 Community Health Assessment
- Creates positive, measurable changes in the health of individuals and/or the community
- Strategies that can be built upon, over the 1-3 year timeline



Healthy Beginnings

Early Investment

Identify Early Learning Hub tasks and opportunities to collaborate

Adverse Childhood Experiences/Trauma

Increase awareness of ACEs body of research and implications for practice

Healthy Food and Physical Activity

Collaborate to increase physical activity opportunities and healthy food access for youth

Healthy Living

Chronic Pain, Prescription Drug Use and Abuse

Continue to support OPG task force, including media campaigns

Mental Health

Increase CAC understanding of mental health integration efforts

Identify opportunities for future CAC engagement in improving mental health integration and access

Built Environment

Identify opportunities for collaboration on improving Built Environment projects with Public Health

Health Equity

Housing

Identify opportunities for reducing the numbers of youth that are experiencing homelessness

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Support current food bank programs, expand chronic disease specific food boxes

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- Based on the 2013 Community Health Assessment
- Creates positive, measurable changes in the health of individuals and/or the community
- Strategies that can be built upon, over the 1-3 year timeline





CHIP High Level Strategies Map - Curry County 2014

Healthy Beginnings

Early Investment

Identify Early Learning Hub tasks and opportunities to collaborate

Healthy Food and Physical Activity

Collaborate with local community gardens to engage youth in gardening

School-Based Health Centers

Support school-based health center, explore possible expansion to include dental and addictions prevention

Healthy Living

Mental Health and Substance Abuse

Increase CAC understanding of mental health and substance abuse service integration efforts

Identify opportunities for future CAC engagement in improving mental health and substance abuse service integration and access

Built Environment

Support efforts for assessment of possible Aquatic Center in Brookings

Health Equity

Transportation

Support NEMT assessment, identify opportunities for CAC involvement post evaluation

Oral Health

Support recent expansion of dental service in Curry County

Identify opportunities for CAC involvement in continued dental access

Food Insecurity

Partner with organizations to promote access to community gardens, healthy eating classes and increased physical activity

Core Planning Principles

- Strategies that meet a need and address health disparities
- Meets Oregon Health Authority and Public Health Accreditation rules and mandates
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