

CROSS AGENCY HEALTH IMPROVEMENT PROJECT

Meeting Agenda

Meeting Date:	September 8 th , 2015
Meeting Time:	1:30-3:00 pm
Meeting Location:	Conference Rm 166, HSB Building, 500 Summer St. NE, Salem <i>Phone: (877) 810-9415</i> <i>H:517094</i> <i>Part:975182</i>
Meeting Purpose:	Status update and next steps
Regular Attendees:	<p>OHA/Health Systems: Rhonda Busek, Karen Wheeler, Justin Hopkins</p> <p>OHA/Health Policy and Analytics: TBD</p> <p>OHA/External Relations: TBD</p> <p>OHA/Equity and Inclusion: Leann Johnson</p> <p>OHA/Operations and Finance: TBD</p> <p>OHA/Oregon State Hospital: Vicki Duesterhoeft</p> <p>OHA/Public Health Division: Lillian Shirley, Priscilla Lewis</p> <p>DHS/Operations: Jeremy Emerson</p> <p>DHS/Aging and People with Disabilities: Don Erickson</p> <p>DHS/Child Welfare: Jason Walling</p> <p>DHS/Developmental Disabilities: Debbi Kraus-Dorn</p> <p>DHS/Office of Equity and Multicultural Services: Oscar Herrera</p> <p>DHS/Self Sufficiency: Belit Burke</p> <p>DHS/Vocational Rehabilitation: TBD</p> <p>HR & Shared Services: Tracy Garcia, Robert Salinas</p> <p>Public Employees Benefits Board: Margaret Smith-Isa</p> <p>Service Employees International Union: Matthew Jaqua</p>
Staff:	Kirsten Aird, Beth Sanders – OHA Public Health Division

Agenda Item, background information and objectives	Time
1) Welcome and Introductions	1:30 – 1:35pm
2) CAHIP Successes & Lessons Learned in 2013-2015	1:35-2:00pm
<p>Background: Reporting interviews have been completed with CAHIP members on achievements from the 2013-2015 work plan. With this information, along with a set of indicators to measure long term improvement around CAHIP goals, a report has been drafted to evaluate CAHIP outcomes during 2013-2015.</p> <p>Objectives:</p> <ul style="list-style-type: none"> • Present PowerPoint of CAHIP outcomes • Reflect on successes and lessons learned during 2013-2105 • Solicit feedback on next steps on finalizing the evaluation report <p>Discussion: Kirsten presented a PowerPoint (see attached) that highlighted CAHIP successes during 2013-2015, as well as outcome measures to track progress around reducing tobacco use and obesity among DHS-OHA clients, consumers and employees. The group reflected on successes from the previous two years: Tracy and Robert discussed the launch of the Employee Wellness Policy; Vicki shared that the State Hospital is preparing menus from its diet manual and is interested in improving food choices offered by the Hospital's Kirkbride Café; Karen spoke of the Tobacco Freedom Policy survey and the statewide tobacco-free training to providers in addictions and</p>	

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mental health residential treatment facilities. CAHIP staff are in the process of finalizing a report that outlines CAHIP successes and outcome measures, which will be shared with DHS and OHA leadership.

Action steps:

- **Steering committee members will send feedback on the CAHIP outcomes report by Friday, Sept 11**

3) Nutrition Standards – Follow-up from April CAHIP Meeting

2:00-2:20pm

Background: At the previous CAHIP meeting, the Steering Committee discussed and prioritized four nutrition standards policy options. Because there was group consensus that each option had at least some importance, it was decided that the next step was to solicit guidance from the Joint Policy Committee for further direction.

Objectives:

- Present status update
- Identify next steps

Discussion: Heather Gramp of the OHA Public Health Division (PHD) summarized how CAHIP has so far considered nutrition standards: in September 2014, the steering committee received a general presentation about the role of food and beverages as a top driver of chronic disease; how food decisions are largely unconscious; and why, as a result, the field of public health has moved toward changes to the food environment as a key way to help people choose healthier options. An overview of PHD's *Healthy Meetings and Events* Guidelines was also shared. Based on interest and support, in April 2015, Heather came back to talk about the four main policy options for this work that we are seeing at local, state and national levels: 1) food served at meetings and events; 2) food served to institutional populations; 3) food available in cafeterias and cafes for private purchase; and 4) vending machines. The CAHIP Steering committee considered all of these and rated them on factors for reach, strength, equity, resource intensity, and acceptability and concluded that nutrition guidelines for food for private purchase and food served to institutional populations were most desirable. They also identified the resources to pursue this work, including: staff time from PHD's Health Promotion and Chronic Disease Prevention Section; experience from the State Hospital around implementing the Dash Diet in its menus for patients; and wellness committees to engage employees.

The committee next discussed what will be important to advance this work. They agreed to wait for direction from the Joint Operations Steering Committee. Kirsten is presenting to them in October and will seek guidance on their priority. Heather gave an overview of areas of work that are needed to implement a policy, and which could be supported by CAHIP members: identify which nutrition guidelines to use; outreach to employees with messaging and develop a communications campaign; inventory and assess DHS and OHA facilities and food service operations; and engage key stakeholders that hold food service contracts. Several members of the group have experience working with the Oregon Commission for the Blind, which is contracted by the State of Oregon to sell food in state facilities. There was then much interest in and discussion on various approaches to this work, such as pursuing pricing incentives; or starting with one specific area of nutrition standards, such as eliminating sugary beverages or the sale of large soda containers; or piloting in one locale.

Action items:

- **In October, Kirsten will solicit guidance from the Joint Operations Steering Committee on nutrition standards policy options that CAHIP could pursue.**

4) CAHIP 2015-2017 Work Plan

2:20-2:50pm

Background: With feedback from steering committee members during recent reporting interviews, a new CAHIP work plan has been drafted for 2015-2017.

Objectives:

- Present overview of proposed work plan activities
- Gather input on key questions around structuring the work plan
- Discuss how programs and divisions see their role within the work plan

Discussion: Based on the previous nutrition standards conversion, Kirsten proposed that the next CAHIP two-year work plan reflect the collective work shared by the steering committee as a whole, instead of only creating individual work plans for DHS programs and OHA divisions. Group members expressed interest in this, depending on what guidance is provided by the Joint Operations Steering Committee around CAHIP's scope in addressing nutrition standards. Several steering committee members see their role as advisory to the group's collective work. The group continued discussing CAHIP's role in addressing nutrition standards in DHS-OHA. Margaret expressed interest in sponsoring a pilot project of partnering with a vendor to promote a healthy product, paired with a health education

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campaign. Nate Singer, Deputy CCO of DHS Aging and People With Disabilities, shared that it may be helpful to collect data from a DAS work group that has already developed metrics around the volume of projected customers using vending machines, snack carts and other food venues.

5) Wrap Up and Next Steps

2:50-3:00pm

**Next CAHIP Steering Committee Meeting: November 13, 2015
Room 252, HSB Building, 500 Summer St. NE, Salem**