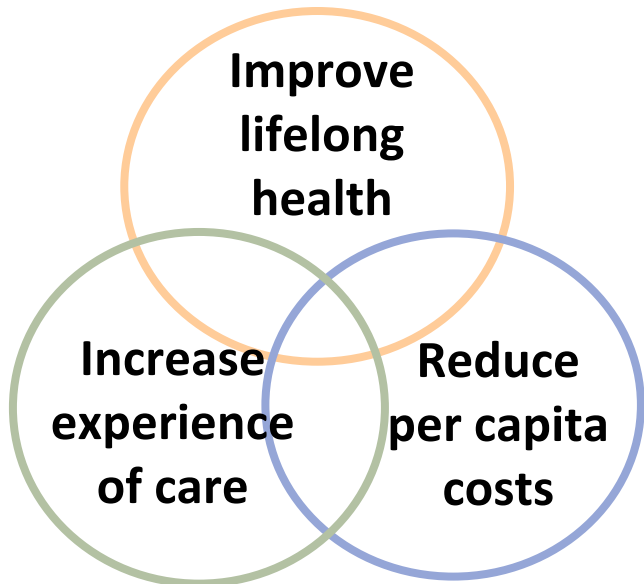


Oregon Health Improvement Plan Committee

Draft Goals and Recommendations

**Health Policy Board
July 13, 2010**

Good to Great



Triple Aim

Quality of Life for All Oregonians

-
- A thick black arrow pointing from the Triple Aim diagram towards the Quality of Life goal. The arrow is labeled with three bullet points: "• Health Policies", "• Health Information Technologies", and "• Involved Citizens & Communities".
- Health Policies
 - Health Information Technologies
 - Involved Citizens & Communities

Primary Goal of Health Improvement Plan Committee Defined by Oregon Health Policy Board

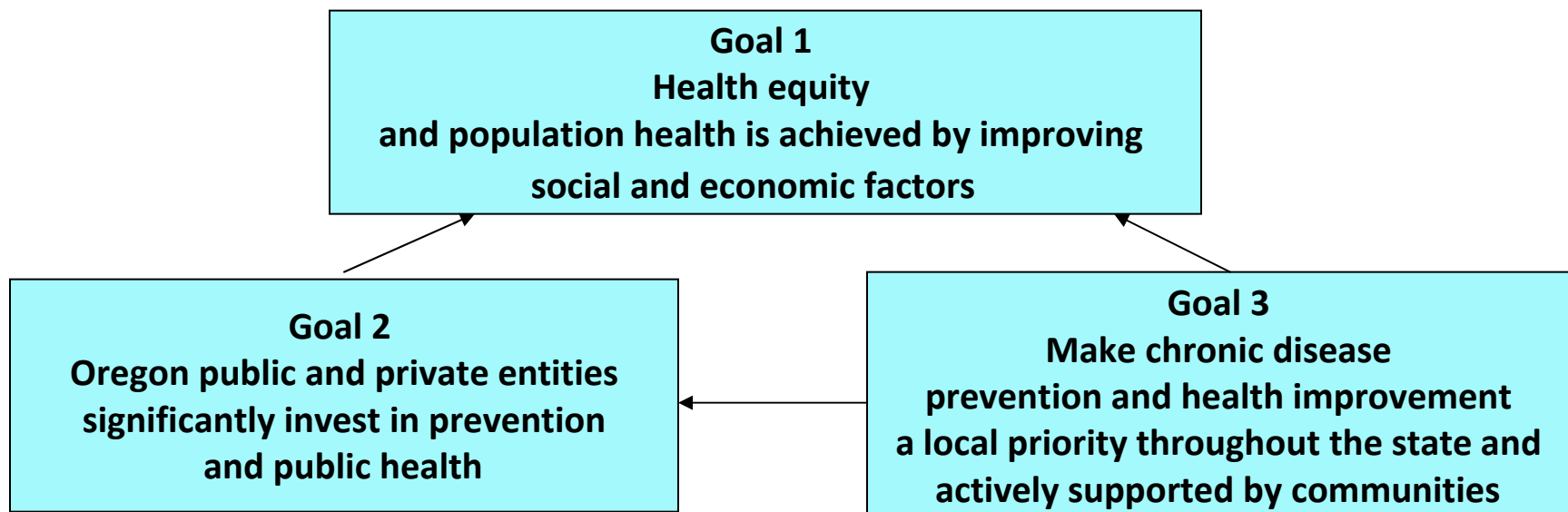
Improve the health of Oregonians by promoting and supporting lifestyle choices that prevent and manage chronic diseases

HIP Committee Process to date

- 26 Committee members
- 7 committee meetings March 30 – June 25, 2010
- 8 Community Listening Sessions
- Website Community Input Survey (for those not able to attend a listening session)

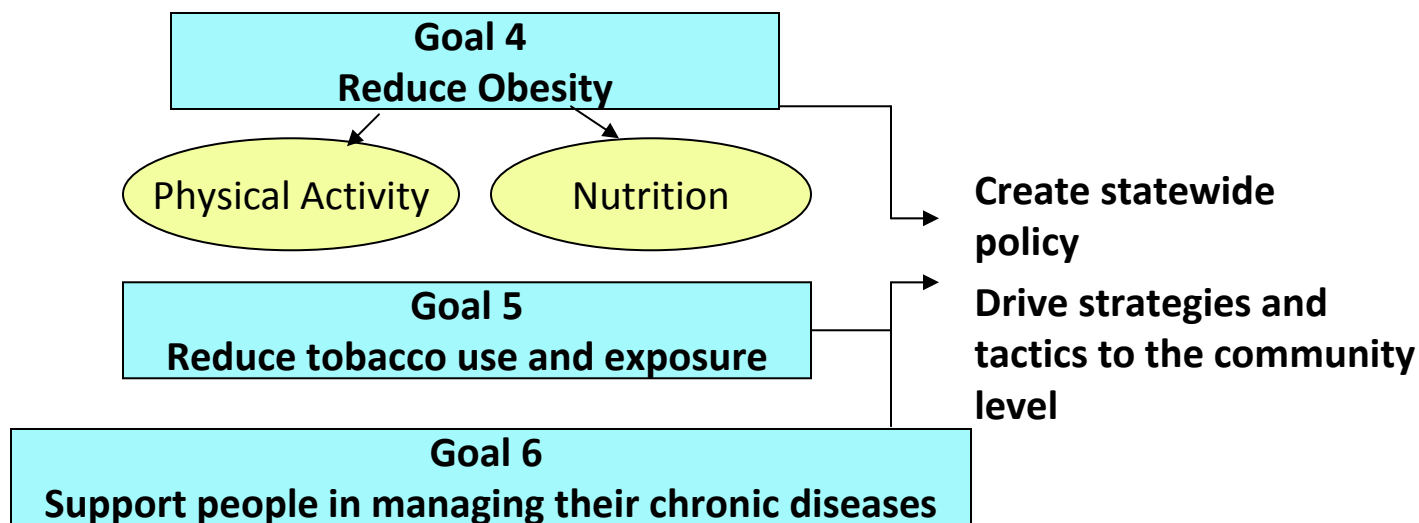


Summary of HIP Recommendations (1)



Implementation of coordinated and comprehensive prevention and health improvement strategies to support people and families where they live, work, learn, play and receive health care

Summary of HIP Recommendations (2)



Goal 1:

**Health equity and population health is achieved
by improving social and economic factors**

Recommendation 1-1:

OHA requests a Governor's Executive Order to create a Coordinating Council on Health Equity. The Council will include state agencies (public health, transportation, housing, education, economic development, employment, agriculture, public safety, DMAP), private business, health care providers, tribes, county public health and community advocacy organizations. The purpose of the Council is to promote and monitor health equity in all statewide policies through funding, and administrative and legislative actions.

Recommendation 1-2:

OHA requests legislation requiring Health Impact Assessments for all publicly funded building and transportation projects including plans to remediate identified health impacts.

Goal 2:

Oregon public and private entities significantly invest in prevention and public health

Recommendation 2-1:

To achieve population health improvement goals, increase funding for public health and raise Oregon from being the 41st state in the nation for investment in public health to at least the national average.

Recommendation 2-2:

To achieve population health improvement goals and build public health capacity, all counties and the state public health division seek accreditation through the Public Health Accreditation Board by 2015.

Recommendation 2-3:

Link revenues to related chronic disease prevention and wellness strategies.

Recommendation 2-4:

OHA requests a Governor's Executive Order requiring state agencies to implement and monitor wellness policies designed to increase fruit and vegetable consumption, physical activity, and chronic disease self-management, support breast feeding, and reduce tobacco use and sugar sweetened beverage consumption.

Goal 3:

Make chronic disease prevention and health improvement a local priority throughout the state and actively supported by communities

Recommendation 3-1:

On a regional or local level Health Departments convene (or delegate) key stakeholders to create and implement Health Improvement Plans that address identified needs based upon comprehensive community assessments. Key stakeholders include but are not limited to: tribes, hospitals, health care providers, businesses, social service agencies, educators, institutions of higher learning, community based organizations, land use, housing and transportation.

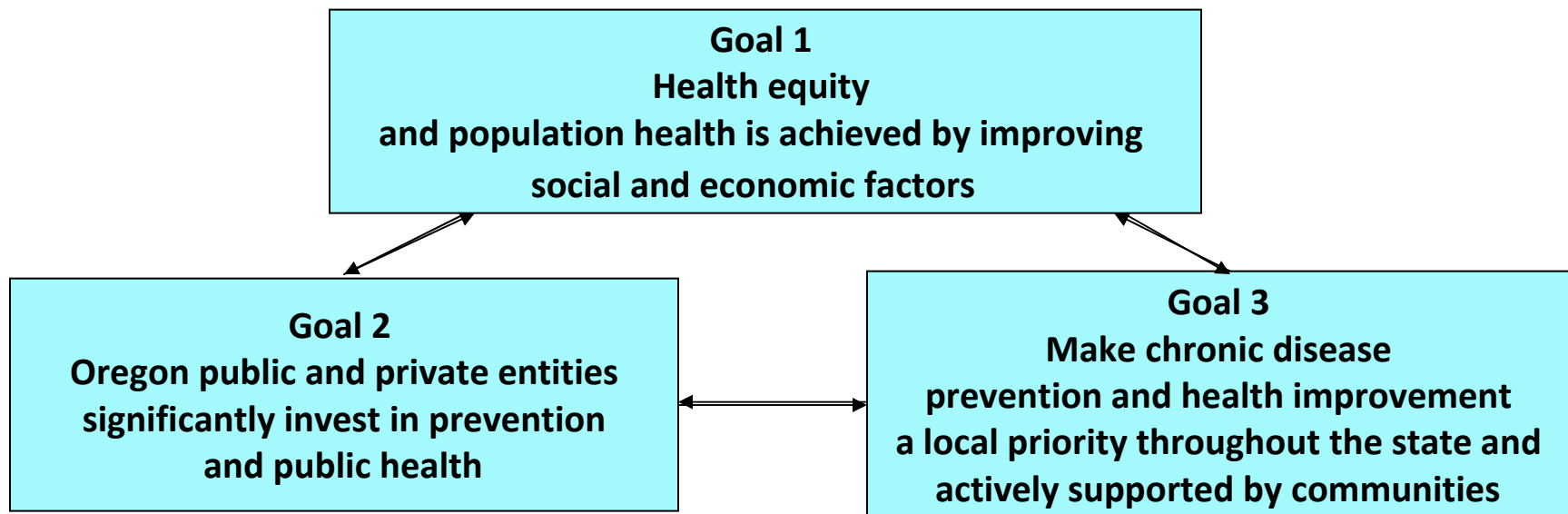
Recommendation 3-2:

In concert with county and tribal governments, and where feasible, create regional “health collaboratives” that track and are responsible for local policy, health improvement planning, priority setting, system development, financial investment and health outcomes.

Recommendation 3-3:

Prioritize resource provision to communities with a Health Improvement Plan that identifies effective strategies to improve health equity.

Summary of HIP Recommendations (1)



Implementation of coordinated and comprehensive prevention and health improvement strategies to support people and families where they live, work, learn, play and receive health care

Next Steps for Goals 4, 5 and 6

Further work by the HIP committee will focus on:

Organizing the recommendations, strategies and tactics that HIP Committee members support and develop the action plan once the Board approves the primary goals and recommendations.

Next Steps for referred recommendations

Refine recommendations to the following committees:

- HITOC
- Public Employers Health Purchasing
- Health Care Workforce
- Health Incentives and Outcomes

Next Steps for Population Health and its Metrics

- HIP committee members have come to consensus on the word definition of ‘population health’
- Confer with OHA staff to coordinate metrics with other committees.
- Gain agreement on core measures for population health.

Oregon Health Improvement Plan (HIP) Committee
Summary of Listening Sessions, Guiding Principles, Population Health - Definition and Measures
July 13, 2010

Community Listening Sessions

Community Listening Sessions were planned during the information gathering phase of the committee’s work. Sessions were held in eight locations over a 2 month period. The two-hour sessions were held the evening before HIP committee meetings, with outreach and invitations by committee members and local/regional stakeholder organizations. The purpose of the sessions was to provide an opportunity for committee members to hear regional and local perspectives as well as emerging themes related to the health of Oregon’s communities.

The format for the Listening Sessions included a brief presentation about the committee and regional health data, one hour for small group discussions, and networking time. The three questions posed to the small groups for discussion were:

1. What are the issues in your community that have the greatest impact on your health and that of others in the community?
2. What is happening in your community that promotes health and supports a thriving community?
3. What 3-5 changes in policy would make your community healthier and thrive?

Listening Session Location and Date	Number of community participants	Number of counties represented
Pendleton, April 29 th	24	4
Medford, May 13	16	4
Portland, May 26	35	2
Hillsboro, May 26	10	2
Bend, June 10	24	1
Madras, June 10	9	1
Prineville, June 10	6	1
Grand Ronde, June 24	16	4
Total	140	19

The Community Input Survey, a web-based survey of the three Listening Session questions was posted on the HIP Committee website during the month of June. The purpose was to provide an opportunity for those who were not able to attend a listening session to share comments and recommendations for consideration by the committee.

Total number of respondents	Number of counties represented by respondents	Total number of counties with participation by survey only
88	19	8 (Baker, Columbia, Hood River, Klamath, Lake, Lincoln, Linn, Marion)

Key themes that emerged from the listening sessions and community input survey include:

- The impact of jobs, the economy, quality education, transportation, and poverty on health
- Communicating a vision for a healthy Oregon
- Changing the focus to wellness rather than illness
- Supporting primary prevention in all sectors
- Implementing nutrition policies: making healthy foods more accessible
- Implementing physical activity policies: promoting safe, easy access
- Building on the collaborative spirit in communities and regions
- Needing data and capacity for local assessment, planning, and policy development
- Tailoring best practices to meet community needs
- Needing sustainable funding for effective programs such as tobacco prevention
- Achieving cultural competence in all data, programs and policies
- Promoting the engagement and collaboration of all sectors
- Investing in children and youth for future generations
- Linking economic development and health
- Acknowledging that costs are higher in rural areas due to distances and fewer resources
- Increasing access to/availability of physical, behavioral and oral health services

HIP Committee Guiding Principles

1. Make prevention the highest priority for improving population health in all sectors from pre-conception to elderly ages
2. Address the conditions that impact social, economic and environmental determinants of health because health behaviors are affected by a large number of factors beyond motivation and knowledge
3. Provide sustainable resources and stimulate communities at the local and regional level to develop local and regional solutions to community health problems based upon statewide health improvement plan goals
4. Achieve health equity among population groups
5. Respect cultural integrity, traditions and perceptions
6. Address the leading causes of chronic diseases - tobacco use and exposure, and obesity
7. Assure availability of community level data for assessment, policy development and monitoring population health improvement
8. Focus on evidence-based, best and promising practices and interventions incorporating policy, systems and environmental approaches
9. Create short and long term policies, outcomes and investments

Definition of Population Health

Population health refers to the health of a population as measured by health status indicators and as influenced by social, economic, and physical environments, personal health practices, individual capacity and coping skills, human biology, early childhood development, and health services. (Health Canada)

As an approach, population health focuses on interrelated conditions and factors that influence the health of populations over the life course, identifies systematic variations in their patterns of occurrence, and applies the resulting knowledge to develop and implement policies and actions to improve health and well-being of those populations. (Health Canada)

**Oregon Health Improvement Plan Committee
Proposed Population Health Measures**

Measure	Data Source(s)	Available For		
		Child	Adult	County
HEALTH OUTCOMES				
Mortality	Premature death			X
Morbidity	Cancer incidence/stage at diagnosis	Oregon Cancer Registry	X	X
	Chronic diseases burden	BRFSS		X
	Good or excellent health	BRFSS		X
	Poor mental health days	BRFSS; OHT ² ; OSWS ³	X	X
	Poor physical health days	BRFSS; OHT; OSWS	X	X
HEALTH FACTORS				
HEALTH BEHAVIORS				
Tobacco	Tobacco use	BRFSS; OHT	X	X
Diet and Exercise	Obesity (BMI)	BRFSS; OHT	X	X
	Physical activity meeting CDC recommendations	BRFSS; OHT	X	X
	Consumed at least 5 servings of fruits and vegetables per day	BRFSS; OHT	X	X
	Soda/sugar sweetened beverages	BRFSS; OHT	X	X
Alcohol use	Binge drinking	BRFSS; OSWS	X	X
	Other substance abuse	OSWS; National Survey on Drug Use and Health	X	X
Teen Pregnancy	Teen pregnancy rate	Birth certificate, ITOP ⁴	X	X
CLINICAL CARE				
Access to Care	Uninsured	Small Area Health Insurance Estimates, U.S. Census		X
	Primary care provider rate	Oregon Medical Board		X
	Other TBD			
Quality of Care	Hospital readmission	Oregon Hospital Discharge Index	X	X
	Preventable ED visits	All Payers All Claims	X	X
	Other TBD			
SOCIOECONOMIC FACTORS				
Education	High school graduation	U.S. Census/American Community Survey		X
	College degrees	U.S. Census/American Community Survey		X
Employment	Unemployment	Oregon Employment Department		X
Income	Poverty	U.S. Census/American Community Survey	X	X
	Income inequality	U.S. Census/American Community Survey		X
Family and Social Support	Food insecurity	BRFSS		X
Housing	Affordable housing	U.S. Census/American Community Survey		X
Community Safety	Violent crime	Oregon State Police - Law Enforcement Data System		X
PHYSICAL ENVIRONMENT				
Air Quality	Air pollution-particulate matter days	Oregon Environmental Public Health Tracking		X
	Air pollution-ozone days	Oregon Environmental Public Health Tracking		X
Built Environment	Ratio of fast food stores to grocery stores	Oregon Employment Department		X
	Green spaces	Oregon Geospatial Enterprise Office		X
PUBLIC (LAW) AND ORGANIZATIONAL POLICIES				
Communities	TBD			
Health Systems	TBD			
Schools	TBD			
Worksites	TBD			
State	TBD			

Measure	Data Source(s)	Available For		
		Child	Adult	County
OVERALL MEASURE				
	Good or excellent health		X	X

Measure	Data Source(s)	Available For		
		Child	Adult	County
CORE MEASURES				
	Premature death			X
	Income Inequality			X
	Tobacco use	X	X	X
	Obesity (BMI)	X	X	X
	Teen pregnancy rate	X		X

- 1: Behavioral Risk Factor Surveillance System
- 2: Oregon Healthy Teens
- 3: Oregon Student Wellness Surveys
- 4: Induced Termination of Pregnancy Database