



SHIP SUBCOMMITTEE MEETING

Bias Trauma Economic Drivers Access to Care Behavioral Health

July 27, 2020 | 1:00 p.m. – 3:00 p.m. | Call: (872) 240-3412, Access: 590-153-581

Members Present: Senna Towner, Rebeckah Berry, Tim Menza (OHA Lead), Katie Harris, Cable Hogue, Bridget Canniff, Marc Overbeck, Kelle Little, Catherine (Cat) Livingston

Members Absent: Tom Jeanne, Nina Fekaris, Patricia Patron, Muriel DeLaVergne-Brown, Frank Thomas, Chiqui Flowers, Laura McKeane, Char Reaves, Heidi Hill, Jim Rickards, Danielle Sobel, Tim Svenson, Marty Cardy

OHA Staff: Christy Hudson, Krasimir Karamfilov, Erin Corrigan, Emily Elman

Members of the Public: Bojun Zhang, Manu Chaudhry (Capital Dental Care), Dana Stringer (Willamette Dental Group)

Welcome & Agenda Overview

Tim Menza welcomed the subcommittee members to the meeting. He asked the members to introduce themselves. The attending subcommittee members introduced themselves.

Christy Hudson informed the subcommittee that the PartnerSHIP met early in July and approved all 62 strategies that had been put forth. The Economic Drivers of Health subcommittee had proposed through a formal letter to the PartnerSHIP to reconsider the priority populations and center on BIPOC communities. The PartnerSHIP considered the proposal and decided not to make changes to the priority populations at this time.

Katie Harris remarked that the PartnerSHIP had a thoughtful discussion about some of the recommendations. It was a very timely conversation, considering everything that has been going on. The PartnerSHIP was able to bring all that dialog into the SHIP in a meaningful way, which would make the plan very promising and relevant for the next two years.

Finalize Activities and Measures

Christy Hudson explained that while the strategy language was final, the activities provided further information and additional context to the people who would be implementing the plan. There should be one short-term measure for every strategy, with the measure coming from data that was already being collected, or there was a system in place to collect that data. It should speak to the intent of the strategy and to a statewide need.

The subcommittee discussed the activities and short-term measures for each strategy under each goal.

Recommendations for Implementation

Christy Hudson stated that OHA would love to hear from the subcommittee members how to move the work forward. The PartnerSHIP will be reformed for the implementation and will include new voices and agencies. A silver lining of the COVID-19 pandemic has been the expansion of OHA's relationships with other state agencies. Although there are not many resources for this work, the good news is that a lot of resources are already in place. CCOs and hospitals have put money into their communities as community benefits.

Christy Hudson invited the subcommittee members who worked in their Community Health Improvement Plan (CHIP) to share how to learn about the work they were doing within their communities and share those lessons across the state and help CHIPs to align with the SHIP.

Rebeckah Berry shared that one of the requirements of CCO 2.0 was that some of the SHIP priorities were also part of the CHIP. That's a great way to leverage awareness and have people take a closer look at the SHIP and how it might align with some local priorities in each community.

Christy Hudson asked if Rebeckah Berry knew how to take it to the next step, in terms of drilling down to the strategies and encouraging collective action in those strategies where it made sense to the community.

Rebeckah Berry answered that a document was only as good as the people who kept it alive. If OHA and public health wanted to keep this document alive, perhaps having some sort of workgroups made up of individuals that represented different areas of Oregon, and were interested in that particular topic, and met on a semi-regular basis to move those efforts forward would be helpful.

Senna Towner agreed with Rebeckah Berry that some sort of cross-collaborative communication that happened in the form of a workgroup would be good. In Jackson County, they have an OHA representative sitting on their CHIP workgroups. There has been an OHA liaison, Danna Drum, who has been supporting that work. Plugging in OHA staff and support into CHIP work to create that alignment would be good.

Rebeckah Berry shared that the Central Oregon Health Council had six workgroups and over 250 representatives from her region. She would love to have OHA staff participating on the workgroups that aligned with the SHIP.

Kelly Little remarked that the nine tribes in Oregon worked through the Northwest Portland Area Indian Health Board (NPAIHB) on a public health modernization project to move through a similar assessment that the counties did a few years ago. One of its components is the CHIP, or THIP (Tribal Health Improvement Plan) – not all tribes have a THIP – is that a tribal health department may have one person that does some of the work. OHA has set aside public health modernization funding for tribes to work on some of the strategy. That may be an opportunity for some cross-collaboration to encourage or at least

demonstrate potential usefulness of the SHIP in the work that is done through the SHIP as an option and resource for the tribes, as they are working to develop their health improvement plan.

Christy Hudson noted that some of the innovator agents that OHA had to support CCOs sometimes helped the CHIPs. The other opportunity that comes to mind is through the CARES funding. The policy and partnerships team at OHA has recently put out \$25 million to 172 community-based organizations across the state to support COVID-19 work, mostly contact tracing, education, and wraparound services. OHA stood up community engagement coordinators at the public health division to support those communities and that work. There might be additional capacity for OHA staff to come to communities.

Senna Towner stated that Linn County was in the middle of its next CHIP development. She wondered if it would be useful to ask for OHA's engagement in that process to ensure alignment.

Christy Hudson responded that OHA staff were always happy to speak with anybody and to hear and learn from what was going on in communities.

Honoring Your Commitment

Christy Hudson remarked that Lillian Shirley, director of OHA's Public Health Division, wanted to share a few thoughts via video. She will send a link to the subcommittee members.

Senna Towner thanked the OHA staff for all their hard work and for leading the subcommittee work.

Christy Hudson thanked the subcommittee members on behalf of the Public Health Division for their time investment, creative thinking, and all the work and love they put into the process, particularly in the midst of a pandemic. She hoped they stayed engaged and held OHA accountable. The best way to stay informed about the work moving forward is to sign up for the SHIP listserve.

Public Comment

Tim Menza invited members of the public to provide comments and ask questions.

There was no public comment.

Next Steps

- Subcommittee members will spread the word about Healthier Together Oregon.
- Subcommittee members will fill out a process evaluation survey for the subcommittee work.

Adjourn

Tim Menza adjourned the meeting at 2:52 p.m.