

# Coos County Community Health Improvement Plan

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Work Plan 2015



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## Introduction

Under the leadership of the Community Health Improvement Plan (CHIP) steering committee, five subcommittees are in the process of developing a workable implementation plan for achieving the goals and objectives outlined in the CHIP. The subcommittees will generate broad strategies for each objective, as well as specific action steps that will make up the strategies, using two strategic framework models: the Social-Ecological Model and the Community Health Improvement Matrix (see CHIP document). These models help visualize how different types of strategies contribute to effective health improvement planning.

Development of the implementation plan is ongoing as we recruit more partners and generate more ideas for high-impact solutions. This document will be regularly updated and flexible to allow for changes in community health indicators.

## Priority Area 1: Access to Healthcare

### Goal 1: Increase access to care providers

**Objective 1:** To assess community attitudes regarding access to care providers in Coos County by March 2016.

**Objective 2:** Promote team-based care in Coos County.

#### Outcome Indicators:

**Accumulate sufficient data to better understand community attitudes regarding access to care providers in Coos County.**

**Data Source:** Surveys of providers and clinic staff. CAPHS survey data from WOAHA.

Strategy	Action Steps	Measures	Target Date	Responsible Parties
Assess provider, clinic staff, and patient attitudes regarding access to care	<ol style="list-style-type: none"> <li>1. Research providers, staff.</li> <li>2. Develop table of evidence.</li> </ol>	Table of evidence is developed	Module 1: Oct. – Nov. 2015	All – Facilitation and support of OHSU Campus for Rural Health student involvement
	<ol style="list-style-type: none"> <li>1. Analyze research findings.</li> <li>2. Define survey themes:  Current themes: <ul style="list-style-type: none"> <li>• Cultural competency.</li> <li>• Team-based care.</li> <li>• Why are changes not happening?</li> <li>• Perceived barriers to access.</li> <li>• Attitudes of practitioners towards one another.</li> </ul> </li> </ol>	Themes are incorporated into survey without assumptions	Module 2: Nov. – Dec. 2015	OHSU rural campus students - Research and reporting  Maria and Skaidra- Facilitation of information delivery to subcommittee

	<p>1. Research survey designs and recommendations</p> <p>2. Research what assessment tools and surveys are already developed</p> <p>Resources may include: Healthcare workforce, OHSU, OHS, OMA, PCMH survey</p>	<p>Comprehensive list of tools and resources for existing surveys and assessments</p> <p>Research is compiled, disseminated concisely, understood by subcommittee</p>	<p>Module 3: Dec. 2015 – Jan. 2016</p>	
	<p>1. Create Coos County survey.</p> <p>2. Identify participants (providers and staff)</p>	<p>Survey is created</p>	<p>Module 4: Jan. – Feb. 2016</p>	
	<p>1. Administer survey:</p> <ul style="list-style-type: none"> <li>• In person</li> <li>• Survey monkey</li> </ul>	<p>Survey is administered and completed by target population</p>	<p>Module 5: Feb. – March 2016</p>	
	<p>1. Analyze data</p> <p>2. Summarize findings</p> <p>3. Publicize findings</p>	<p>Data is thoroughly analyzed</p> <p>Community is aware of work</p>	<p>Module 6: March – April 2016</p>	
<p><b>Promote team-based care</b></p>	<p>Find champions and appropriate pilot site(s) for team-based care model</p>	<p>Team-based care pilot project begins</p>	<p>April 2016</p>	<p>WOAH to promote, recruit, and implement providers to pilot this model</p>

## Priority Area 2: Chronic Disease Prevention/Healthy Lifestyles

### Goal 1: Decrease tobacco initiation and use

**Objective 1:** By 2020, develop a strategic plan that takes a comprehensive approach to addressing tobacco initiation in Coos County.

**Outcome Indicators:**  
TBD in 2016

Strategy	Action Steps	Performance Measures	Target Date	Responsible Parties

**TBD in 2016**

**Objective 2:** By 2020, increase the percentage of adult non-smokers from 71.9% to 88% (Healthy People 2020).

**Outcome Indicators:**  
TBD in 2016

**Data Source:** OHA TPEP – Oregon Tobacco Facts & Laws: January 2011<sup>iii</sup>

Strategy	Action Steps	Measures	Target Date	Responsible Parties

**TBD in 2016**

**Objective 3:** By 2020, increase the percentage of youth non-smokers from 85.8% (11<sup>th</sup> grade) to 100%.

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**Outcome Indicators:**

**11<sup>th</sup> grade teens self-report as non-smokers in Oregon Student Wellness Survey and Oregon Healthy Teens Survey**

**Data Source:** 2014 State of Oregon Student Wellness Survey;<sup>v</sup> 2013 Oregon Healthy Teens Survey<sup>vi</sup>

Goal: Develop a Plan to Reduce Youth Commercial Tobacco Initiation in Coos County by March 2016.

Strategy	Action Steps	Measures	Target Date	Responsible Parties
<b>To build and develop an assessment examining tobacco use and youth in Coos County</b>	Activity 1.1: Develop the data collection tools in the form of surveys (the content of the surveys will be pulled from the CHANGE tool example)	The surveys to conduct the assessment are finalized	11/15	Commercial Tobacco Subcommittee Members
	Activity 1.2: Develop and implement data collection and participants outreach strategies	A memo formalizing the outreach strategy is completed	12/15	
	Activity 1.3: Input data into Excel sheet from the CHANGE tool and analyze the data	A summary report of data analysis is completed	2/15	
	Activity 1.4: Summarize the findings for future strategies' identification and development	A SWOC (Strengths, Weaknesses/Gaps, Opportunities, and Challenges) memo is completed	3/16	
<b>To reach out to community partners and possible participants</b>	Activity 2.1: Define each community sector and organizations to be contacted and included in the assessment	List of sectors and organizations within those sectors is finalized	11/15	Commercial Tobacco Subcommittee Members
	Activity 2.2: Identify key stakeholders and possible assessment participants	List of stakeholders to contact is finalized	11/15	
	Activity 2.3: Present the project to key stakeholders and possible assessment participants	Special meetings and/or phone calls are conducted	12/15	
	Activity 2.4: Recruit key stakeholders and possible assessment participants	Follow-up meetings and/or phone calls are conducted	12/15	

<sup>1</sup> Baseline updated from 2014 Student Wellness Survey

<sup>2</sup> Coos County already exceeds Healthy People 2020's objective for youth non-smoking



<b>To conduct the assessment</b>	Activity 3.1: Organize meetings with key partners and assessment's participants	Meetings are organized and scheduled	12/15	Commercial Tobacco Subcommittee Members
	Activity 3.2: Collect data through in-person meetings and online surveying of identified participants	Survey is open for participants and when appropriate, in-person meetings are held	1/15 & 2/15	
	Activity 3.3: Review and analyze the data	A summary report of data analysis is completed	2/16	
	Activity 3.4: Summarize the findings and share with all participants	A SWOC (Strengths, Weaknesses/Gaps, Opportunities, and Challenges) memo is completed and shared with participants	2/16	
<b>Develop Implementation Plan that leverages existing programs, policies, systems, and environments and fills in identified gaps</b>	Activity 4.1: Identify potential Evidence Based Interventions (EBI) at the individual, interpersonal, organizational, community, policy, and environmental levels that could work for youth in Coos County.	List of potential EBI compiled.	1/16	
	Activity 4.2: Select EBI to include in the Implementation plan based on SWOC findings.	Actions for implementation plan selected	3/16	
	Activity 4.3: Develop implementation plan with roles, responsibilities and timeline for 2016.	Draft implementation plan	3/16	
	Activity 4.4: Share draft implantation plan with participants and stakeholders; finalize plan based on feedback	Final Implementation Plan	4/16	

**Objective 4:** By 2020, increase the percentage of women who do not smoke during pregnancy from 76.7% to 98.6% (Healthy People 2020).

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**Outcome Indicators:**

**TBD in 2016**

**Data Source:** Oregon Tobacco Facts 2013<sup>ix</sup>

Strategy	Action Steps	Measures	Target Date	Responsible Parties
	<b>TBD in 2016</b>			

<sup>1</sup> 2013 CHA, p. 29

<sup>1</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/tobacco-use/objectives>

<sup>1</sup> [http://library.state.or.us/repository/2008/200802271141033/DHS\\_ph\\_tobacco\\_docs\\_tobfacts2011.pdf](http://library.state.or.us/repository/2008/200802271141033/DHS_ph_tobacco_docs_tobfacts2011.pdf)

<sup>1</sup> 2013 CHA, p. 29

<sup>1</sup> [https://oregon.pridesurveys.com/dl.php?pdf=Coos\\_Co\\_2014.pdf&type=county](https://oregon.pridesurveys.com/dl.php?pdf=Coos_Co_2014.pdf&type=county)

<sup>1</sup> [http://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Documents/2013/County/06\\_Coos\\_County.pdf](http://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Documents/2013/County/06_Coos_County.pdf)

<sup>1</sup> 2013 CHA, p. 29

<sup>1</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives>

<sup>1</sup> [https://public.health.oregon.gov/PreventionWellness/TobaccoPrevention/Documents/tobacco\\_facts/tobacco\\_use\\_during\\_pregnancy.pdf](https://public.health.oregon.gov/PreventionWellness/TobaccoPrevention/Documents/tobacco_facts/tobacco_use_during_pregnancy.pdf)

## Goal 2: Obesity Reduction and Prevention

**Objective 1:** By 2020, decrease the percentage of people (adults and youth) in Coos County who are obese from 30% to 25% (Robert Wood Johnson County Health Rankings/BRFSS).

**Objective 2:** By 2020, decrease the percentage of 8<sup>th</sup> and 11<sup>th</sup> graders in Coos County who are obese by 3% (Oregon Healthy Teens Survey).

### Outcome Indicators:

Assessment begun

Grant funding for JMP trail project secured

Board of Commissioners and Coquille council approve JMP project

MOU is signed between county and city for JMP trail

Strategy	Action Steps	Measures	Target Date	Responsible Parties
<b>Conduct assessment of healthy eating and active living resources/gaps</b>	Submit RFA to Rural Health Campus	RFA submitted	6/30/15	HEAL subcommittee and Coos Health & Wellness
	Attend OCTRI community assessment training	Member attendance	8/5/15	
	Complete additional IRB project plan protocol	Minimal risk project plan submitted	8/31/15	
	Identify/contract with consultant for assessment	Consultant contracted	8/31/15	
	Develop data collection tool and strategy	Tool established	9/30/15	
	Conduct data collection	Meetings, surveys, focus groups completed	12/31/15	
	Plan4Health RFA submitted	RFA submitted	7/31/15	
<b>Enhance infrastructure supporting safe walking and bicycling</b>	Create multi-sector team for the Johnson Mill Pond trail	Team created	6/30/15	Multi-sector team and HEAL subcommittee
	JMP planning meeting with stakeholders	Meeting occurred	8/31/15	
	Submit JMP project to Board of Commissioners and City of Coquille Council	Approval from BoC and Council	8/31/15	
	JMP MOU established between Coquille and Coos County	MOU	9/30/15	
	JMP grant proposals	Proposals written	10/31/15	
	HEAL Cities grant application explored with possible applications	Proposals submitted	8/15/15	Cities and HEAL subcommittee

## Priority Area 3: Mental Health

### Goal 1: Prevent suicides

**Objective 1:** By 2020, decrease the number of suicides from 29.7 suicide deaths per 100,000 people to 10.2 deaths per 100,000 people (Healthy People 2020).

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#### Outcome Indicators:

**Get significant research data and support for the Youth Move project**  
**Dual diagnosis support group implemented**  
**Elder volunteer companionship program implemented**  
**Suicide resources publicized**  
**Mental Health first aid trainings conducted**

**Data Source:** Suicides in Oregon: Trends and Risk Factors (2012 Report)<sup>xii</sup>

Strategy	Action Steps	Measures	Target Date	Responsible Parties
<b>Implement Youth Move program in Coos County</b>	Research and contact current Youth Move programs in Oregon and ask coordinators what their implementation steps were	Current programs researched and implementation steps identified	12/31/15	Ginger and Cynthia
	Assess feasibility of Coos County Youth Move and find location	Program assessed and location found	2/28/16	
	Identify funding opportunities to cover program costs	Funding identified	6/1/16	
	Develop implementation plan based on recommendations from other programs	Implementation plan developed	8/15/15	
	Implement plan	Plan implemented	10/1/16	
<b>Implement dual diagnosis PTSD/STD support group</b>	Develop goals of group and parameters of work	Group goals and parameters of work developed	Start 10/1/15, finish 12/31/15	Brion and Eric
	Determine if group requires a parent organization to oversee, such as CHW or Adapt	Requirements determined	10/1/15	
	Determine any necessary licenses or permits	Licenses/permits determined	10/1/15	
	Develop approach/curriculum for group	Approach/curriculum developed	11/1/15	
	Secure location	Location secured	11/1/15	
	Develop media campaign to advertise groups that ties in with other CHIP suicide media	Media campaign developed	Start 12/31/15	

<b>Develop a volunteer program to provide companionship to elders</b>	Research similar programs	Programs researched	10/1/15	Christy
	Seek Commitment to Run program from Coos Elderly	Program assessed	10/1/15	
	Draft Referral form	Referral form draft completed	11/3/15	
	Develop training material for volunteers and agencies that will refer	Materials developed	12/1/15	
	Develop recruitment strategy	Strategy developed	12/1/15	
	Begin training and program implementation	Training commenced and program implemented	1/5/16	
<b>Conduct outreach to publicize suicide resources</b>	Develop comprehensive media plan	Media plan developed	12/1/15	All
	Put content on Coos County website: use WIX to update layout and purchase CHW domain name	Website updated and domain name purchased	12/31/15	
	Publicize mental health first aid program by outreaching to schools and other organizations	Program publicized	12/31/15	
<b>Youth Mental Health First Aid</b>	Begin staff training	All staff will be trained	3/15/16	Heidi
	Begin training for Public	Training completed	8/28/16	
<b>Adult Awareness for Youth Suicide Risk</b>	Develop quick assessment of existing suicide prevention strategies	Existing strategies assessed	10/6/15	Heidi and Lani
	Identify target audience	Target audience identified	10/6/15	
	Select which evidence based intervention will be used	Intervention selected	10/6/15	
	Meet with leadership of target audience	Contact made	12/31/15	
	Identify target audience to receive training	Target audience identified for training	12/31/15	

## Priority Area 4: Maternal & Child Health

### Goal 1: Increase the timeliness of prenatal care

**Objective 1:** By 2020, increase the percent of women who receive prenatal care in the first trimester from 75.3% to 77.9% (Healthy People 2020).

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**Outcome Indicators:**  
**Pilot clinics identified**  
**Identified pilot clinics have supported EHR procedures**  
**Pilot clinics implement One Key Question (OKQ)**

**Data Source:** Oregon Health Authority: Vital Statistics (2013)<sup>xv</sup>

Strategy	Action Steps	Measures	Target Date	Responsible Parties
<b>Secure agreement with OKQ</b>	Contact One Key Question leaders at state level for more information		Completed	Florence Pourtal-Stevens Ben Messner
	Discuss OKQ with sub-committee		Completed	
	Sign agreement	Signed agreement	Completed	
<b>Identify two primary care providers willing to implement OKQ</b>	Identify champions of this initiative at NBMC	Providers identified	Completed	Amarissa Wooden
<b>Set-up and assure pilot clinic's EHR supports documentation and process flow for OKQ</b>	Research feasibility of changing EHR forms at NBMC		Completed	Amarissa Wooden  Sub-Committee
	Request EHR change		9/18/15	
	Design work-flow to support EHR	Fully supported EHR	11/20/15	
<b>Implement One Key Question pilot project at North Bend Medical Center with two primary care providers</b>	Assess readiness survey	Completed survey	12/18/15	OKQ Representatives Sub-Committee
	Educate providers and staff	Feedback	1/15/16	
	Implement OKQ into production	Patients asked OKQ	02/19/16	

**Objective 1:** By 2020, promote oral exams and treatment for pregnant women in all OBGYN practices in Coos County (Strategic Plan for Oral Health in Oregon: 2014-2020)

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**Outcome Indicators:**

**Raise Oral Health needs assessments for pregnant women receiving dental cleanings from 53% (OrOHC goals) to 65% in Coos County.**

Strategy	Action Steps	Measures	Target Date	Responsible Parties
<b>Work with community dental offices to identify availability and to create a referral process.</b>	Identify dental offices able to see unassigned pregnant patients (OHP and commercial insurance).	Offices identified	10/16/15	Sub-Committee
	Create referral form.	Form complete	11/20/15	
	Distribute referral form throughout the medical community.	Distribution complete	01/15/16	
<b>Create a data collection source.</b>	Work with BAH to have dental questions added to questionnaire for mothers after they give birth.	Data field added to Bay Area Hospital EHR	01/15/16	Sub-Committee
	Dental field added to spreadsheet at BAH MOM'S program identifying date of most recent dental visit.	Dental field added to spreadsheet	12/18/15	
	Discuss additional data needs	Assessment	02/19/16	
<b>Track data to determine the need for additional community provider education.</b>	Collect data	Data collected	04/15/16	Sub-Committee
	Analyze data	Discussion	04/15/16	
	Determine need	Report created	05/20/16	

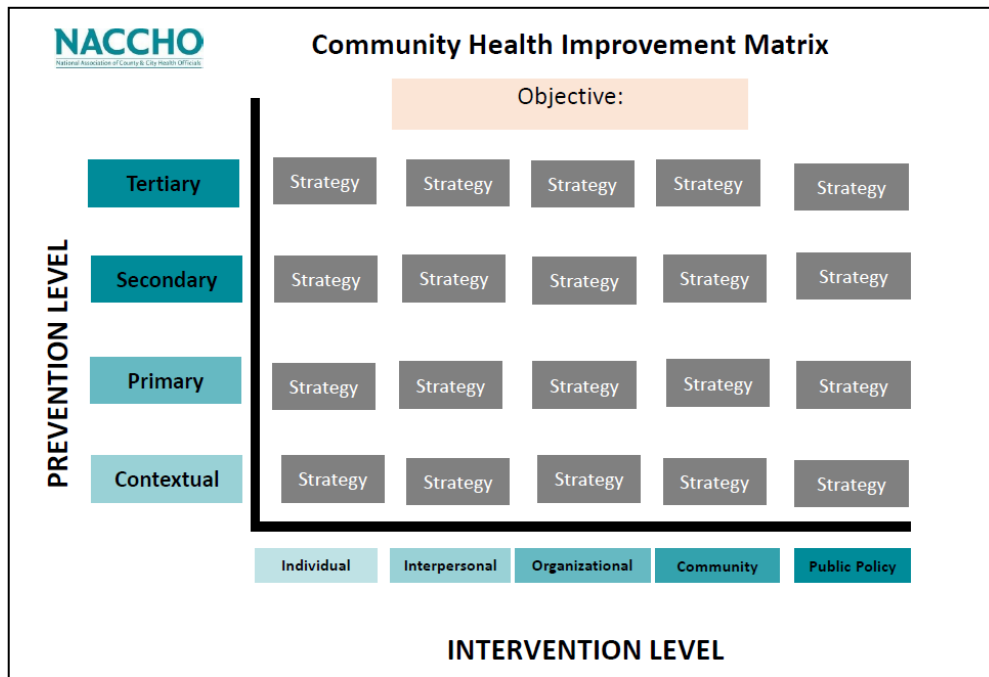
## Appendix A: Social-Ecological Model of Prevention



A Social-Ecological Model for Physical Activity - Adapted from Heise, L., Ellsberg, M., & Gottemoeller, M. (1999)



## Appendix B: Community Health Improvement Matrix



### Using the Community Health Improvement Matrix

**Prevention Levels:** *Prevention aims to minimize the occurrence of disease or its consequences. Levels include:*

<b>Contextual:</b>	Prevent the emergence of predisposing social and environmental conditions that can lead to causation of disease
<b>Primary:</b>	Reduce susceptibility or exposure to health threats
<b>Secondary:</b>	Detect and treat disease in early stages
<b>Tertiary:</b>	Alleviate the effects of disease and injury

**Intervention Levels:** *Intervention levels are built on a socioecological model that recognizes different factors affecting health.*

<b>Individual:</b>	Characteristics of the individual such as knowledge, attitudes, behavior, self-concept, skills, etc. Includes the individual's developmental history
<b>Interpersonal:</b>	Formal and informal social network and social support systems, including family, work group, and friendship networks
<b>Organizational:</b>	Social institutions with organizational characteristics, and formal (and informal) rules and regulations for operation
<b>Community:</b>	Relationships among organizations, institutions, and informal networks within defined boundaries
<b>Public Policy:</b>	Local, state, and national laws and policies



## References

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- <sup>i</sup> 2013 CHA, p. 29
- <sup>ii</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/tobacco-use/objectives>
- <sup>iii</sup> [http://library.state.or.us/repository/2008/200802271141033/DHS\\_ph\\_tobacco\\_docs\\_tobfacts2011.pdf](http://library.state.or.us/repository/2008/200802271141033/DHS_ph_tobacco_docs_tobfacts2011.pdf)
- <sup>iv</sup> 2013 CHA, p. 29
- <sup>v</sup> [https://oregon.pridesurveys.com/dl.php?pdf=Coos\\_Co\\_2014.pdf&type=county](https://oregon.pridesurveys.com/dl.php?pdf=Coos_Co_2014.pdf&type=county)
- <sup>vi</sup> [http://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Documents/2013/County/06\\_Coos\\_County.pdf](http://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Documents/2013/County/06_Coos_County.pdf)
- <sup>vii</sup> 2013 CHA, p. 29
- <sup>viii</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives>
- <sup>ix</sup> [https://public.health.oregon.gov/PreventionWellness/TobaccoPrevention/Documents/tobacco\\_facts/tobacco\\_use\\_during\\_pregnancy.pdf](https://public.health.oregon.gov/PreventionWellness/TobaccoPrevention/Documents/tobacco_facts/tobacco_use_during_pregnancy.pdf)
- <sup>x</sup> 2013 CHA p. 14
- <sup>xi</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders/objectives>
- <sup>xii</sup> <http://public.health.oregon.gov/DiseasesConditions/InjuryFatalityData/Documents/NVDRS/Suicide-in-Oregon-report.pdf>
- <sup>xiii</sup> 2013 CHA, p. 40
- <sup>xiv</sup> <http://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives>
- <sup>xv</sup> <http://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics/birth/Documents/birthpc13.pdf>
- <sup>xvi</sup> [http://www.orohe.org/sites/default/files/Strategic%20Plan%20for%20Oral%20Health%20in%20Oregon.rev\\_c.pdf](http://www.orohe.org/sites/default/files/Strategic%20Plan%20for%20Oral%20Health%20in%20Oregon.rev_c.pdf)