

SHA Steering Committee Minutes
September 9, 2024

SHA Steering Committee Members: Elisabeth Maxell, Emily Mosites, Julia Brown, Sokho Eath, TJ Foltz, Whitney Watson, Carrie Brogitti, Liberty Avila, Mica Contreras, Cheryl Carter, Sadie Siders, Lourdes Reyna Alcala, Chirstine Kan Lee, Hannah Ririck, Annie Valtierra-Sanchez

OHA staff: Jameela Norton, Sara Beaudrault, and Rose Harding
MetGroup: Kirsten Gunst, Debra Clark, Kristin Gimbel

Welcome and Introductions

- Introduced presenters
- Reviewed agenda

In Person Meeting on Monday, September 16

- Start Time: 8:30 am
- Lunch: Prepaid “gift cards” for Lunch at Cart Blocks (less than 1/2 mile from office). Choose your own type of food and eat in your preferred location
- End Time: 4:30 pm
- A few agenda items:
 - Review starting point assessment which includes lessons learned from SHIP implementation
 - Deeper dive into key health indicator and data review
- Please review 2019 SHA prior to the in person meeting
- More detailed travel and logistics email coming
- Dinner on 9/15: Optional – Casual meet and greet

Reviewed Group Agreements

- Updates from August
- Debrief meeting hosted day after last meeting
 - Couple of folks attended – thank you
 - Really great, helpful conversation
 - Feedback incorporated into strategy and plans
- Jameela has started One-on-Ones with committee members
 - First community engagement subcommittee

- Robust conversation with lots to discuss in that space
- Next meeting is Wednesday at noon
- Jameela, Tj and others will attend the Tribal Monthly Meeting on Friday, September 13.
 - This will be an opportunity for Tribal Health Directors to share how they would like Tribes to be included in the SHA mission and in future work related to the SHA and developing the next SHIP.
- Will continue tracking topics on Issue Topic Tracker that will go out with each meeting

Mission, Vision and Values

- Looking to finalize vision and values so that they are available at the in-person meeting and for the duration of this process
- Not discussing Mission today, but will share an update to keep everyone looped in
- Revised Mission Statement:
 - We draw on **community*** voices, experiences, and ideas to shape state health focus areas and solutions so that all people **living in Oregon**** have the resources and opportunities to thrive.
 - *[Add OHA's definition of community]
 - **Opted to use the terminology "living in Oregon" vs. "Oregonians" as everyone may not identify as that
- Revised Vision Statement:
 - Each community **member** in Oregon **can obtain*** affordable, appropriate and adequate resources that they need to reach optimal health and well-being.
 - *People-centered services. This does not mean people have to change to get the services, but the system is working for individuals within their community have access.
- Fist (donut) to five consensus method described and used for decision-making
 - Discussions regarding "community member"
 - Discussed to rephrase to "resident" for a consensus revote
 - Rephrase to "each person living in Oregon"
 - Consensus reached with this rephrase and keep the asterisk in place
- Revised Values Statement:

- Equity:
 - The steering committee ensures an inclusive statewide process, and makes decisions guided by a recognition of current and historical injustices and the enduring impact on individuals in communities.
 - SHIP priorities address the self-determined needs of all people, particularly populations that have historically been marginalized or underserved. This includes capacity-building resources and long-term community-tailored investments to bolster community agency and create the conditions for self-determination. The final plan addresses immediate health concerns as well as long-term wellbeing for people living in Oregon.

- Transparency:
 - OHA maintains open lines of communication with the steering committee and communities, and **there is clarity around the process, goals and outcomes of the work**. The SHA/SHIP priorities are clear, focused and actionable.
 - External communication is shared and available to all community members via a bi-monthly memo.
- Bolded text reflects specific language and feedback from committee members
- Items under each value reflects wanting to work together, how to manifest, and hold each other accountable
- Revised Values Statemen:
 - Accountability:
 - The steering committee is centered and driven by the shared group agreements. Each member understands their roles and responsibilities and **contributes to the best of their ability to help OHA develop a plan informed by data that accounts for the needs of each community across the State**.
 - Regular opportunities for feedback are provided to committee members to ensure open communications and adjustments in how the process is managed and facilitated by OHA.
 - Collaboration:

- The committee works towards common goals and fosters a sense of shared purpose and collective responsibility for public health outcomes.
 - The steering committee is engaged in collaborative partnerships with local organizations, healthcare systems, and community leaders to inform community-driven priorities to guide planning **and priorities.**
- Move to vote for three out of the four values (will rewrite Equity to be both accessible and asset based)
 - Would like to have this completed before the in-person meeting to have a set of values going into that session
 - MetGroup is happy to send out a revision for one final round of feedback
- Committee members shared thoughts that accessibility/plain language standards need to be applied
 - This is written by MetGroup and the committee
 - OHA composed documents go through a publication process that takes months to ensure documents adhere to OHA Guidelines.
- Moving forward to vote with two caveats:
 - Alicia, Emily, Mika and Annie volunteered to ensure that the spirit of the equity value is revamped to ensure accessible language
 - Under collaboration value strike collective responsibility
- Consensus reached to adopting values with the two caveats

Roadmap SHA and SHIP Development – Sara

- Answer questions about where we are going and how we are getting there
- Figure out the Steering Committee’s key decision points are and help steering committee members think about how best you want to use your time during meetings
 - SHA Steering Committee is responsible for more than conducting the State Health Assessment.
 - OHA Staff will look to the SHA SC for recommendations for work through the development of our next State Health Improvement Plan
 - This will take us through about September 2025
- The State Health Assessment
 - Point in time report on the health status of people in the state of Oregon
 - Filled with other reports

- Intended to bring attention to health issues in Oregon and what people in Oregon see as the most urgent priorities
- What people see is their assets within their community that help them get to health
- Considers how well our public health system is prepared to do the work that communities want us to be doing to address those health issues
- Provides critical information the steering committee will use then to develop the next State Health Improvement Plan
- Different pieces of the SHA puzzle
 - State population health indicators – looking at current data on health of people in Oregon
 - Modernization capacity assessment in the public health system
 - Workforce assessment – helps to understand how prepared our system is to accomplish what communities need
 - Community Health Assessment and Community Health Improvement Plans also fit in
 - Will be engaging communities for feedback on the health data OHA has and what are the important health issues to prioritize
 - State’s approach is a bit different than for a community health assessment as we’re trying to use all existing information and complement it with new community provided information
- SHA Steering Committee Roadmap
 - Sara shared a roadmap slide, please refer to meeting handouts
 - Shows where the steering committee is involved
 - Highlights the different areas for community engagement
 - Information shared by communities will be brought back to the Steering Committee to support your decision making
- Time is a tension
 - Brought up from SC members quite a few times
 - Very real tension - thinking about how we can do this work to the best of our abilities while staying within the time constraints
 - The vision and the values are essential to make decisions on how we do this work and have the biggest impact

- Want to avoid duplicating work that happens locally within communities
- The nature of doing a state health assessment for 4.2 million people in Oregon is different than a community health assessment
- Want to continue to hear from you about where you most want to focus within this big body of work and for you to have some discretion on how you use your time together
- Described planning for a community and partner engagement roadshow (from roadmap)
 - Will share community engagement subcommittee draft plan and context of work at a future meeting
 - More discussions around how we listen and how we show up need to be planned
- Subcommittee
 - Jameela and Rose are convening some additional spaces
 - Data ad-hoc space starting in October to dive deeper on data conversations
 - Subject Matter Experts will be available for questions
 - Community engagement subcommittee spaces 2x per month, every other Wednesday
 - Open to any of the Steering Committee
 - Message Jameela if you would like any of the invites
- Other Opportunities to Engage
 - Would the Steering Committee consider meeting two times per month in October and November
 - 11 votes: 6 - Yes, 5 - Not sure
 - Recognize some people do not have the capacity
 - Suggestion made to make the topics very specific and clear
 - OHA and MetGroup will discuss further and bring back to group

Data Context – Rose

- Science and evaluation team’s responsibility for making sure you have a good understanding of the data
- Recommendations we’re looking to hear from you:
 - Which of the State Population Health Indicators to prioritize for the State Health Assessment

- Will be reviewing starting at the in-person meeting this month and every meeting through the end of the year
 - You should already have the link to the data dashboard
 - Please review, if you haven't already, for the helpful context
- How should health status data be framed in the SHA? What is the story we need to tell?
- What data is missing
 - What are the gaps and what recommendations do you have
 - We have a lot of data at the state, but that is not the only data sources that exist
- What recommendations do you have for filling these data gaps?
 - Share any other data source recommendations to help us include them
- Three data sources to consider
 - State Population Health Indicator dashboard
 - Healthier Together Oregon scorecard
 - PHAB accountability metrics scorecard
 - Links are provided in meeting handouts

Thank you to everyone who attended. Next regular meeting TBD.