

State Health Assessment Steering Committee

January 13th, 2025

Committee Members: Taw “TJ” Foltz, Alisha Overstreet, Annie Valtierra-Sanchez, Carrie Brogoitti, Cheryl Carter, Christine Kan Lee, Dean Sidelinger, Emily Mosites, Hannah Ririck, Jessica Hamner, Julia Brown, Liberty Avila, Mica Contreras, Sadie Siders, Sokho Eath, Christa North

OHA Staff: Jameela Norton, Sara Beaudrault, Rose Harding, Cintia Vimieiro, Joanna Yan, Juanita Heimann,

MetGroup: Kirsten Gunst, Debra Clark

- **Welcome and introductions, group agreements shared**
- **-Icebreaker question prompt:** What is your motivation or inspiration related to this work as we enter 2025 ?
- **OHA Staff Presentation: Arc of our work: SHIP Redevelopment 2025- Jameela**
 - SHIP redevelopment
 - We are updating the 2020-2024 SHIP into the 2025-2029 SHIP through Community Input, OHA-PHD Input and Steering Committee Input
 - **Timeline:**
 - Feb 2025: Discuss / finalize proposed Priorities: This will go out to Community for input. Engage with Subject Matter Experts
 - Discuss / Identify strategies that address shared health priorities and goals
 - Possible overview of Tribes in Oregon presentation
 - OHA Strategic Plan Alignment
 - Late Spring / Early Summer:
 - Community input about priorities will be shared with the Steering Committee
 - Steering Committee will finalize recommendations on SHIP priorities
 - Compose list of SHIP Strategies for community input
 - Possible in-person meeting
 - Summer 2025:
 - Discuss Indicators aligned with priorities
 - Community Engagement/input about possible strategies
 - Final recommendations on SHIP strategies
 - Early Fall:

- Finalize SHIP recommendations
- Reflections and celebration

○ **SHA Update: Rose Harding**

- Based on Steering Committee feedback – we’ve changed how we are writing / framing out our State Population Health Indicators (SPHIs)
- Updating sections and landed on 31 SPHIs, as well as a belonging indicator from the Youth Data Council.
- Updated sections include: congenital syphilis rates now focused on people in Oregon who can become pregnant (afab, ages 15-44)
- Currently expecting the draft to be prepared for the Steering Committee during February

○ **State Health Improvement Plan: Cintia Vimieiro**

- A roadmap that outlines strategies to address our state’s biggest health priorities
- Inform policy, partnerships, and investments for OHA and other state agencies. Alignment with OHA’s Strategic Plan
- Healthier Together Oregon (HTO) was the first time this process prioritized community voice

○ **Power and Influence of SHIP**

- Power: OHA Public Health Division Strategy
- Influence: Systems (Education, OHA, Behavioral Health, CHIPs)
- Power: CCO CHIP Efforts

○ **2020-2024 SHIP Priorities:**

- Institutional bias
- Adversity, trauma and toxic stress
- Behavioral health
- Economic drivers of health, such as housing, transportation and living wage jobs
- Access to equitable preventive health care

○ **What Happened:**

- COVID-19
 - HTO released during the early pandemic, which led to staff being pulled away and caused poor communication of the core messages
- Established a PartnerSHIP – Community Oversight Group

- Partnerships outside of OHA lead to the creation of inroads to push on projects with less direct connections to public health
- Provided small grants to partners for CHIP projects
 - Provided funds to organizations to conduct a project in their community that aligned with their CHIP and with HTO.
- In partnership with Benton County – Provided 20 Scholarships for people to be certified as community health workers.
- Many lessons learned related to capacity, scope and opportunities for deeper collaboration
 - Implementation of the SHIP ran into issues as it was not communicated that plans extended beyond the scope of actions that could gain traction
 - Housing impacts health, and is where OHA has influence, but is outside of areas where OHA can move things forward.
 - Hoping to bring in Subject Matter Experts, who can bring what options are available to their OHA divisions / departments to the Committee for further exploration
 - The issues brought up then are still core drivers, with OHA-PHD cognizant of these factors as they work towards the goals that OHA can accomplish
- Role of this Steering Committee
 - Using your individual, personal and professional lens/networks, provide guidance and recommendations to OHA / PHD Staff
 - Establish Priorities for 2025 SHIP
 - Identify preferred Strategies
- CHA / CHIPS
 - Community Health Improvement Plan
 - Every 3-5 years CCOs, Local Public Health Authorities, Hospitals and community members come together to do community health assessments (CHA) and then they develop community health improvement plans (CHIP)
 - CCOs are required to perform certain activities to align with the SHIP
 - Committee member brought up ways in which having new SHIP priorities and strategies could cause challenges locally since CCOs are required to align with HTO strategies.

- Committee member asked about OHA's expectation for CCOs to collaborate with partners. OHA's focus is to push for collaboration, and influence things where possible, guiding partners with aligning interests and reducing barriers to collaboration.
 - Committee member raised concerns about CCOs potentially aiming to meet requirements to align with HTO strategies by selecting "low-hanging fruit". The current goal is to implement the next SHIP differently, ensuring resources to assist CCOs and partners locally and tightening relationships. Additionally, CCOs still need to justify why the requirements picked align with community interests.
 - CCOs identified broader priority areas and different strategies that were achievable, integrating community feedback meaningfully and thoughtfully, with goals aligning with the HTO's requirements
 - Reciprocity between CCOs and the State is key: CCOs connecting with State on SHIP and ensuring that the CHA and CHIP are reflective of the regional efforts and needs.
- Discussion Topic / Break-Out Rooms
 - Pivoted away from planned agenda item of breakout groups in favor of open discussion on the committee members' experiences, reflections and insights on CHIP work. Members had the following feedback;
 - Despite efforts, things have slowed due to issues prioritizing needs and narrowing down from a list that is outside of scope
 - Housing is a health priority, , but OHA is not the Housing Agency. Our goal is to develop strategies that reflect public health's work to support safe, healthy and stable housing. and needs?
 - There is a need for focus to ensure efforts don't collapse on themselves, while still maintaining forward momentum
 - Difficult to move away from the big social determinants of health when they're so interwoven with the text, obscuring specific regional strategies and goals.
 - Lessons Learned; review of CHA / CHIPs
 - All available CHAs and CHIPs were reviewed to see how CCOs are using the priority areas of HTO in their plans. This was not done in the previous SHIP, and this step will allow for a better understanding of what occurred on the regional level over the last five years.
 - The priority areas of alignment with HTO that were present among CHAs and CHIPs are:
 - Behavioral health
 - Economic drivers of health

- Access to equitable preventive healthcare
- The priority areas with little to no alignment with HTO are:
 - Institutional bias
 - Adversity, trauma, and toxic stress
- Limitations of the review include that is a not-comprehensive review, the plans reviewed were provided by the Transformation center which does not have access to plans from LPHAs
- Potential emerging priorities:
 - Sense of connection and belonging
 - Cross-sector collaboration (e.g. collaboration between hospitals, community organizations, increasing housing supports)
 - Environmental health (e.g. wildfires, heat-related illnesses, flood risks)
 - These are primarily upstream and preventative measures for health.
- This information is going to be put into the SHA to tell the story of health in Oregon at both the state and local levels
- Committee member asked for clarification on what it would mean for a CCO and their priorities to be brought into alignment.
 - CCOs will need to align some of their strategies with the SHIP, but each CCO and region will have their own priorities and opportunities for alignment.
- Starting Point Assessment
 - Engaged two groups for feedback: The PartnerSHIP (Previous HTO Steering Committee) and OHA PHD Leadership
 - PartnerSHIP – More resources needed; long-term focus on aligning community level work w/ SHIP priorities
 - PHD Leadership – Division leadership and program staff must be engaged early and sustained throughout
- Next Meetings:
 - January 29th, 2025 – Community Engagement Subcommittee Conversation
 - Additionally, a Rural Community Engagement Subcommittee Conversation
 - February 2025: SHIP proposed Priorities (we will take these and get community input)
- Public Comment
 - No comments offered by members of the public at this time.

- Committee member brought up the need to ensure Tribal community engagement.

Meeting Ended