Executive Summary: North Douglas County Community Health Needs Assessment Planning

Beginning in February 2016, the North Douglas County (NDC) communities of Drain, Elkton, and Yoncalla, Oregon engaged in a Community Health Needs Assessment (CHNA) planning process, focusing on children ages birth-to-8 and their families. The purpose of this process was to explore, understand, and integrate linkages between early learning and young child and family health; identify health-related resources currently available and accessible to NDC families; and prioritize health areas of interest to be explored during the CHNA.

The North Douglas County CHNA builds on community partnerships already established in the region through initiatives that aim to coordinate and align early learning and K-12 systems. The work of Yoncalla Early Works (“YEW”, initiated in 2012 with funding from The Ford Family Foundation and Children’s Institute) and North Douglas P3 (“NDP3”, initiated in 2014 with funding from the Oregon Community Foundation) demonstrate community commitment to supporting young children and families. The work of community members through these initiatives laid the foundation for the region’s readiness to engage in a Community Health Needs Assessment (CHNA) planning process.

Ultimately, this first planning phase of the CHNA resulted in recommendations to conduct Phase 2 of the CHNA in North Douglas County, and is expected to get underway in summer/fall 2016 in collaboration with community members.

The Community Health Needs Assessment will seek to answer the following questions:

1. What does health look like for children ages birth-to-8 and their families in North Douglas County?
2. What health services are available and accessible to children and families in North Douglas County?
3. What health services do families in North Douglas County need and want?
4. What needs to happen for health services to be available and accessible for North Douglas County children ages birth-to-8 and their families?

Who participated in the CHNA planning process?

45 community members/stakeholders, including 10 local parents/caregivers, participated in the Kick-Off 16 community members/stakeholders, including 5 local parents/caregivers, participated in 4 Steering Committee meetings 35 community members/stakeholders, including 10 local parents/caregivers, participated in a Community Café 8 parents/caregivers and 2 high school students participated in a breakfast Listening Session

Thank you to everyone who participated in the CHNA planning process!

For more information about the NDC CHNA, please contact: Erin Helgren, erin@childinst.org, 541-525-5096
What do indicators of child and family health in North Douglas County tell us?

The following table summarizes key health indicators reviewed by community members during the CHNA planning process (Phase 1), and demonstrate the need for additional work and data collection (Phase 2).

<table>
<thead>
<tr>
<th>Indicator*</th>
<th>NDC</th>
<th>State</th>
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<tbody>
<tr>
<td>Population</td>
<td>5,008</td>
<td>3,900,343</td>
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<tr>
<td>Mean number of births annually</td>
<td>40</td>
<td>45,297</td>
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<tr>
<td>Infant mortality (per 1000 births)</td>
<td>14.9</td>
<td>5.0</td>
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<tr>
<td>Low birth weight (per 1000 births)</td>
<td>89.6</td>
<td>62.5</td>
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<tr>
<td>Teen birth rate among 15-19 y/o (per 1000 births)</td>
<td>79.6</td>
<td>28.4</td>
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<tr>
<td>Poverty (% of total population at 200% FPL)</td>
<td>44%</td>
<td>36%</td>
</tr>
<tr>
<td>Food security (% Elementary School students eligible for free and reduced school meals)</td>
<td>48%</td>
<td>51%</td>
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</tbody>
</table>

*Please refer to the full report for data sources.

What health priority areas do North Douglas County community members want to learn more about?

Four health priority areas, and the recommended methods to learn more about these topics, emerged from the planning process. The next phase of the CHNA expected to take place in summer/fall 2016 in collaboration with NDC community members will further prioritize these issues and clarify methods.

ACCESS TO HEALTH SERVICES

Administer a regional survey to identify the service needs across a range of health service types, e.g., dental care, immunizations, prenatal care, well-child care, primary care for adults, and mental health.

Convene focus groups, to explore the barriers and solutions to health services access, such as transportation supports, local provision of services through fixed or mobile locations, improved coordination of services that occur outside of the communities, increased awareness and improved communication about available services, and application of health access-related policies.

Work with gatekeepers within specific organizations (e.g., Coordinated Care Organizations [“CCOs”], state health department, or other state services agencies), to obtain community- or regional data on additional key health indicators like smoking rates during pregnancy, immunization rates, developmental screening rates, family income and resources levels, and public services utilization.

Use visual story-telling to understand health promotion efforts in North Douglas County and continue building community through data collection and interpretation of what health, health access, and health promotion looks like.

MENTAL HEALTH SERVICES

Conduct confidential interviews to explore specific mental health and substance use service needs, barriers to access, and service or policy solutions.

HOUSING AND HOUSING INSECURITY

Convene focus groups or Community Café forums to review data on housing supply, rental/ownership patterns, and housing conditions to improve housing security, build awareness of renters’ rights, and explore service and policy strategies.

FOOD SECURITY

Leverage the interest and energy of community members to support the development and/or coordination of local farmer’s markets and strengthen community gardening efforts.

“Children are our community’s greatest investment in future success. The health of children 0-8 affects their growth and prosperity now and in the future.” – Kick-Off Participant