

Marion County Community Health Improvement Plan January 2012 - December 2015

Update and Final Report, 12/2015



Marion County
OREGON
Health Department



Update Dec 2015

During the past year, the Marion county Community Health Improvement Partnership steering committee agreed to keep the original four priorities, but add a fifth for tobacco prevention. The following sections of this document are unchanged except for the data sections beginning on page six.

Overview

Marion County compares poorly with other Oregon counties when we look at rates for adult obesity, adult physical activity, adult asthma, colorectal cancer deaths, early prenatal care, pneumonia vaccine for seniors, teen pregnancy and a variety of other health indicators. Each of these issues has multiple causes and cannot be “fixed” by one organization. In response, Marion County Health Department, Salem Health, Santiam Hospital and Silverton Health formed a steering committee in early 2011 to plan the launch of a collaborative community-based process to develop and implement a plan that would bring the resources of multiple sectors of the community to bear on health issues as prioritized by the community. This process resulted in the formation of the Marion County Community Health Improvement Partnership (CHIP) and the Marion County Community Health Improvement Plan, a living document provides a roadmap for community work primarily around the issues of adult obesity and the contributing factors of adult physical activity, teen physical activity and teen fruit and vegetable consumption. The plan also includes some strategies to address teen pregnancy, access to early prenatal care and teen marijuana use.

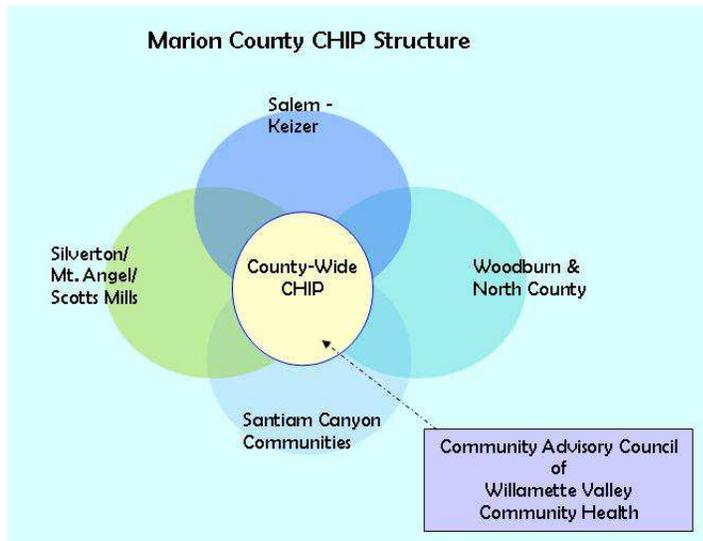


Figure 1: Marion County CHIP Structure

- There are four regional groups to ensure cross-county, community-based participation.
- The county-wide group has representatives from each region and the Community Advisory Council

Process:

The Steering Committee agreed that the diversity of Marion County communities would be best served if the process were lead at the regional level. The county was divided into four regions based on hospital service area. The Steering Committee reviewed health indicator data for

Marion County as presented on the Salem Health community data dashboard on June 1, 2011

and selected ten key health indicators for which Marion County was not doing well to present to the community for prioritization. Four kick-off events were held in July-August 2011 to invite the community to participate in the review of community-level data including surveys of community residents and health, education and social service providers, and county-level data including demographics, socio-economic and health indicators. The events were hosted by the hospitals in Salem, Silverton and Stayton. Silverton Health hosted a second event at the Wellspring Center for Health in Woodburn. Following a review of the data, the participants prioritized the health indicators they felt were most important to their communities and volunteers to serve on the regional workgroup to set goals, identify strategies and develop a plan for improving the health of the community. Those priorities are shown in the following table. In November 2013, the Santiam Canyon work group agreed to focus on healthy family activity. The group will continue to monitor county-level data for teen pregnancy and teen marijuana use, but will not plan any action to specifically address those issues at this time.

Top health issues chosen by community members in each region, July-August 2011.
Issues are shown in order of priority.

Salem-Keizer	Santiam Canyon	Silverton Area	Woodburn / North Co
1. Teen pregnancy	1. Teen pregnancy	1. Adult activity	1. Adult obesity
2. Adult obesity	2. Adult activity	1. Teen fruit & vegetable consumption	2. Teen pregnancy
3. Early prenatal care	3. Teen marijuana use	2. Teen physical activity	3. Teen physical activity 3. Teen fruit & vegetable consumption

Timeline:

July-August 2011 –Regional community kick-off events –

- Present data and set regional priorities for health indicators that are important to the region and feasible to address
- Gather community input on current resources related to the 10 health indicators

September-December 2011 –Regional groups meet –

- Identify local assets, gaps and challenges related to prioritized issues
- Set goals, objectives and identify strategies for addressing prioritized issues

January 2012 –Regional groups implement strategies

January 2012 – December 2014 – Regional groups meet every six months

- Report progress on strategies
- Review new data as available
- Identify and recruit new partners to participate
- Revise plan to discontinue ineffective strategies and add new strategies

January 2012 – December 2014 – County group meets every six months between regional meetings –

- Regional representatives share progress
- Learning and sharing of strategies between regions
- Review and analyze new data
- Discuss/identify new evidence-based or best practice strategies to implement in the regions
- Monitor overall progress in improving health at county level, recommend changes to plan
- Identify policy and systems-level change that can have an effective impact

Membership:

The regional and county-wide groups are open to new members interested in joining the collaborative efforts to improve the health of Marion County. For more information about how to join or to attend a meeting, email Marion County Health Department at health@co.marion.or.us.

Partnership goals:

1. To reduce the proportion of Marion County adults who are obese

Related indicators that were prioritized by one or more regions:

- Adults who are obese
- Adults engaging in regular physical activity
- Teens who engage in regular physical activity
- Teen fruit and vegetable consumption

2. To reduce pregnancy rate per 1000 Marion County females age 15-17 years

3. To increase proportion of Marion County women receiving early prenatal care

4. To reduce marijuana use by Marion County teens

Strategies to impact the four goals:

An action plan of strategies and interventions underway in Marion County to address the four health priorities are outlined in a CHIP action plan. The latest version of the action plan can be found on-line at: <http://www.co.marion.or.us/HLT/chip/chip.htm>

Connection with the Coordinated Care Organization:

Willamette Valley Community Health (WVCH) is the primary Coordinated Care Organization (CCO) serving Oregon Health Plan members in Marion and Polk counties. The Marion County Health Department, Salem Health, Santiam Hospital, and Silverton Health are WVCH members

Per OAR 410-141-3145, the Community Advisory Council of WVCH is required to develop a community health improvement plan (CHIP). The plan, which is due by July 2014, must include input from public health. Three Marion County CHIP partners are on the Community Advisory Council, serving to provide a link between the two CHIPs. These are Tonya Johnson, Oregon State Extension, Jeanine Stice, RD, Chair of the Marion County I Love Me Task Force, and Pam Hutchinson, Marion County Health Department. The overarching goal of the WVCH CHIP process is to achieve for the Oregon Health Plan Population, the Triple Aim of:

- Improving the patient experience of care (including quality and satisfaction)
- Improving the health of populations
- Reducing the per capita cost of healthcare

The Oregon Health Authority has identified performance measures and attached financial incentives which will influence the initiatives included in the WVCH CHIP. When a provider implements a WVCH CHIP strategy for their entire medical practice population, it's expected that the general community will benefit as well as the OHP population.

The data tables for the Marion County CHIP priorities of obesity, teen pregnancy, early prenatal care and teen marijuana use have been updated with currently available data as well as information about relevant state coordinated care targets.

Data tracking by goal:

Each of the following tables was updated with the latest data available as of 12/22/2015.

Goal 1	To reduce the proportion of Marion County adults who are obese					
Oregon Context	This measure links to the Oregon Chronic Disease Prevention and Health Promotion Program 5-year draft plan objective to slow the rise of obesity prevalence so that less than 30% of Oregon adults will be obese by 2017. It also links to the Oregon Health Improvement Plan goal to Prevent chronic diseases by reducing obesity prevalence, tobacco use and alcohol abuse. It links to the Oregon Health Authority five year goal to make Oregon one of the healthiest states.					
National Context	Healthy People 2020 objective: 30.6% This measure links to the following National Prevention Strategy and priority: <ul style="list-style-type: none"> ▪ Strategy: Empowered People ▪ Priorites: Healthy Eating, Active Living 					
Related Coordinated Care Organization Measure	None					
Data Source	Oregon Health Authority public.health.oregon.gov Public Health > Birth and Death Certificates > Surveys > Adult Behavior Risk (BRFSS) > Results by County					
Data	2002-2005	2004-2007	2006-2009	2008-2011	2010-2013	2012-2015
Marion Actual	25.1%	28.3%	28.6%	28.0%	32.7%	Not available
Oregon Actual*	21.9%	24.3%	24.5%	24.8%	25.9%	Not available
Oregon Target	-	-	-	<30%	<30%	<30%

* Oregon values for 2002-2005 and 2004-2007 were calculated by using the mid-point value for the time period per recommendation of OHA Center for Health Statistics

Resources for more information about goals for Oregon and the U.S.A.:

Oregon Chronic Disease Prevention and Health Promotion Program 5-year draft plan (unpublished)

Oregon Health Improvement Plan. www.oregon.gov/OHA/action-plan/hip-report.pdf

Healthy People 2020

National Prevention Strategy

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Goal 2	To reduce pregnancy rate per 1000 Marion County females age 15-17 years							
Oregon Context	This measure links to the Oregon Health Authority goal to “improve the lifelong health of all Oregonians.” It also links to the Oregon Benchmark #39 -Teen Pregnancy							
National Context	Healthy People 2020 objective: 36.2 per 1,000 This measure links to the following National Prevention Strategy and priority: <ul style="list-style-type: none"> ▪ Strategy: Empowered People ▪ Priority: Reproductive and sexual health 							
Related Coordinated Care Organization Measure	None							
Data Source	Oregon health Authority public.health.oregon.gov Public Health > Birth and Death Certificates > Vital Statistics > Teen Pregnancy Data Hispanic pregnancy data provided by OHA Adolescent Sexual Health Program, June, 2012.							
Data	2008	2009	2010	2011	2012	2013	2014	2015
Marion Actual	40.6	36.3	30.6	23.2	22.0	19.3	18.3	16.8*
Marion Hispanic Teens	81.49	59.5	53.1	42.4	36.6	31.0	Not available	Not available
Oregon Actual	25.7	22.5	18.6	17.1	15.6	13.9	12.4	10.8*
Oregon Target	-	22.0	22.0	22.0	21.5	21.0	Not available**	Not available**

*Data based on preliminary rolling rate from October 2014-Sept 2015

** OHA has set Oregon Targets for 2014 and 2015

Goal 3	To increase proportion of women receiving early prenatal (1st trimester) care						
Oregon Context	This measure links to the Oregon Health Improvement plan strategy to target resources to improve child and student health (birth through higher education) to support improved education outcomes. It also links to the Oregon Benchmark #40 Prenatal Care						
National Context	Healthy People 2020 objective: 77.9% This measure links to the following National Prevention Strategy and priority: <ul style="list-style-type: none"> ▪ Strategy: Elimination of health disparities ▪ Priority: Reproductive and sexual health 						
Related Coordinated Care Organization Measure	The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care. <ul style="list-style-type: none"> • Rate 1: Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the organization. • Rate 2: Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery. 						
Data Source	Oregon health Authority public.health.oregon.gov Public Health > Birth and Death Certificates > Vital Statistics > Birth > Perinatal Trends						
Data	2008	2009	2010	2011	2012	2013	2014
Marion Actual	59.8%	63.0%	67.1%	70.5%	71.7%	75.4%	Not available
Oregon Actual	70.2%	71.2%	73.1%	75.1%	75.9%	77.8%	Not available
Oregon Target	-	-	-	-	-	-	

Goal 4	To reduce marijuana use by 11th grade teens in Marion County (11th graders reporting use in the past 30 days)								
Oregon Context	This measure links to the Oregon Health Authority Addictions and Mental Health Services vision for healthy Oregonians								
National Context	Healthy People 2020 objective: Only 6.0% of adolescents 12-17 report using marijuana in past 30 days This measure links to the following National Prevention Strategy and priority: <ul style="list-style-type: none"> ▪ Strategy: Empowered People Priority: Preventing drug abuse and excessive alcohol use								
Related Coordinated Care Organization Measure	None								
Data Source	Oregon Student Wellness Survey (done every two years on even years) http://www.oregon.gov/OHA/amh/student-wellness/reports/county/marion.pdf								
Data	2006	2007	2008	2009	2010	2011	2012	2013	2014
Marion Actual	14.8%	-	15.4%	-	13.2%		15.8%		18.3%
Oregon Actual	-	-	-	21.3%	23.7%		21.8%		21.2%
Oregon Target	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

Goal 5	To reduce the percentage of adults who smoke cigarettes Added 12/2014					
Oregon Context						
National Context	Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12.0%.					
Related Coordinated Care Organization Measure	Medical assistance with smoking and tobacco use cessation Component 1: Percentage of adult tobacco users advised to quit by their doctor. Component 2: Percentage of adult tobacco users whose doctor discussed or recommended medications to quit smoking.					
Data Source						
Data	2002-2005	2004-2007	2006-2009	2008-2011	2010-2013	2012-2015
Marion Actual	20.6%	17.2%	15.5%	14.4%	19.0%	Not available
Oregon Actual	20.4%	18.7%	17.1%	16.3%	19.0%	Not available

Assets, Opportunities and Challenges/Weaknesses by Region:

This section is extracted from the community health assessment report for Marion County. As part of the assessment process, each region evaluated the assets, opportunities and challenges related to their prioritized health indicators. This section will be updated periodically to reflect changes as the plan progresses. In addition, this section will act as a guide to future opportunities to address as part of the plan.

Salem-Keizer Region, 2011: The community prioritized teen pregnancy, adult obesity and early prenatal care as indicators to address, but because there are already community committees focused on teen pregnancy and early prenatal care, the group decided to narrow the focus to adult obesity. The group identified assets, opportunities and challenges related to adult obesity.

Asset = existing resource

Opportunity = an existing resource that could be replicated or expanded upon

Challenge = something that would need to change to create an asset or opportunity

	Asset	Opportunity	Challenge
Chamber of Commerce members do not have wellness as a key priority, but some are reaching out to the Salem Health CHEC for wellness programs	X	X	
The 5210 initiative is underway and could be an easy thing for employers to adopt	X	X	
OSU-Extension has a program focused on teaching recipients of SNAP, the Supplemental Nutrition Assistance Program (foodstamps) how to eat healthy with SNAP benefits and could coordinate with various settings to provide that information to clients	X	X	
The Salem Health Community Education Center (CHEC) is a resource for information and educational activities	X	X	
Nutrition education, healthy vending and healthy food options policy efforts are taking place in the community	X	X	
Salem-Keizer Transit has already conducted an assessment to ensure that routes go to the major grocery stores	X		
There are several large employers in Salem area and focus on worksites could have a big impact		X	
There is no funding to support implementation of a new program.			X

Santiam Canyon Region, 2011: The community prioritized Adult physical activity, teen pregnancy and teen marijuana use as indicators to address, but the group decided to narrow the initial focus to adult physical activity, with the adult as part of a family unit. The group identified assets, opportunities and challenges related to physical activity.

Asset = existing resource

Opportunity = an existing resource that could be replicated or expanded upon

Challenge = something that would need to change to create an asset or opportunity

	Asset	Opportunity	Challenge
Swimming pool, skate park etc.	X		
Church youth groups	X		
Mill City Clinic	X		
Organizations that provide positive support for youth eg Boy Scouts	X		
Parent-aided drug testing at local police department	X		
Stayton Meth Busters group	X		
School activities & sports, competition may discourage some from participation	X		X
Stayton ordinance against selling drug paraphernalia	X	X	
There are many existing activities, such as fun runs, walking/running groups, exercise groups in the park and resources a family might access for physical activity if they knew about them	X	X	X
There are existing activities for teens, such as Church groups, etc. but community may not be aware	X	X	X
Many resources are membership-based and may require a fee. Gyms are cheaper in Salem			X
School grounds are not accessible outside of school hours			X
There is no central website to hold information			X
The Canyon has limited transportation for getting people to the opportunities			X
13 year olds seem to become less involved			X
Contraceptives not covered in schools			X
Homelessness			X
Limited jobs or activities for teens			X
Both parents working. Kids raising themselves. Too much unsupervised time			X
Kids don't see getting caught with marijuana as a problem			X
Families don't interact			X
Habitat for Humanity could add youth component?		X	
City ODOT grant to add more sidewalks near hospital		X	

Silverton Area Region, 2011: The community prioritized adult activity, teen fruit and vegetable consumption and teen physical activity. The group identified assets, opportunities and challenges related to the prioritized health indicators.

Asset = existing resource

Opportunity = an existing resource that could be replicated or expanded upon

Challenge = something that would need to change to create an asset or opportunity

	Asset	Opportunity	Challenge
Numerous community events focused on physical activity that a family could access if they knew about it.	X	X	
Silver Falls School District is scheduled to do a review of their food service menus	X	X	
Hospital has a robust wellness program for staff	X	X	
Schools distribute bilingual information	X	X	
Our Town, prints local stories	X	X	
Safe routes to school grant – more sidewalks	X	X	
First Friday – events could be connected to this on-going event	X	X	
High School still has a Home Economics class	X	X	
Commercial kitchens in schools & some churches	X	X	
Silverton Together provides a connection to families	X	X	
School sports programs	X		X fees
The foodbank has worked with a dietician to ensure healthy foods in the pantry	X		
Silverton Senior Center has senior exercise	X		
Local gyms offer membership	X		
Runners club	X		
City park	X		
Saturday farmer’s market	X		
City pool	X		
YMCA organizes activities for youth, pool	X		
Courtesy clerks at grocery stores – carry your own!		X	X
Compulsory PE in school		X	X
Fast food restaurants			X
Open campus means HS students go to fast food			X
Food services in schools	?	?	?

Woodburn / Northern Marion County Region, 2011: The community prioritized adult activity, teen pregnancy and had a tie for third place between teen fruit and vegetable consumption and teen physical activity. The group identified assets, opportunities and challenges related to the prioritized health indicators.

Asset = existing resource

Opportunity = an existing resource that could be replicated or expanded upon

Challenge = something that would need to change to create an asset or opportunity

	Asset	Opportunity	Challenge
Health Department has new grant for teen pregnancy prevention with Hispanic teens	X	X	
Silverton Health hosts a Saturday, seasonal farmer's market. Will be adding Wednesdays	X	X	
Woodburn Pediatrics has been conducting walks with patients	X	X	
Woodburn Schools food service modified meal plan. Promotes vegetables, whole grains and less fried foods	X	X	
Comprehensive sex-education curriculum in place Woodburn	X	X	
Classes to help parents talk with youth about sex Woodburn	X	X	
Youth development programs empowering youth to take on teen pregnancy as an issue	X	X	
Woodburn has a master trail plan. One mile greenway trail complete.	X	X	
WIC & SNAP accepted at farmer's market	X	X	
Wellspring as partner for wellness	X	X	
Woodburn community events adopting healthy food policies	X	X	
There are many opportunities, but community members may not know about them	X		X
Wellspring 0700-2000 – walk around indoor track	X		
Senior estates – cycling, pool	X		
Woodburn pool also open to Hubbard & Gervais	X		
Woodburn Bicycle Club, Parks & Rec sports leagues	X		
Body balance class at Wellspring - free	X		
Senior communities have exercise programs for residents	X		
Wilsonville/Champoeg pedestrian bridge planned	X		
Collaboration - Woodburn Peds/Wellspring pediatric & teen nutrition program	X		
Fast food marketing vs fresh food marketing		X	X
Scare tactics vs “real” health education for youth		X	X
Hubbard group interested in walking trail from Aurora to Hubbard		X	
Vacant lots might be used for community garden		X	
Work health messages in at all grade levels		X	
Local media such as Radio Movimiento, La Pantera and WCAT community cable		X	

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Concerns about safety preventing physical activity			X
Access to activity			X
Most youth programs are in Salem			X
No Russian or Marshallese in our workgroup			X