



## SHIP SUBCOMITTEE MEETING #3: Economic drivers of health

Friday, November 22nd, 1:00 – 3:00pm  
800 NE Oregon Street, Suite 900  
Portland, OR 97232

OR

Zoom Meeting: <https://zoom.us/j/393128009>  
Meeting ID: 393 128 009  
Conference Line: 1 669 900 6833

Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientation, socioeconomic status, nationalities and geographic locations.

Meeting Objectives:

- Finalize key indicators
- Process for strategy development

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1:00 – 1:15      **Welcome, agenda overview, subcommittee business**

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1:15– 2:00      **Breakout sessions: Finalize key indicators**

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2:00 – 2:30      **Report out to full subcommittee**

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2:30 – 2:45      **Initial discussion of strategy landscape**

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2:45 – 2:50      **Public Comment**

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2:50 – 3:00      **Wrap-up & Next Steps**

- Next meeting: December 20<sup>th</sup>

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# Welcome & introductions

Share name, agency and pronouns

Who's your equity hero?

PUBLIC HEALTH DIVISION

Office of the State Public Health Director

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The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, sans-serif font above the word "Health" in a large, blue, serif font. Below "Health" is the word "Authority" in a smaller, orange, sans-serif font. A thin orange horizontal line is positioned above the "Health" text.

# Subcommittee Business

- Zoom functions
  - Please enable your video
  - Breakout rooms
  - Join via computer and/or phone
- Basecamp expectations
- Subcommittee digest
- Subcommittee process evaluation

# Review of Process - timeline

*Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.*

Goal: Broad statement(s) of what we're trying to accomplish within a given priority area to achieve the vision.

**Outcome indicator: Long term measure that would indicate goal is achieved.**

Strategy: Policy, community and individual level interventions needed to achieve the goal

Process indicator: Short term measure that would indicate strategy has been achieved.

Actions: Specific tasks needed to implement strategy

# Finalizing the indicators – workgroup breakouts

- Break into 4 work groups.
- Identify a notetaker who will document conversation in Basecamp.
- Pick a recurring time your work group will meet in between subcommittee meetings.
- Identify 2 – 3 key indicators for your work group that you'd like to put forward to full subcommittee.
- At 2pm, we'll close breakout rooms for report out in full subcommittee.
- Goal is to identify 4 – 6 indicators for overall priority area.

# Strategy identification

*Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.*

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# Example

*Vision: Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all races, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.*

**Goal(s):** Improve health by decreasing economic and social inequities

**Outcome indicator:** Poverty level

**Strategy:** Renew and raise Oregon's earned income tax credit (EITC)

**Process indicator:** Percentage of eligible families who claim the EITC

# Strategy development

- Goal: Identify a total of 10-15 strategies at policy, community and individual level
  - Existing strategies
  - New strategies
  - Interventions needed to make progress towards the goals
- Process
  - Identify possible strategies
  - Apply criteria to narrow strategies
  - Identify approximately 3 – 5 strategies for each layer of framework



<b>Strategy Criteria</b>	
<b>Selection criteria</b>	<b>Definition</b>
Proven impact on disparities	<ul style="list-style-type: none"> <li>• Strategy addresses disparities in priority populations (POC, low income, disability, LGBTQ, rural/frontier)</li> </ul>
Will achieve intended outcome	<ul style="list-style-type: none"> <li>• Right strategy for the goal</li> <li>• Strategy aligns with evidence-based or promising practice</li> </ul>
Politically feasible	<ul style="list-style-type: none"> <li>• Ability to influence and implement a policy change</li> </ul>
Resourced or likely to be resourced	<ul style="list-style-type: none"> <li>• Funding is available or likely to be available</li> <li>• Local expertise exists</li> </ul>
Relevant to community	<ul style="list-style-type: none"> <li>• Strategy is in use in local community</li> <li>• Strategy is realistic and of interest from a local perspective</li> </ul>
Alignment with other strategic initiatives (locally or federally)	<ul style="list-style-type: none"> <li>• Strategy nationally recognized or recommended</li> </ul>
Change likely in next 5 years	<ul style="list-style-type: none"> <li>• Impacts likely to be seen within 5 years of implementation</li> </ul>
Addresses lifespan	<ul style="list-style-type: none"> <li>• Relevant to a wide range of age</li> <li>• Relevant to young children or older adults</li> </ul>

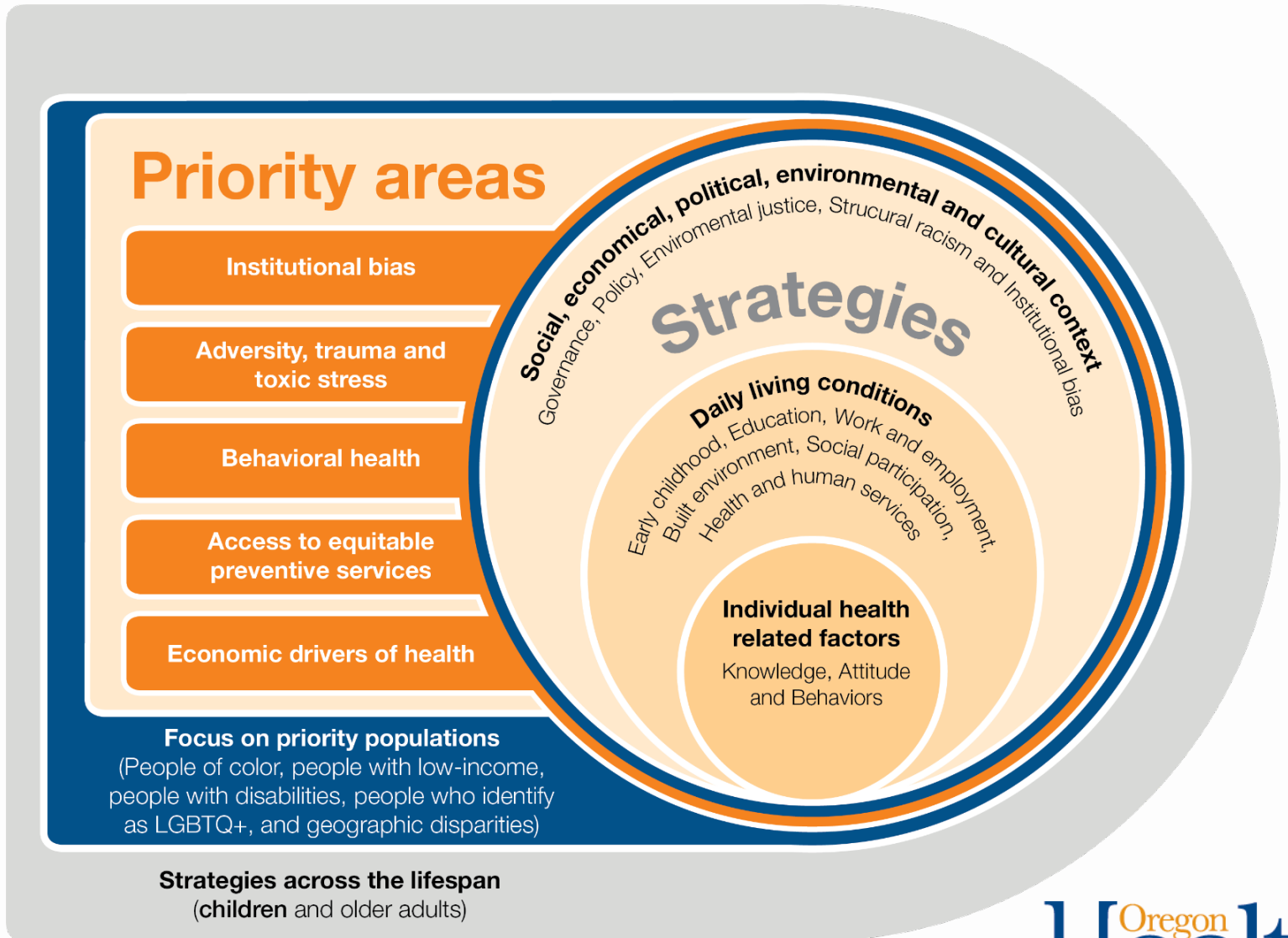
# Process measure development

- Goal: Identify 1 process measure for each strategy
  - Communicate hoped for changes
  - Short term in nature (change in 1-2 years)
  - Measure progress towards strategy
- Process
  - Identify possible measures
  - Apply criteria to narrow measures
  - Identify baseline and target if available

## Process Measure Criteria (short term, 1-2 year change)

Selection criteria	Definition
Promotes health equity	<ul style="list-style-type: none"> <li>• Measure addresses an area where health disparities exist</li> <li>• Data are reportable by race/ethnicity</li> <li>• Data are reportable by gender</li> <li>• Data are reportable by sexual orientation</li> <li>• Data are reportable by disability</li> <li>• Data are reportable by income level</li> </ul>
Respectful and relevant to local priorities	<ul style="list-style-type: none"> <li>• Data are reportable at the county level</li> <li>• Indicator is already in use at local level</li> </ul>
Lifespan	<ul style="list-style-type: none"> <li>• Data are reportable by age</li> </ul>
Acceptable and attainable	<ul style="list-style-type: none"> <li>• Right measure for the strategy</li> <li>• Measure aligns with evidence-based or promising practice</li> <li>• Measure is sensitive enough to capture improved performance or sensitive enough to show difference between years</li> <li>• It is reasonable to expect improved performance on this measure.</li> </ul>
Frequency	<ul style="list-style-type: none"> <li>• Data is collected annually or every other year at minimum.</li> </ul>
Transformative potential	<ul style="list-style-type: none"> <li>• Demonstrates an innovative measurement approach</li> <li>• Brings forward community voice</li> </ul>
Aligned with state measures	<ul style="list-style-type: none"> <li>• Existing State Health Indicator, CCO Incentive Measure, Public Health Accountability Measure or other state-wide performance measures</li> </ul>
Feasibility of measurement	<ul style="list-style-type: none"> <li>• Data for measure are already collected, or a mechanism for data collection has been identified.</li> </ul>

# 2020 SHIP Framework



# Strategy brainstorm – What strategies are need to advance our goals?

**Food insecurity:** Increase equitable access to culturally appropriate nutritious food regardless of social or structural barriers (e.g., age, location or employment) by addressing the underlying issues in food availability and stigma associated with food insecurity

**Economic viability:** Increase the percentage of Oregonians earning a livable wage by raising public awareness of the correlation between health and economic sufficiency and advocating for evidence-based policies to improve economic sufficiency.

**Cost of caregiving:** Improve the health of all individuals and families in Oregon by ensuring they have access to high-quality, culturally responsive, affordable care giving services and supports when needed, from birth to death and when life demands it.

**Physical environment:** All people in Oregon live, work, play in a safe and healthy environment and have equitable access to stable, safe, affordable housing, transportation and other essential infrastructure so that they may live a healthy life.

# Public Comment

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Oregon  
Health  
Authority

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# Next Steps & Final Thoughts

-+/Delta feedback review

- Next subcommittee meeting is December 20<sup>th</sup>
- Homework: Review documents, share ideas in basecamp, conduct landscape assessment at next workgroup meeting.