

STATE HEALTH ASSESSMENT: Themes & Strengths Assessment Subcommittee

DRAFT

August 11, 2017

10:00am-12:00PM

Portland State Office Building, 800 NE Oregon St., Room 918, Portland, OR 97232

Subcommittee Attendees: Tamara Bakewell, Amanda Singh Bans, Emily Berndt, Royce Bowlin, Maria Castro, Shelley Das, Frank Franklin, Meredith Guardino, Becky Jones, Tom Kuhn, Holden Leung, Jennifer Mead, Stephanie Millar, Hillary Saraceno, Erin Schulten and Paul Virtue.

Oregon Health Authority Staff: Cara Biddlecom, Danna Drum, Christy Hudson and Janis Payne.

Members of the Public: Marsha Wentzell and Jenny White.

Orientation to the MAPP process and SHA

-Cara Biddlecom, Oregon Health Authority

This is a subcommittee of the Oregon State Health Assessment (SHA). Oregon conducts a state-wide health assessment every five years as a part of public health accreditation to help describe the health of all Oregonians. This information will become a resource for data and stories and lays the groundwork for the next State Health Improvement Plan (SHIP). We will be using the MAPP process (Mobilizing for Action through Planning and Partnerships). This involves three groups of involvement: the core group, the steering committee and the community at large.

This subcommittee represents one of the four assessments in the third phase of MAPP, the Themes and Strengths Assessment. The subcommittee will be looking at qualitative data collected to advise and inform community engagement efforts taking place in October.

The State Health Improvement Plan (SHIP) drives the priorities of the Oregon Health Authority (OHA). The state aims to align with the Community Health Improvement Plans (CHIPs) working concurrently within the communities.

Overview of the Themes & Strengths Assessment

-Cara Biddlecom, Oregon Health Authority

TSA Subcommittee Tasks:

- Invite additional members
- Review themes from existing assessments
- Identify method for collecting community input including asset mapping
- Interpret key themes and findings from community input process
- Report back to the SHA Steering Committee

Maria Castro inquired on how to fill the gaps of members not included in this subcommittee. Danna welcomed any input on significant gaps in membership and recommended to be mindful of how to bridge gaps while gathering qualitative data.

Stephanie Millar asked what the relationship is between the State Health Improvement Plan and the Community Health Improvement Plans. Danna answered that the each plan has a different timeline and OHA aligned the two where possible.

Review themes from existing assessments and identify what voices are missing

-Cara Biddlecom, Oregon Health Authority

The top three themes showcased in the Community Health Assessment, Community Health Improvement Plans and Community engagement efforts were: Access to care, social determinants of health and maternal and child health.

Paul Virtue noticed that the State Health Improvement Plan (SHIP) did not identify social determinants of health as a theme. Cara stated that each of the seven health priorities in the SHIP take into account specific disparities to help achieve health outcomes. Stephanie Millar pointed out that OHA has a partnership with the Oregon Department of Transportation (ODOT) to integrate transportation with health thinking as an innovative way to look at health equity, as well as the relationship OHA has with the Department of Education even with different funding streams.

Royce Bowlin noted that one of the top five themes include behavioral health but it wasn't included on the matrix. Danna stated that was an error, as it should be included. It will be corrected and resent.

Royce also commented on OHA's partnership with the Housing and Community Services that are looking at social determinants of health.

Cara noted that the State Health Improvement Plan won't include everything but as issues arise they can be addressed through other agencies.

Tamara Bakewell suggested to include the 2015 Needs Assessment for children with special health needs because care coordination was also a main theme.

Jennifer Mead also suggested the State Plan for Aging Assessment.

Shelley Das suggested the comprehensive social determinants of health assessment though the DELTA (Developing Equity Leadership through Training and Action) research process.

Maria Castro commented to the access to care theme and how certain topics should be fleshed out to determine what type of data is available. For example, there is no data around certain groups such as transgender.

Stephanie Millar mentioned barriers to transportation that prevent access to care.

Jennifer Mead sees value in separating specific topics and lumping them together later if needed.

Frank Franklin recommended to start with race and ethnicity first.

Shelley Das discussed diversity in the workforce. Danna replied that it did not display a huge theme so it wasn't captured here. The subcommittee requests more granular data and how to capture race and ethnicity as primary social determinants.

Paul Virtue talked about health equity among different counties and stated that some community members do not attend listening sessions because they don't feel safe to attend.

Holden Leung provided a thought about language as a culturally significant social determinant.

Maria Castro discussed granular data and how it pertains to the Health Status Assessment subcommittee work. Race Ethnicity Language and Disability (REAL+D) data should be addressed as well as Lesbian, Gay, Bisexual, Transgender, and Queer data. She also noticed the Tribes are not included in this matrix.

Amanda Singh Bans mentioned there are low participation rates in primary care since community members in her area noticed that providers were not from non-dominant groups.

Discuss community meetings

-Cara Biddlecom, Oregon Health Authority

The plan is to take the qualitative and quantitative topic findings to the community at six meeting locations in the first half of October. There will be a coordination of efforts with the Community Housing Plan.

Subcommittee suggestions:

- There needs to be a targeted approach for communities of color or LGBTQ to allow them to feel comfortable to attend the community meetings. Perhaps by going to a group that serves that specific population.
- Build community trust.
- We need to bring funding including: Interpreter services, bus passes, food and childcare.
- Provide outreach by going back to the community and let them know what will be the result of the information being collected.
- The Oregon Public Transit Plans may have open houses at the same time.
- Work directly with community organizations to facilitate public meetings: Health Equity Coalitions, Community Advisory Councils (CAC) or Tribal clinics.
- Need to be more diverse besides LGBTQ, Asian, Hispanic, or African.
- Rather than convening geographically, instead target disparate groups within that geographic area.
- Health literacy without jargon.
- Inquire with community brokers on proper approaches in a specific community.
- The community meeting agenda should be no more than 2 hours but allow time to network afterwards.

- Open house style.
- Provide different ways to communicate (electronically, in writing, in person, etc.)
- Peers as co-presenters.

Next Steps

Action Items: Subcommittee members can provide feedback on the community meeting agenda at the next subcommittee meeting. Consider potential meeting locations and recommend any specific organizations that should be included in those specific locations. Frank and Paul serve on the Health Status Assessment subcommittee as well as the Themes & Strengths Assessment subcommittee. They could provide an overview of the other subcommittee's work at the next meeting.

The State Health Assessment Steering Committee meeting is scheduled on September 11th.

Public Comment

There was no public comment by phone or in-person.

Meeting Evaluation

- Didn't feel like this was a board meeting but more like a huddle.
- Enjoyed the thoughtful introductions among all members.
- Members asked good questions including why.

Meeting adjourned

The next subcommittee meeting is scheduled for September 1st from 1pm – 3pm.