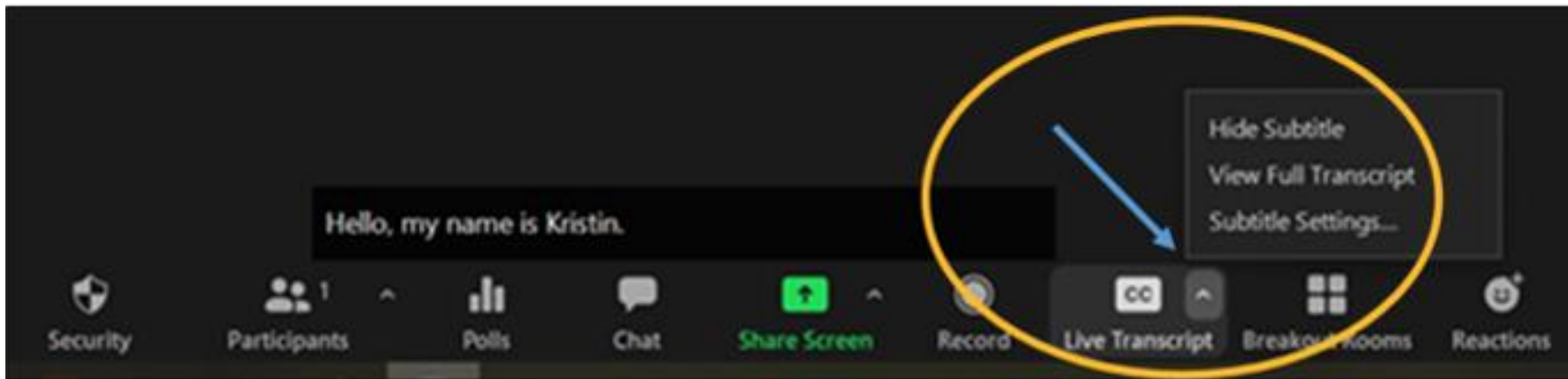


Closed Captions

- Pueden acceder a los subtítulos en español a través del enlace compartido en el chat.
- For English Closed Captions:



Click the small arrow next to “CC Live Transcript” to access caption controls. You can hide the subtitles or view the full transcript.



OREGON
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AUTHORITY

04/09/2025

State Health Assessment Steering Committee Meeting

April 14, 2025

Public Meeting

Members of the public welcome!

- Conversation space is held for committee members
- We will hold space for public comments in the final 5 minutes of the meeting.
 - If there are multiple members of the public who would like to speak, we will limit speaking time to 2 minutes per person

Agenda

- Team overview, group agreements
- Updates from Dr. Sidelinger
- SHIP strategies
- Break
- Tribal presentation
- Next steps
- Public Comment

OHA Staff

- Jameela- Steering Committee+ Community Engagement Lead
- Rose- SHA Data/Assessment Lead
- Victoria- SHA Lead, Internal Engagement and Communications
- Sara- Manager; Fiscal and Leadership Support
- Cintia- Healthier Together Oregon Strategist



MetGroup Facilitation Team



Kirsten Gunst, Senior Director



Debra Clark, Director



Kristin Gimbel, Executive Vice
President

Group Agreements

- 1. Lean forward, lean back.** *Share space. Allow room for different opinions. Don't be afraid to share your perspective! This is a judgment-free zone.*
- 2. Curiosity is queen.** *Be open to continuous learning along the way.*
- 3. Explain and unpack jargon and acronyms.**

- 4. Be present, be authentic.** *Show up as fully as you can in the way that is most comfortable for you. ("Be present, be authentic", as a way to invite others to feel comfortable being present at the table as themselves, and meet others in the same way?)*
- 5. Honor all experiences and expertise.** *Appreciate others as human beings with abundant and interconnected experiences.*
- 6. Extend grace to each other and to ourselves.** *Assume best intentions.*



OHA Steering Committee Updates

Website for updates

Monitoring Federal Changes and any Impacts on Oregon

About OHA

Contact Us

Budget and Legislative
Information

Committees, Commissions and
Workgroups

Grants and Contracts

OHA News and Notices

OHA Leadership Team

OHA Director

OHA Programs and Divisions

OHA Rulemaking

Public Meetings

Questions and Comments

Reports and Data

Oregon Health Forward

Topics A to Z

[Español / Spanish](#)

March 28, 2025

The U.S. Department of Health & Human Services (HHS), through the Centers for Disease Control and Prevention (CDC) and the Substance Abuse and Mental Health Services Administration (SAMHSA), abruptly terminated several COVID-era grants and funding for Oregon Health Authority programs. OHA is continuing to actively assess the full impact of these reductions and will have details to share on this page soon.

View the [March 27 news release here](#).

Every change in federal administration carries potential impact on Oregon and, like other health agencies across the country, OHA is monitoring these changes closely.

At this time, no changes have been made to [Oregon Health Plan](#) and [Healthier Oregon](#).

It is important for people in every Oregon community to access the health care and other services they need.

OHA leadership and subject matter experts continue to evaluate administration actions and any impact they may have in Oregon.

OHA remains clear-eyed and committed to [its 2030 goal and Strategic Plan](#). OHA will continue to champion affordable and quality care, and to safeguard essential health freedoms and benefits. There has been and will be no deviation from this mission.

To keep Oregon informed, this page has resources on the following topics:

- Medicaid / Oregon Health Plan (OHP)
- Health Provider Resources
- Health Care & Immigration
- Reproductive Health
- Gender-Affirming Health Care

2025 Arc of Work

Oregon State Health Assessment Steering Committee Monthly Focus & Priorities



Overview of SHIP



Framing: Sharing our values, mission and vision for the work. This is where we can talk about equity, access, institutional biases and the current landscape in which we are planning to do the work



Priorities: High-level identification of what matters most or what we're hoping to achieve



Strategies: How we intend on doing the work to address our priorities



Metrics: How we measure the work being done



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SHIP Strategies

What is a strategy; what we're doing

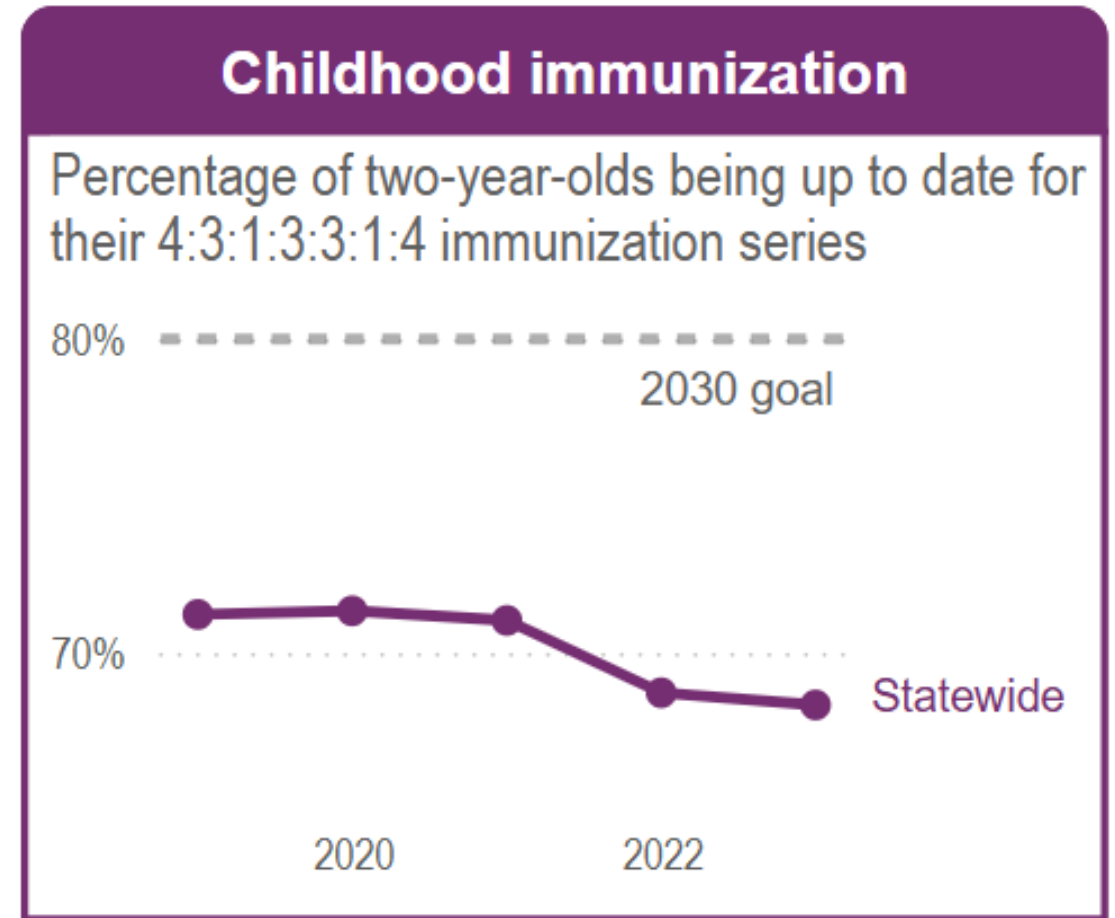
Priorities: This identifies what matters most or what we hope to achieve to improve health and eliminate health inequities in Oregon.

Strategies: Measurable steps we will take to address the priorities. This shows our approach to the priority

Coupled with measurement

Metrics: State Population Health Indicators for which we will establish targets/goals that we will strive to reach by the end of 2029

Measures: Process measures for work being done through strategies. These measures show whether we are on track to accomplish strategies by the end of 2029. These are independent of metrics



A second immunization example

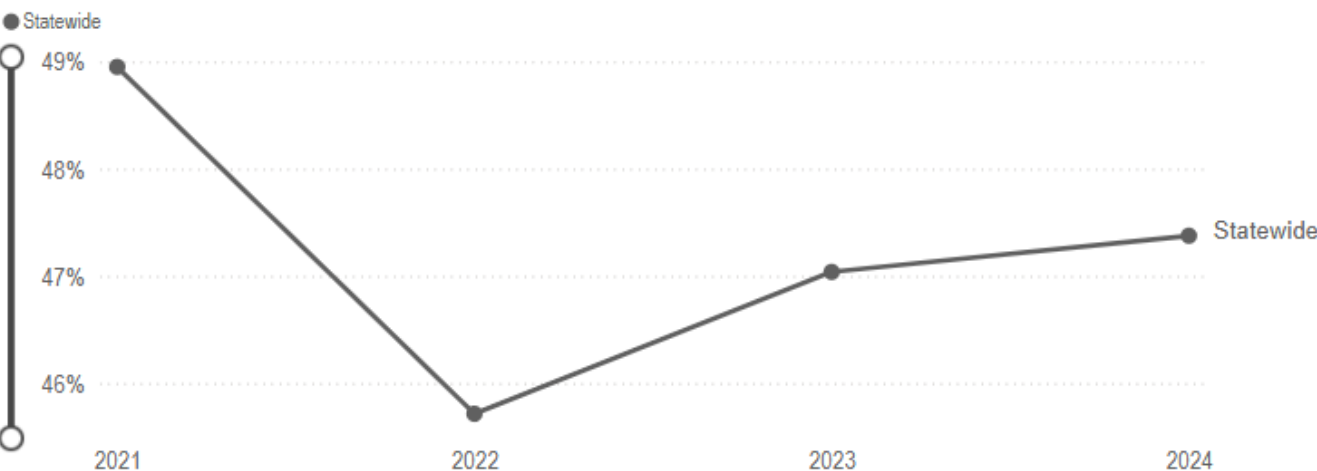
Influenza immunization for people ages 65+

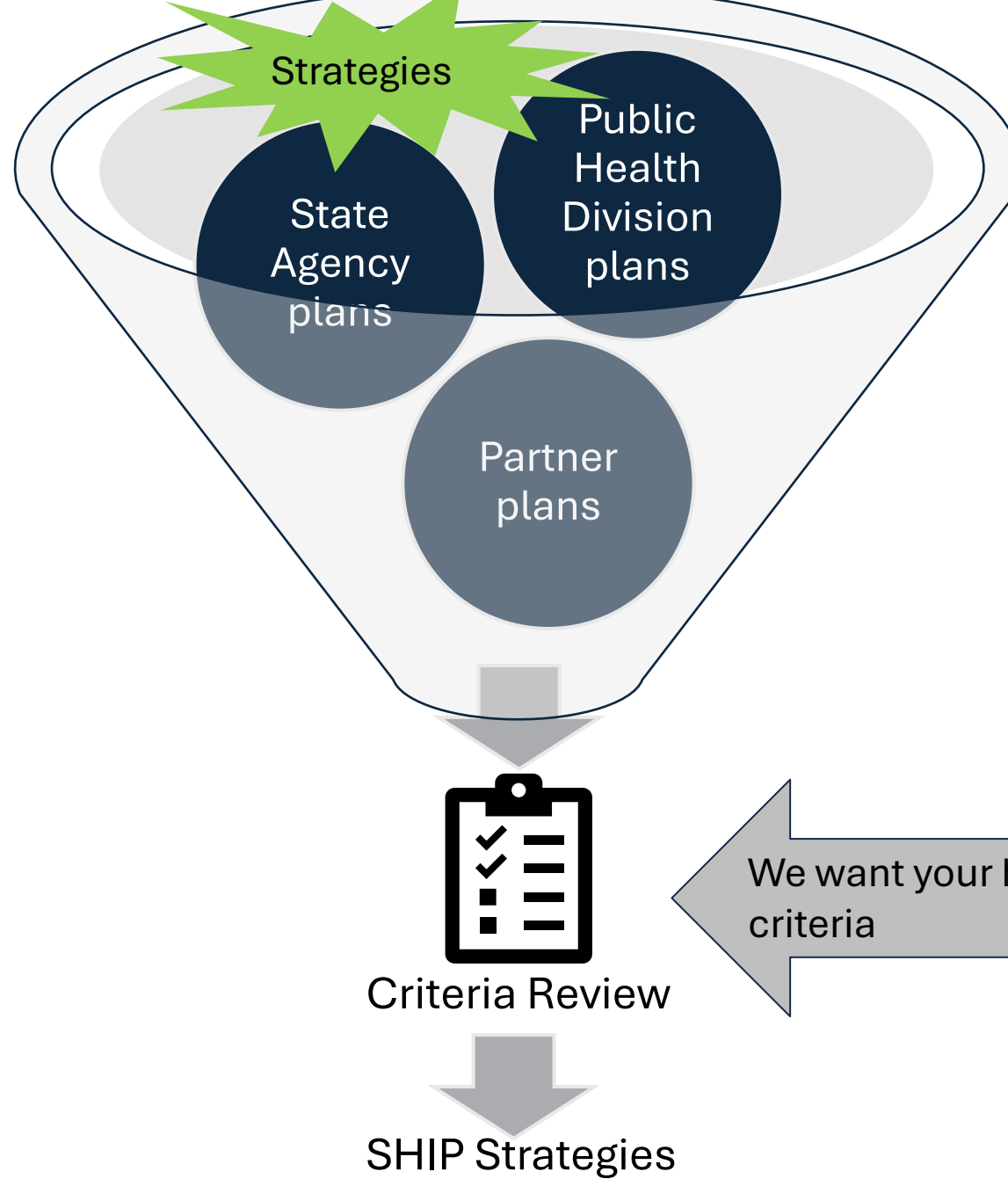
Percent of people ages 65+ who have received influenza vaccine by end of flu season



Show data by:

Statewide





Example of how you informed SPHIs:

SPHI Considerations

- **Indicators presented in the context of influences of social determinants of health**
- **Strength-based framing**
 - Avoid deficit-based framing when possible
- **Prevention or upstream alignment**
- **Populations impacted**
 - Culturally specific, regional, disability, age and more.
- **Impact on the lives of Oregonians**
- **Data quality**
 - Reliability, representative, meaning making
- **Future outlook**
 - Data updates, methods stability
- **Alignment with OHA/PHD priorities**
 - Healthier Together Oregon, OHA strategic plan, PHAB accountability metrics
- **Example of other public issues**
 - How well do these highlight broader public health issues?

Proposed Selection Criteria: Strategies

- ☐ Measurable
- ☐ Acceptable to people in Oregon
- ☐ Work you are already doing, plan to do or could do by the end of 2029
- ☐ Advances health equity
- ☐ Led with or by state public health, either directly or through influencing the work of other partners or sectors

Thoughts?

What would you add, remove or change?

Hold: Tribal Presentation

Next up



We're gathering community input!



Rural Community Engagement Conversations continue



Community Engagement Subcommittee



Our next meeting will be in person! May 27-29

Public Meeting

- Members of the public welcome!
- Conversation space is held for committee members
- We will hold space for public comments in the final 5 minutes of the meeting.
 - If there are multiple members of the public who would like to speak, we will limit speaking time to 2 minutes per person

Thank you!

Contact Jameela Norton with any questions, concerns, thoughts, or feedback you'd like to share jameela.norton@oha.oregon.gov



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Extra/Reference Slides

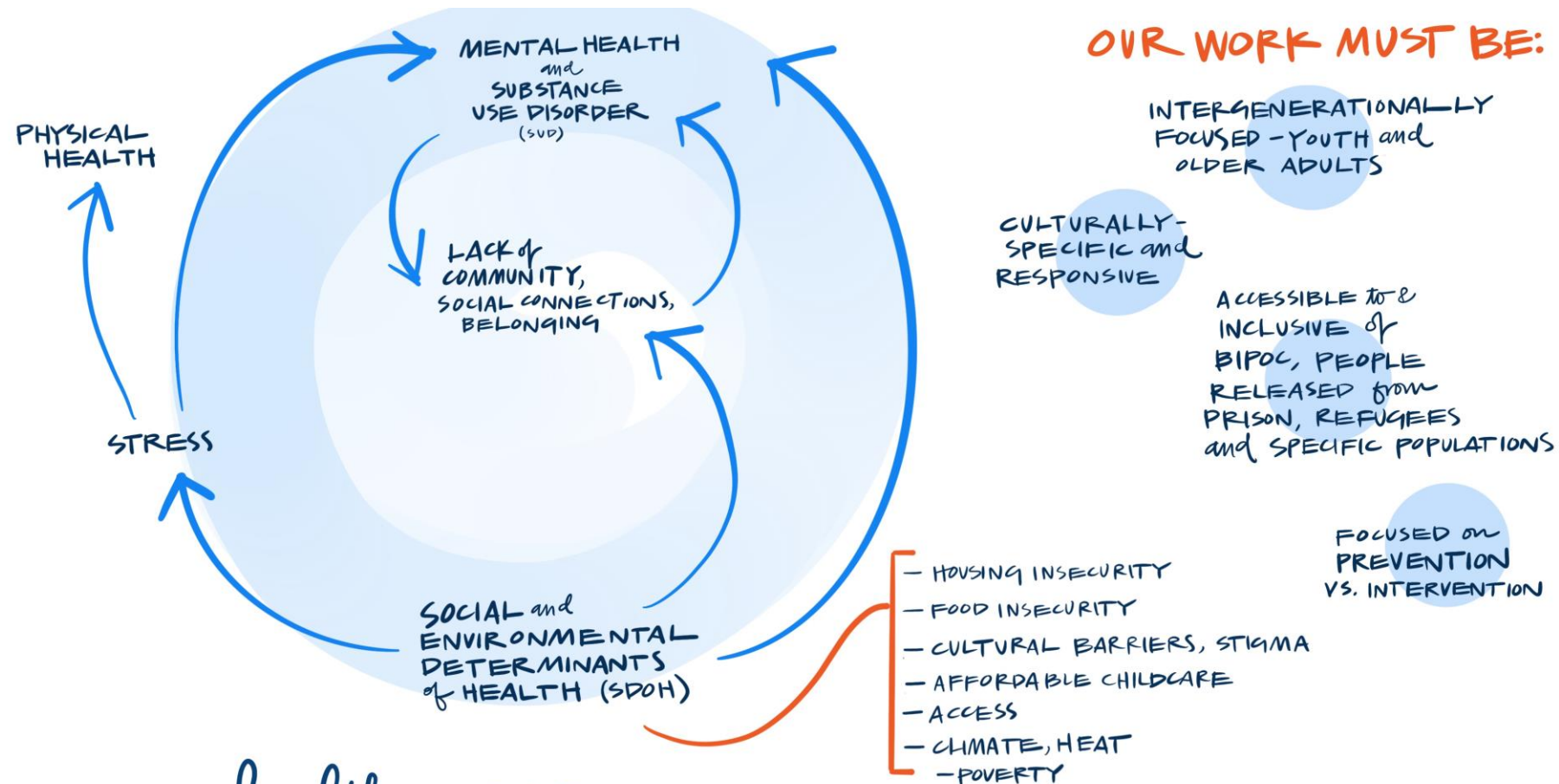
Acronym Check

- CBO- Community Based Organization
- CHA- Community Health Assessment
- CHIP - Community Health Improvement Plan
- LPHA- Local Public Health Authority
- OHA- Oregon Health Authority
- PHD- Public Health Division
- SHA- State Health Assessment
- SHIP- State Health Improvement Plan
- SPHI – State Public Health Indicator

Acronym Check Continued

- SPA – Starting Point Assessment
- REALD- Race Ethnicity, Language and Disability
- SOGI- Sexual orientation or gender identity
- Census- United States Census
- BRFSS- Behavioral Risk Factor Surveillance Survey
- SPHI- State Population Health Indicator

Health Topic Priorities



STATE health ASSESSMENT

STEERING COMMITTEE MEETING | OCTOBER 21, 2024

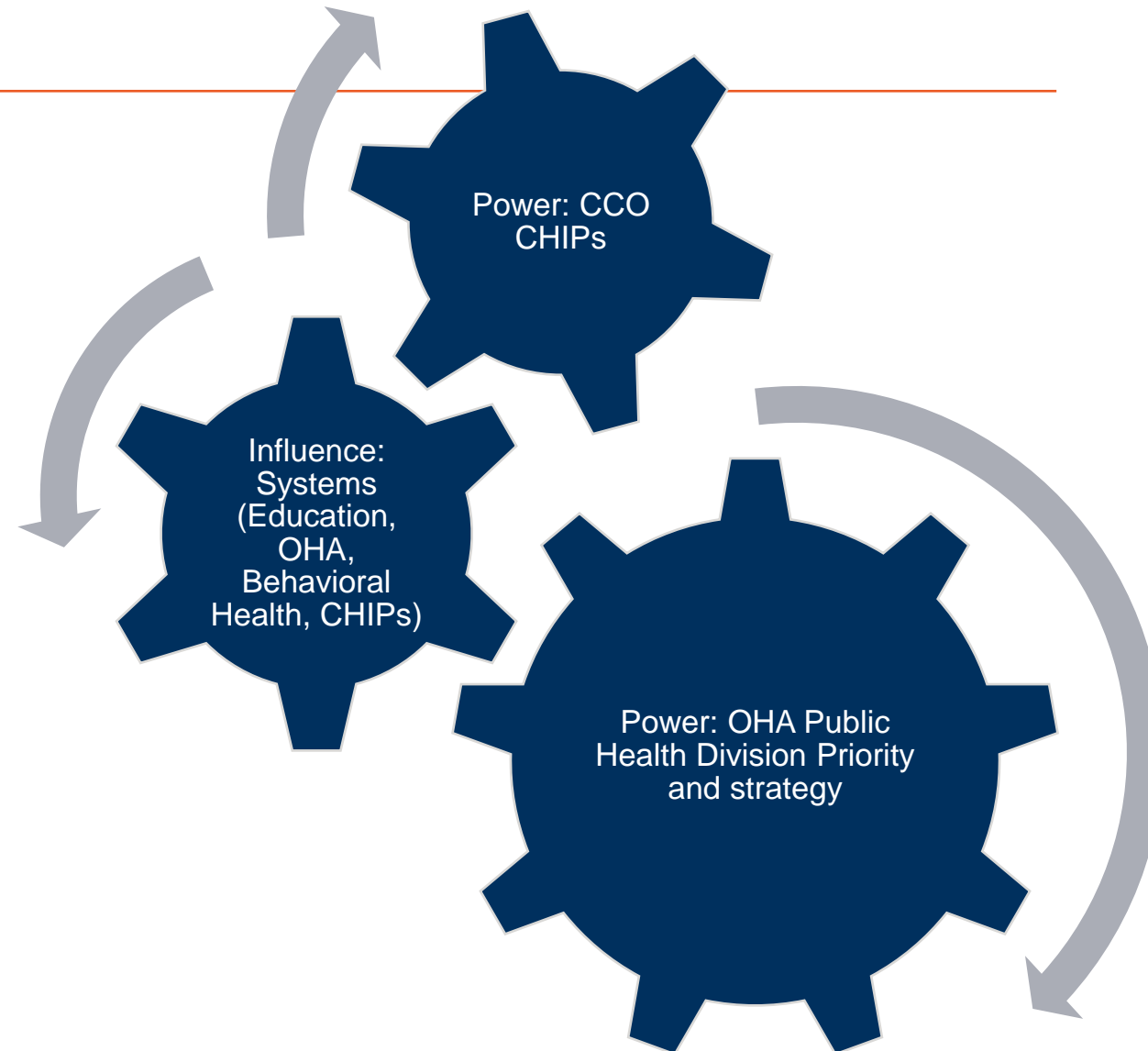
REILLY DOW
for METROPOLITAN
GROUP

Considerations

Oregon Health Authority's Public Health Division will be the primary organization working to achieve these priorities

The health priorities, goals, and objectives identified in local CCO CHPs must include **at least two** Statewide Health Improvement Plan strategies

Strategies help direct areas for shared work



GAP TOPIC AREAS

INFECTIOUS DISEASE

- PREVENTABLE ILLNESSES
- COVID

CHRONIC DISEASE

- AUTOIMMUNE INFLAMMATION DISEASES
- SCIATICA
- ARTHRITIS
- DIABETES
- LUNG DISEASES
- HEART DISEASE
- RESIDUALS OF STROKE

INJURY VIOLENCE PREVENTION

- YOUTH VIOLENCE
- SHOOTINGS
- DOMESTIC VIOLENCE
- VIOLENT CRIMES & HOMICIDES
- HOMELESS WOMEN
- INCARCERATED POPULATION
- MOTOR VEHICLE ACCIDENTS
- FALLS FROM OLDER ADULTS
- SUICIDE

BEHAVIORAL HEALTH (GAP TOPIC AREAS)

- TRAUMATIC RESPONSE FOR NEURODIVERSE COMMUNITIES
- SUBSTANCE ABUSE

MENTAL HEALTH

- OVERDOSE
- DRUG USE
- SUICIDE
- LONELINESS

PREGNANCY/BIRTH/REPRODUCTIVE HEALTH

- RACIAL INEQUITY IN BIRTH OUTCOMES
- ✓ LANGUAGE & CULTURAL BARRIERS

SOCIAL & ENVIRONMENTAL HEALTH

- CHILDHOOD LEAD EXPOSURE
- BLOOD LEAD LEVELS
- AIR QUALITY
- ✓✓ WILDFIRES & DRINKING WATER SCARCITY
- CLIMATE CHANGE
- DEATH FROM HEAT & COLD
- ✓✓ FOOD SECURITY
- ✓✓ ACCESS TO HEALTH CARE
- ✓✓ EMERGENCY PREPAREDNESS
- ✓✓ LANGUAGE & CULTURAL BARRIERS

- HISTORICAL TRAUMA
- HOUSING & SHELTER
- ✓✓ HOMELESSNESS ✓✓
(INFLUENCES ALL OF THE ABOVE)

✓
COMMUNITY & CONNECTION AS PREVENTION

✓
UNDERSTANDING OF CULTURE BEYOND RACE & ETHNICITY

✓
BRING IN TRADITIONAL HEALTH CARE

✓
GENERATE INCLUSIVE & TRUST WORTHY ACCESS FOR ALL!

✓
PROVIDE OPPORTUNITIES FOR LONG TERM ⊕ HOLISTIC HEALTH OUTCOMES



STATE health ASSESSMENT
STEERING COMMITTEE MEETING

OCTOBER 28, 2024

✍ ANDRE MEDINA
for METROPOLITAN GROUP

Priorities for community and partner feedback:

- Healthy Environments
- Emergency preparedness and response
- Health across the lifespan
- Disease prevention and health promotion
- Physical, mental and community safety
- Mental well-being and behavioral health
- Equitable social conditions