OREGON PARTNERSHIP MEETING

Thursday, April 11, 2019



800 NE Oregon Street, Room 915 Portland, OR 97232

Webinar Link: <u>https://global.gotomeeting.com/join/890713053</u> Conference call line for audio: <u>+1 (669) 224-3412</u> Access code: **890-713-053**

Members in attendance (online Webinar meeting): Alicia Ramirez, Annie Valtierra-Sanchez, Cat Livingston, Clarice Amorim Freitas, David Bangsberg, Erin Schulten, Frank Franklin, Holden Leung, Jim Rickards, Katie Harris, Kim Sogge, Paul Virtue, Rebeckah Berry, Victoria Warren Mears, Kirt Toombs, Tom Jeanne (for Katrina Hedberg)

Members absent: Brian Gibbs, Ernesto Fonseca, Katrina Hedberg, Kelle Adamek-Little, Laura Williams, Lee Po Cha

Facilitator and Staff: Christy Hudson, OHA-PHD, Kati Mosely, OHA-PHD, Sara Beaudrault, OHA-PHD, Kati, Jenny Subil, OHA-PHD, Leann Johnson, OEI

Meeting Objectives:

- Provide update on subcommittee formation
- Finalize health equity framework
- Discuss criteria for strategy identification

Welcome, introductions and meeting purpose

Christy provided an overview of the meeting objectives, which include updating PartnerSHIP members on the progress of subcommittee recruitment, an overview of the updated health equity framework to be approved by PartnerSHIP and a discussion of criteria to guide subcommittee workgroups in strategy formation.

Public Comment

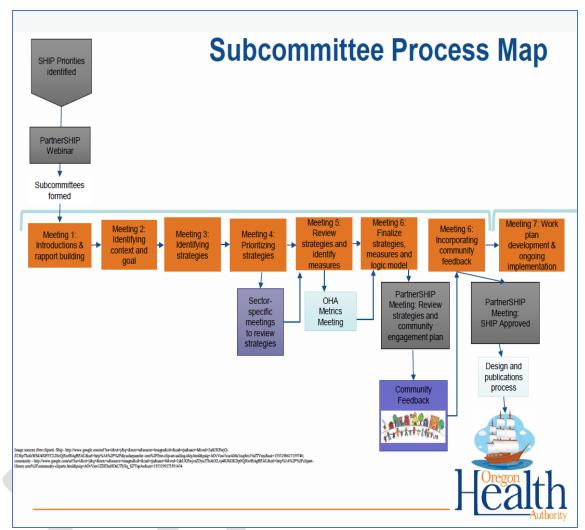
Christy opened the line for public comment. No public comment provided at this time.

Update on subcommittee formation

Christy gave an update on the progress of subcommittee recruitment and provided an opportunity for PartnerSHIP members to confirm and correct their own Subcommittee group roles. The following questions were asked during this time:

- Are there any child psychologists or child specialists serving on the Adversity, Trauma and Toxic Stress subcommittee?
 - Christy responded that she believes there is but will follow up to confirm.
- Christy also provided the following updates:
 - The State of Oregon is convening the Alcohol and Drug Policy Commission (ADPC) that will hold a community engagement effort similar to the State Health Improvement Plan (SHIP). To avoid duplicative efforts, the SHIP will look to ADPC to provide recommendations on substance use issues. The SHIP workgroup will skew more towards discussing strategies to address behavioral health.
- Holden commented that there seemed to be a lack of culturally specific providers. Holden will help facilitate communication to recruit through the Alliance of Culturally -Specific Behavioral Health Providers and Programs.
- Cat asked if the behavioral health group is addressing behavioral health at all ages
 - Christy confirmed that she is working to ensure that this happens and is working with Jackie Fabric to engage community advisory groups from across the lifespan
 - It was suggested that Dr Brian Park, who has been doing equity work around preventive care, would be a good for the behavioral health subcommittee. Cat will provide Christy with contact information.
- Christy asked the PartnerSHIP to contact her if there are any requested changes or additions in subcommittee members.

• Christy provided an overview of the meeting timeline and structure based on the process map below. It is planned that the first subcommittee meeting will be in June 2019:



- Subcommittee work will continue after the SHIP is published. The groups will need to finalize workplans. Additional people may need to be brought in. Workplans will be updated annually through implementation.
- Christy shared the original timeline has been pushed back as it is important to
 ensure that there is time for people to be recruited and engaged with the
 subcommittee groups. Though it is taking longer than anticipated, there is a
 value on community partnership and community feedback which takes a bit
 longer. Christy requested the permission of the PartnerSHIP to push back the
 timeline and invited feedback with any concerns and
 questions.
- The following feedback was given regarding the adjusted timeline:
 - o It is better to do it right than try to rush it

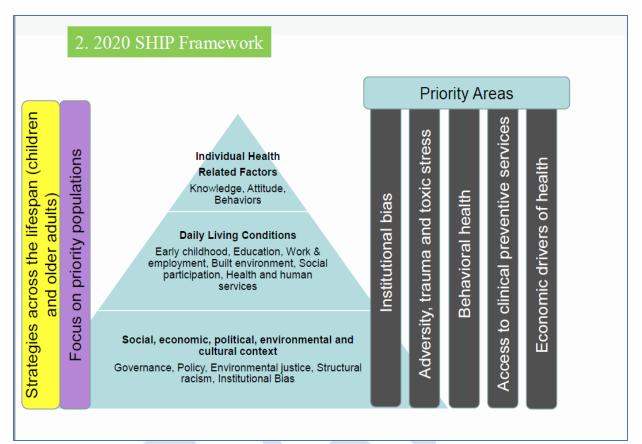
- Erin provided feedback that having the priorities identified is already helping the local public health department and she currently has enough information to move forward with their CHIP. They extended timeline is okay in her eyes.
- Christy thanked the PartnerSHIP for patience and support and stated that it is important to make sure that we have the right people in the subcommittee groups.

Update on Framework

• The purpose of the framework is to provide organization and structure for the subcommittees. Christy presented an updated framework based upon the feedback from the February 12, 2019 PartnerSHIP #3 meeting:

Feedback from February meeting

- Racism and institutional bias
- Lifespan approaches
 - Emphasis on children and older adults
- Economic inequalities
- Climate change
- Crosswalk framework with health impact pyramid
- The updated framework intends to fold in the feedback provided to guide the subcommittee in creating strategies and measures. The following is a picture of the proposed 2020 SHIP Framework:



- Feedback was given in response to the proposed framework:
 - Cat commented that it seems like the framework strongly deemphasizes any clinical interventions. Suggested that the top tier, Individual Health Related factors, include clinical interventions.
 - Clarice suggested that the pyramid be flipped upside down. This could send the message that we are focusing more on just individual factors rather than the stronger emphasis on social, economic, political, environmental and cultural context.
 - Christy stated that there is also flexibility with the framework. Changes can be made as subcommittees provide feedback as to whether the framework is working.
 - Tom suggested that the framework be represented as concentric circles vs a pyramid shape
 - Christy took a pulse of the members on the call and concentric circles were approved

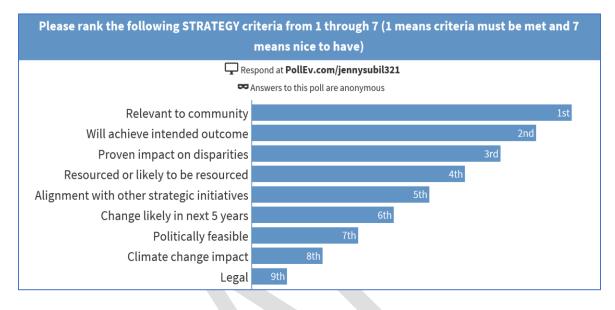
Strategy Criteria

- Christy moved the group to discussion on proposed criteria for strategies. These criteria will help in providing consistency to the subcommittees as they begin to prioritize strategies. Christy asked the group for their ideas on what proposed strategy criteria could look like:
 - Cat stated that it is important for the strategy to be transformative and to provide a solid evidence base
 - Kati stated that a solid evidence base is important. She added that it is also important to use language that is broad enough to include other sectors outside of health who may not have as much peer reviewed evidence (as the health sector). It is a priority to create space for lived experience and the language we use needs to be broad and accommodating for those that work outside of health.
 - Victoria suggested for strategies that are feasible. She clarified that feasible meant things that could actually happen and provided the example that saying we are going to solve the homelessness crisis in Portland by building 4,000 houses for people tomorrow is not an example of a feasible strategy.
 Feasible strategies are practical solutions.
- Christy shared some possible strategy criteria and noted that the feedback already provided was included in the proposed criteria. The following is a picture of the proposed criteria:

Selection criteria	Definition
Proven impact on disparities	 Strategy addresses disparities in priority populations (POC, low income, disability, LGBTQ, rural/frontier)
Will achieve intended outcome	Right strategy for the goal
	 Strategy aligns with evidence-based, promising practice or is a good idea
Politically feasible	Ability to influence and implement a policy change
Resourced or likely to be	Funding is available or likely to be available
resourced	Local expertise exists
Relevant to community	Strategy is in use in local community
	• Strategy is realistic and of interest from a local perspective
Alignment with other strategic initiatives (locally or federally)	Strategy nationally recognized or recommended
Change likely in next 5 years	Impacts likely to be seen within 5 years of implementation
Addresses lifespan	Relevant to a wide range of age
	Relevant to young children or older adults
Legal	Currently allowed by law

- The PartnerSHIP provided feedback to the proposed criteria:
 - Victoria commented that she liked the proposed wording of feasible
 - Cat suggested that there could be a problem with legal as a criteria.
 She stated that there may be important strategic priorities that would involve changing the law and proposed striking legal from the list.
 - Christy stated that the list was also a starting point and will be amended as discussions arise.

• The group tested out a live poll to rank the proposed strategies using the Poll Everywhere platform. (The group was instructed that legal and climate change should be removed from consideration prior to voting). The poll provided the following results:



Next Steps and Final Thoughts

- Christy stated that finalizing subcommittees is the number one goal. Doodle polls for scheduling subcommittees should be sent out in early May 2019, with an intention to prioritize the scheduling of recurring meetings.
- Christy encouraged the PartnerSHIP to contact her with any questions or concerns and requested that they fill out the meeting evaluation.
- Christy thanked the group for their support and engagement in the work.