STATE HEALTH ASSESSMENT:
Themes & Strengths Assessment Subcommittee

August 11, 2017
10:00 am-12:00 pm
Portland State Office Building, 800 NE Oregon St., Conference Room 918, Portland, OR 97232

Join by Webinar: https://attendee.gotowebinar.com/register/5366789207224162562
Conference call line: 1-877-848-7030
Access Code: 2030826#

Meeting Objectives:

- Review purpose and process for completing the themes and strengths assessment.
- Review existing assessments and identify what voices are missing
- Determine objectives and method for community engagement process
- Interpret key findings from community engagement process

10:00-10:15 am Welcome and introductions
- Introduce subcommittee members and staff
- Brief overview of the state health assessment process

10:15-10:25 am Overview of the Themes & Strengths Assessment
- Purpose of the Themes & Strengths Assessment
- Roles and responsibilities of subcommittee members
- Review of the Themes and Strengths Assessment process

10:25-11:15 am Review themes from existing assessments and identify what voices are missing
- What themes emerge from existing data?
- What data are missing?

11:15-11:45 am Discuss community meetings
- Review potential locations
- Discuss coordination of community engagement with Oregon Housing and Community Services Statewide Housing Plan initiative
- Review draft community meeting outline
- Determine appropriate length of meetings

11:45-12:00 pm Next steps
- Review agenda for next meeting
- Next steps related to scheduling community meetings
July 2017

State Health Assessment
Themes and Strengths Assessment Subcommittee Roster

Steering Committee Members

Paul Virtue
Intercommunity Health Network
paulfreethinker@icloud.com

Holden Leung
Asian Health & Human Services Center
hleung@ahscpdx.org

Amanda Singh Bans
Health Care Coalition of Southern Oregon
Amanda.singh.bans@hccso.org

Julia Delgado
Urban League of Portland
jdelgado@ulpdx.org

Caroline Cruz
Confederated Tribes of Warm Springs
Caroline.cruz@wstribes.org

Meredith Guardino
Office of Rural Health
guardino@ohsu.edu

Kay Brooks
Unite Oregon
kay@uniteoregon.org

Emily Berndt
211
emilyb@211info.org

Royce Bowlin
Oregon Health Authority
Health Systems Division
Royce.a.bowlin@state.or.us

Maria Castro
Oregon Health Authority
Office of Equity & Inclusion
Maria.castro@state.or.us

Shelley Das
Oregon Health Authority
Office of Equity & Inclusion
Shelley.das@state.or.us

Becky Jones
Children First for Oregon
becky@cffo.org

Darrin Umbarger
Clearview Mediation and Disability Resource Center
clearviewmdrc@gmail.com

Additional Members

Stephanie Millar
Oregon Department of Transportation
Stephanie.l.millar@odot.state.or.us

Alison Martin
Oregon Center for Children and Youth with Special Health Needs
martial@ohsu.edu
Megan Bolton
Oregon Housing & Community Services
Megan.bolton@oregon.gov

Tamara Bakewell
Oregon Center for Children and Youth with Special Health Needs
bakewell@ohsu.edu

Public Health Division Staff

Cara Biddlecom
Cara.m.biddlecom@state.or.us

Danna Drum
Danna.k.drum@state.or.us
Themes & Strengths Assessment
Plan for Subcommittee

Welcome & Introductions
Orientation to the MAPP process and SHA
Overview of the Themes and Strengths Assessment
Review themes from existing assessments
Determine objectives and method for community engagement
Interpret key themes and findings
Evaluation & Next Steps
Introductions
Welcome & introductions

What is your preferred name and pronoun?

What is your profession and where do you work? What draws you to this work?

Describe a moment when you saw a health inequity playing out in your life.
Overview of the SHA & MAPP Framework
Purpose of the State Health Assessment

- Describe the health of Oregonians
- Provide a data resource for anyone interested in improving health outcomes in Oregon
- Call attention to health inequities through data and stories
- Incorporate significant community input
- Inform health improvement planning efforts, both at the local and state levels
- Maintain public health accreditation
Overview of the MAPP process

• Mobilizing for Action through Planning and Partnerships (MAPP)

• Community wide 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)
Steering Committee

Representation from:

- Public Health Advisory Board
- Regional Health Equity Coalitions
- Federally recognized tribes
- Local Public Health Departments
- Coordinated Care Organizations
- Public Health Division
- Culturally Specific Organizations
- Hospitals
- Consumer Advisory Councils
- Schools of Public Health
# Phases of MAPP: SHA

<table>
<thead>
<tr>
<th>Phase</th>
<th>Deliverables</th>
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<tbody>
<tr>
<td>Organize for Success &amp; Partnership</td>
<td>Identify participants, determine planning process</td>
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<tr>
<td>Development</td>
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<tr>
<td>Visioning</td>
<td>Determine focus, purpose and direction</td>
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<td>Four Assessments</td>
<td>Public Health Assessment</td>
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<td>Health Status Assessment</td>
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<td><strong>Themes &amp; Strengths Assessment</strong></td>
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<td>Forces of Change Assessment</td>
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PUBLIC HEALTH DIVISION
Office of the State Public Health Director
**Themes & Strengths Assessment: Subcommittee Tasks**

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<thead>
<tr>
<th>Tasks</th>
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<tr>
<td>• Invite additional members to the table.</td>
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<tr>
<td>• Review themes from existing assessments</td>
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<td>• Identify method for collecting community input, including asset mapping</td>
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<tr>
<td>• Interpret key themes and findings from community input process</td>
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<td>• Report back to Steering Committee</td>
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</table>
Overview of the Themes & Strengths Assessment
Key Questions for the TSA

• What is important to Oregonians?

• How is quality of life perceived across the state?

• What assets does Oregon have that can be used to improve community health?

• How do vulnerable communities experience the effects of health inequities?

• What challenges must be addressed in order to achieve our vision?
Themes in Existing Assessments
Previous Efforts

- 2015-19 State Health Improvement Plan Listening Sessions
- Oregon Office of Rural Health Listening Tour
- OHA Behavioral Health Town Halls
- CCO Listening Sessions
- Local Health Assessments and Health Improvement Plans
Themes Across Previous Efforts

- Access to care/high cost of care/lack of insurance (11)
- Social determinants of health (10)
- Maternal/family/child health (7)
- Oral health (6)
- Health equity (5)
- Alcohol and drug use (4)
- Impact of trauma (4)
- Chronic diseases (4)
- Obesity (3)
- Urban/Rural/Frontier Differences (2)
- Care coordination (2)
- Self-management skills (2)
Themes Across Previous Efforts

- Older adults/aging-related needs (2)
- Payment reform/increasing capacity and innovation (2)
- Tobacco use (2)
- Healthy eating/active living (2)
- Built environment (1)
- Vision health (1)
- Falls prevention (1)
- Health literacy (1)
- Core public health work (1)
- Integration of physical/behavioral/oral health (1)
- Caregiver education, peer/family support specialists (1)
- Governance structures and transparency (1)
- Young adults in transition (1)
- Workforce recruitment/retention (1)
Key Questions

• What themes emerge from these previous assessments/efforts?

• Do these themes resonate with your experience?

• Are there any surprises?

• What voices are missing from this review?
Gathering Statewide Input
Community Meetings

• Purpose
• Objectives
  – What do you want to learn from these meetings?
  – How do we capture what we need to know regarding health equity/inequities through this process?
• Coordination with other community engagement efforts
  – Are there other similar efforts scheduled for Fall 2017 of which we should be aware?
• Agenda
  – What are some key questions that should be asked?
  – What are your recommendations about how quantitative data should be shared during the meetings?
• Timeline
• Locations
Public Comment
Next Steps & Final Thoughts

• Final reflections on today’s work

• Next meeting: September 1, 2017
  – Proposed agenda items

• Meeting evaluation
  – What worked well?
  – What could be improved?
Themes from Community Health Assessments, Community Health Improvement Plans and Community Engagement Efforts

<table>
<thead>
<tr>
<th>Access to care/high cost of care/lack of insurance</th>
<th>Eastern Oregon</th>
<th>NW Coastal</th>
<th>Portland Metro</th>
<th>Southern Willamette</th>
<th>Southern Oregon</th>
<th>Lane</th>
<th>Marion/Polk</th>
<th>Yamhill</th>
<th>Central Oregon</th>
<th>Columbia River Gorge</th>
<th>2015-19 SHIP Sessions</th>
<th>OORH Listening Tour</th>
<th>Behavioral Health Town Halls</th>
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| Social Determinants of Health (housing, education, employment, transportation, poverty, etc.) | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 10     |

| Maternal/family/child health                      | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 7      |

| Mental/behavioral health                          | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 6      |

| Oral health                                       | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 5      |

| Health equity                                     | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 5      |

| Alcohol and drug use                              | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 4      |

| Impact of trauma                                  | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 4      |

| Chronic diseases (asthma, diabetes, cardiovascular disease, obesity) | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 4      |

| Frontier v. Rural v. Urban                         | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 2      |

| Care coordination                                 | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 2      |

| Self-management skills                            | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 2      |

<p>| Older adult/aging-related needs                   | X                              | X          | X              | X                   | X              | X    | X           | X       | X              | X                      | X                    | X                 | X                          | X                           | 2      |</p>
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<th>Category</th>
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<td>Payment reform/increasing capacity and innovation</td>
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<td>Tobacco use</td>
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<td>Healthy eating/Active living</td>
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<td>Vision health</td>
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<td>Falls prevention</td>
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<td>Built environment</td>
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<td>Integration of physical, behavioral and oral health</td>
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<td>Caregiver education, peer/family support specialists</td>
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<td>Governance structures &amp; transparency</td>
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<td>Young adults in transition</td>
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<td>Workforce recruitment &amp; retention</td>
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<td>Listening Tour</td>
<td>Date and Sponsor</td>
<td>Themes</td>
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<tr>
<td>Oregon’s Healthy Future (2015-19 State Health Improvement Plan)</td>
<td>2014-15</td>
<td>• Health equity</td>
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<td>Oregon Health Authority</td>
<td>• Mental health</td>
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<td>• Adverse childhood events and early childhood interventions</td>
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<td>• Core public health work</td>
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<td>Oregon Rural and Frontier Health Facility Listening Tour</td>
<td>2016</td>
<td>• Frontier v. rural – there’s a difference!</td>
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<td>Oregon Office of Rural Health</td>
<td>• Workforce recruitment and retention</td>
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<td>• Housing availability and affordability</td>
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<td>• Care coordination and referrals</td>
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<td>• Access to specialist and acute care, including mental health, substance abuse and long term care</td>
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<td>Behavioral Health Town Halls</td>
<td>2015</td>
<td>• Access to services and quality of care</td>
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<td>Oregon Health Authority</td>
<td>• Service coordination</td>
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<td>• Housing, employment, transportation</td>
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<td>• Self-management skills</td>
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<td>• Young adults in transition</td>
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<td>• Older adult in-home services and access to day treatment and other resources</td>
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<td>• Education for caregivers</td>
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<td>• Peer and family support specialists</td>
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<td>• Increase provider diversity and cultural competence</td>
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<td>• Rural v. frontier v. urban access differences</td>
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<td>CCO Listening Session</td>
<td>2015</td>
<td>• Community coordination to address social determinants of health</td>
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<td>• Integration of physical, behavioral and oral health</td>
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<td>• Care delivery system disparities, cultural competency, equitable access</td>
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<td>• Payment reform</td>
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<td>• Governance structures and transparency</td>
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<tr>
<td>Region</td>
<td>Date and Source</td>
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</table>
| Eastern Oregon (Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wheeler) | 2015 (Healthy Klamath)  
2016 (EOCCO) | • Maternal and child health  
• Social determinants of health  
• Build environment  
• Mental health  
• Oral health  
• Social determinants of health  
• Access to services  
• Obesity  
• Tobacco use  
• Alcohol and drug use |
| NW Coastal (Clatsop, Columbia, Tillamook) | 2014 (Columbia Pacific CCO) | • Alcohol and drug addiction  
• Obesity  
• High cost of care/lack of insurance |
| Portland Metro (Washington, Multnomah, Clackamas) | 2016 (Health Share CCO)  
2016 (Family Care CCO)  
2016 (Health Share/Family Care CCO) | • Social determinants of health (housing, unemployment, etc)  
• Alcohol and drug use  
• Healthy eating  
• Access to care  
• Health equity |
| Central Willamette (Linn, Benton, Lincoln) | 2015 (Intercommunity Health Network CCO) | • Access to health care (includes housing and culturally appropriate services)  
• Behavioral health  
• Child health (includes injuries, breastfeeding)  
• Chronic disease (includes asthma, physical activity/healthy eating, and tobacco use and exposure)  
• Maternal health (includes unplanned pregnancies, pre-conception/pre-natal care, postpartum care/support) |
## Community Health Assessment and Improvement Plan Themes

<table>
<thead>
<tr>
<th>Region</th>
<th>Year (CCOs)</th>
<th>Themes</th>
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</thead>
</table>
| Southern Oregon (Curry, Josephine, Jackson, Coos, Douglas) | 2013 (Western Oregon Advanced Health/All Care CCOs)  
2013 (PrimaryHealth/AllCare CCO)  
2013 (Jackson Care CCO/AllCare CCO/PrimaryHealth)  
2013 (Umpqua Health Alliance)  
2013 (Western Oregon Advanced Health) | • Access to quality health services  
• Mental health and addictions  
• Obesity, healthy eating, active living  
• Aging issues  
• Oral health  
• Vision health  
• Management of chronic illnesses  
• Falls prevention  
• Maternal and child health  
• Tobacco use  
• Social determinants of health (housing, education, transportation, poverty)  
• Health literacy |
| Polk/Marion                     | 2015 (Trillium CCO)                                                          | • Alcohol and drug abuse  
• Housing  
• Access to health care  
• Vulnerable populations  
• Access to healthy food  
• Mental health  
• Poverty and homelessness |
| Salem Metro (Polk, Marion)      | 2013 (Willamette Valley Community Health)                                    | • Access to care  
• Prevention/screening/treatment for people with history of trauma  
• Children with special needs  
• Homelessness  
• Transportation |
| Yamhill                         | 2014 (Yamhill CCO)                                                           | • Chronic conditions  
• Oral health  
• Increasing capacity and innovation  
• Behavioral health |
| Central Oregon (Crook, Deschutes, Jefferson) | 2016 (Central Oregon Health Council)                                         | • Behavioral Health (identification and awareness, substance use and chronic pain)  
• Cardiovascular disease |
### Community Health Assessment and Improvement Plan Themes

<table>
<thead>
<tr>
<th>Theme</th>
<th>Location</th>
<th>Year / Source</th>
<th>Additional Themes</th>
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<tbody>
<tr>
<td>• Diabetes</td>
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<td>• Food and housing security</td>
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<td>• Oral health</td>
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<td></td>
<td>• Lack of insurance</td>
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<tr>
<td>• Reproductive and Maternal Child Health</td>
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<td>• Oral health</td>
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<tr>
<td>• Social Determinants of Health (Education</td>
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<td>• Transportation</td>
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<tr>
<td>and health, Housing)</td>
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<td>• Poverty</td>
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<tr>
<td>• Food and housing security</td>
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<td>• Impact of trauma</td>
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<td>• Lack of insurance</td>
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<td>• Child health needs</td>
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<td>• Oral health</td>
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<td>• Transportation</td>
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<td>• Poverty</td>
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<td>• Impact of trauma</td>
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<tr>
<td>• Child health needs</td>
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**Columbia River Gorge (Hood River, Wasco)**

- 2016 (Pacific Source CCO Columbia Gorge)
- Additional Themes:
  - Diabetes
  - Oral health
  - Reproductive and Maternal Child Health
  - Social Determinants of Health (Education and health, Housing)
  - Food and housing security
  - Lack of insurance
  - Oral health
  - Transportation
  - Poverty
  - Impact of trauma
  - Child health needs
Purpose
To engage community members in the state health assessment process and collect input on community strengths and needs.

Objectives
1. Listen to community members about strengths and needs related to health.
1. Describe what the state health assessment and state health improvement plan are and how they are used to improve health in Oregon.
2 Share topline findings from quantitative and qualitative assessments of the health of people in Oregon and the public health system in order to engage participants in a dialogue about how statewide findings resonate with their local experience.

Potential meeting locations
- Portland
- Eugene
- Newport
- Medford
- Bend
- Pendleton

Agenda

<table>
<thead>
<tr>
<th>Time allotted</th>
<th>Topic</th>
<th>Facilitation Detail</th>
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<tbody>
<tr>
<td>15 minutes</td>
<td>Welcome and introductions</td>
<td>Metropolitan Group facilitates small group icebreaker exercise; facilitators and Oregon Health Authority staff introduce themselves.</td>
</tr>
<tr>
<td>10 minutes</td>
<td>Purpose of the meeting</td>
<td>Briefly review the purpose of the meeting, objectives and agenda.</td>
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<tr>
<td></td>
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<td>Describe the state health assessment and state health improvement plan are and how they are used to improve health in Oregon. Share vision and value statements for SHA</td>
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<tr>
<td>20 minutes</td>
<td>The state of Oregon’s health</td>
<td>Acknowledge that this is not the only assessment and planning process that has, is and will be conducted. Provide a summary overview of the themes from the Health Status Assessment and previous community input opportunities (from community health assessments, Oregon’s State Health Improvement Plan and other OHA listening tours). Allow for opportunities</td>
</tr>
</tbody>
</table>
for participants to creatively engage and respond to information.
Answer clarifying questions.

<table>
<thead>
<tr>
<th>45 minutes</th>
<th>Tell us what you need</th>
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<td>Introduce the small group activity. Ask participants to use provided worksheet to individually note: 1. What makes you most proud of Oregon with regard to health? 2. How satisfied are you with the opportunity for everyone to be healthy? 3. What are the 2-3 most important issues that must be addressed to improve health and quality of life in Oregon? Break up into 3-5 small groups of people with a facilitator and notetaker for each group. Discussion questions will be provided with a one-page summary of the state of Oregon’s health information provided earlier. Utilize ORID discussion framework: <strong>Objective</strong>: Facts, Data, Senses -What did you hear from the overview of the information about health in Oregon shared earlier? <strong>Reflective</strong>: Reactions, Heart, Feelings -How did what you hear resonate with you? -How do you feel about the health of your community? <strong>Interpretive</strong>: So What? -What was your key insight from the presentation? What about this discussion? <strong>Decision</strong>: Now What? -Based on your experience, the presentation and our conversation, what are the 2-3 most important health issues for people in Oregon? -Where do we need to prioritize our work over the next five years?</td>
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<th>20 minutes</th>
<th>Report back</th>
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<td>Representatives from each small group will pull out 1-2 findings from their conversation. Ask full group to consider full list and add any missing findings.</td>
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<th>10 minutes</th>
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<td>Thank participants, remind them of the next step in the process to synthesize the community engagement meetings and develop the full State Health Assessment,</td>
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<td><strong>pass out meeting evaluation form and encourage them to follow along at</strong> <a href="http://www.healthoregon.org/sha">www.healthoregon.org/sha</a>.</td>
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<td>Encourage participants to review and provide feedback via comment cards and in the future on the draft State Health Assessment.</td>
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