Adventist Health Tillamook
2021 Community Health Plan

The following report reflects the 2021 results for
Adventist Health Tillamook's Implementation Strategy.

May 27th, 2022

Executive Summary

Introduction & Purpose

Adventist Health Tillamook is pleased to share its Community Health Implementation Strategy. This follows the development of its 2019 Community Health Needs Assessment (CHNA) in accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements and approved by the Adventist Health Board of Directors on October 17, 2019.

After a thorough review of the health status in our community through the community health needs assessment (CHNA), we identified areas that we could address using our resources, expertise and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission of "Living God's love by inspiring health, wholeness and hope."

Adventist Health Tillamook, through a collaborative partnership with Tillamook County Community Health Centers, Rinehart Clinic & Pharmacy and Tillamook Family Counseling Center, conducted the 2019 CHNA. Adventist Health Tillamook assessed the health needs identified in the CHNA and directly aligned community programs and outcome measures with the Columbia Pacific Coordinated Care Organization's (CCO) 2020 community health plan. This collaboration and alignment allowed for the prioritization of community health programs which best provide for our community and the vulnerable among us.

This Implementation Strategy summarizes the plans for Adventist Health Tillamook to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Tillamook has adopted the following priority areas for our community health investments.

Prioritized Health Needs – Adventist Health Tillamook will address in our Community Health Plan

- Health Priority #1: Housing and Homelessness
- Health Priority #2: Mental Health
- Health Priority #3: Access to Health Care
- Health Priority #4: Prevention and Management of Chronic Diseases

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly, we hope you imagine a healthier

region and work with us to find solutions across a broad range of sectors to create communities that define the well-being of people.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in Adventist Health Tillamook service area and guide the hospital's planning efforts to address those needs.

The significant health needs were identified through an analysis of primary and secondary data and community input. These health needs were prioritized according to a set of criteria that included the following twelve items: identified community need, addressing the disparities of subgroups, availability of evidence or practice-based approaches, community assets and internal resources for addressing needs, existing resources and programs, feasibility of intervention, importance to the community, magnitude, mission alignment and resources of the hospital, opportunity to intervene at population level, severity and whether the solutions could impact multiple problems.

For further information about the process to identify and prioritize significant health needs, please refer to Adventist Health Tillamook CHNA report at the following link: https://www.adventisthealth.org/about-us/community-benefit/

Adventist Health Tillamook and Adventist Health

Adventist Health Tillamook is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

Vision

We will transform the health experience of our communities by improving health, enhancing interactions and making care more accessible.

Mission Statement

Living God's love by inspiring health, wholeness and hope.

Adventist Health Includes:

(as of July 1, 2020)

- 23 hospitals with more than 3,600 beds
- 290 clinics (hospital-based, rural health and physician clinics)
- 15 home care agencies and eight hospice agencies
- Three retirement centers & one continuing care retirement community

- A workforce of 37,000 including associated, medical staff physicians, allied health professionals and volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of all faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates to 1866 when the first Seventh-day Adventist healthcare facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the "radical" concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.

Summary of Implementation Strategies

Implementation Strategy Design Process

Stakeholders from the 19 hospital facilities in the Adventist Health System were invited to participate in a Mission Integration Summit on September 26 and 27, 2019. During these two day-long events, participants were introduced to the 2019 Adventist Health Implementation Strategy Template. After the summit, each hospital was invited to participate in a series of technical assistance calls and consultation sessions with representatives from Adventist Health Community Integration and Conduent Health Communities Institute to further develop and refine their implementation strategy.

Adventist Health Tillamook Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Tillamook to directly address the prioritized health needs. They include:

- **Health Need 1: Housing and Homelessness**

  - Contribute staff time, direct and in-kind resources through community partnerships to increase the number of affordable and attainable dwelling units in Tillamook County.
  - Conduct closed-loop referrals to help low-income individuals access support for housing and other basic social determinants of health.
- **Health Need 2: Mental Health**
  - Provide telehealth mental health services though our medical offices.
  - Increase education on mental health services for people with substance use disorder (SUD) and / or opioid use disorder (OUD).
  - Work with community partners to further develop mental health services.
  - Develop a comprehensive medication assisted treatment (MAT) program.
- **Health Need 3: Access to Health Care**
  - Explore and create a mobile integrated healthcare team.
  - Identify and employ Health Promoters (Community Health Workers) as part of our mobile integrated healthcare team.
  - Prioritize and implement secure, closed-loop referral platform.
  - Screening and referrals for early childhood developmental needs.
- **Health Need 4: Prevention and Management of Chronic Disease**
  - Deploy mobile integrated care team to improve follow-up and health behavior maintenance among chronically ill and discharged patients.
  - Expand delivery of shared medical appointments via Lifestyle Medicine program.
  - Continue our partnership with Tillamook County Wellness programs.

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Tillamook will implement to address the health needs identified though the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

No hospital can address all the health needs identified in its community. Adventist Health Tillamook is committed to serving the community by adhering to its mission, and using its skills, expertise and resources to provide a range of community benefit programs. When developed in 2019, this Implementation Strategy did not include specific plans to address the following significant health needs identified in the 2019 CHNA.

Significant Health Needs – Activities NOT included in the 2020 Community Health Plan

Physical Environment, Safety, Access to Parks and Recreation

- We are currently partnered with the Tillamook YMCA which provides free services to community members, including offering programming to seniors age 60 and over and people with disabilities at no charge. Examples include: Tai Chi: Moving for Better Balance, Enhance Fitness, Qigong, and a pool-based arthritis class.
- Oregon Coast Visitors Association and Tillamook Coast Visitors Association have had good results facilitating investment in outdoor recreation facilities that promote activities such as hiking, biking, kayaking, boating and camping, among others.
- AH Tillamook will continue to partner with Tillamook County Wellness to provide collaboration to increase safe access to physical built environments, including coordination and promotion of detailed, interactive recreational maps.

COVID 19 Considerations

The COVID-19 global pandemic caused extraordinary challenges for Adventist Health hospitals and health care systems across the world. Diversion of resources, workforce shortages, burnout and other mental health concerns have taken a toll. Providing care in rural communities is a challenge under typical circumstances. The recent pandemic exacerbated those challenges and has affected our ability to meaningfully support community health and well-being in the ways we planned.

Adventist Health, like other health care systems, had to pivot its focus to meet the most urgent healthcare needs of its community during the pandemic, as well as reassess the ability to continue with some community health strategies due to public health guidelines for social distancing. Adjustments have been made to continue community health improvement efforts as possible, while ensuring the health and safety of those participating. The Strategy Action Plan Grids on the following pages reflect updated activities for each strategy.

In 2021, Adventist Health as a system took the following actions in response to the needs created or exacerbated by COVID-19:

- Began offering more virtual health care visits to keep community members safe and healthy.
- Developed an online symptom tracker to help community members determine if they may have COVID-19 or some other flu type illness and what steps to take.

- Active participation in a countywide, collaborative effort to vaccinate eligible community members to help stop the spread of the virus.

Locally, Adventist Health Tillamook (AHTM) took these additional actions:

- On-going monitoring of needs and actions by the COVID-19 Incident Command Team.
- Offered walk-in COVID testing and vaccination sites.
- Market President conducted daily COVID-related status reports, including case counts, local and regional response capacity.
- Hospital leadership participated in community COVID strategic planning, response and public outreach, including weekly radio broadcasts.
- On-going collaboration among Tillamook County vaccine partners to plan, coordinate and execute vaccination distribution throughout Tillamook County.

Adventist Health Tillamook

PRIORITY HEALTH NEED: HOUSING & HOMELESSNESS

GOAL STATEMENT: PARTNER ACROSS SECTORS TO REDUCE THE IMPACT THAT HOUSING INSECURITY HAS ON HEALTH AND WELLBEING FOR ALL INDIVIDUALS IN TILLAMOOK COUNTY.

Mission Alignment: Well-being of People

Strategy 1: Partner to support community action programs, and community-based organizations that provide shelter/transitional housing supports in the region.

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
Activity 1.1 Housing Commission Appointment	Create Communication plan: # of Media touches related to housing	See narrative below	Acres of developable land	On-going, Not done	Number of available dwelling units	
Activity 1.2 Referrals for housing assistance	Closed-loop referral process in place for housing assistance (CARE, Helping Hands)	Completed	Increased # of AHTM referrals for housing using the Connect Oregon Network (Unite Us)	8 closed-loop housing/ shelter referrals	# of individuals who safely transition into housing programs	

Source of Data:

- AHTM EMRs for housing referrals and/or Unite Us reports for housing referrals
- CARE, Inc. and/or Helping Hands
- Tillamook County Housing Commission and Oregon Housing Alliance

Target Population(s):
Individuals with housing insecurities and / or homelessness

Adventist Health Resources:

- Financial
- Staff
- Cash & In-Kind Donations

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

- *Tillamook County Housing Commission
- CARE, Inc.
- Helping Hands
- Tillamook Seventh-day Adventist Church
- AH Tillamook
- Media Partners (Headlight-Herald, Tillamook County Pioneer, KTIL Radio, etc.)

CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations)

Strategy Results 2021:

Partnership with CARE, Inc.: Whenever possible, AHTM refers patients with housing insecurities to CARE, Inc. which has six tiny homes for transitional housing and offers tents, tarps and other essential items for the homeless. CARE, Inc. also coordinates with Helping Hands, a faith-based, drug and alcohol-free transitional housing program. Often, those in need of housing assistance do not meet the necessary eligibility criteria for the options available to them or there simply are not enough open beds or available housing units to meet demand.

Funds from an Opioid Use Response grant managed by AHTM were provided to CARE, Inc. to provide:

- Personnel: outreach/case manager for housing services capacity building
- Vehicle: for housing and other wrap-around services

Serving Up Hope Meals: In partnership with Tillamook Seventh Day Adventist Church, AHTM volunteers served 1,722 weekly meals to low-income and homeless individuals, also contributing more than $30,000 for meal ingredients and other supplies, including personal hygiene products. We were also able to use our Serving Up Hope meal site as a Focus Group to inform the 2022 CHNA process.

Homeless Connect: Due to the COVID-19 pandemic, the annual Homeless Connect event was not open to community partner participation. AHTM donated hand sanitizer and Chapstick as well as reusable bags to the event valued at approximately $500.

Housing Commission Representation:
AHTM has an official appointment to the Tillamook County Housing Commission, serving as a Large Employer Representative. The commission conducted a Housing Needs Assessment in 2019 to address the chronic lack of affordable and available housing in Tillamook County. Accounting for projected population growth and pent-up demand, Tillamook County has a goal of adding 135 new net dwelling units per year for the next 20 years. With a vacancy rate of 1% and rapidly rising housing prices/rents, lack of affordable housing is directly contributing to homelessness, poverty and poor health outcomes in Tillamook County. For these reasons, clinical referrals for housing assistance have not been successful.

The Commission is working on multiple upstream solutions, including legislative advocacy around zoning and development policies as well as public support for innovative solutions (i.e., accessory dwelling units or ADUs, multi-plex's, etc.) in addition to apartment complexes. Three significant accomplishments during 2021 included 1) Construction of 60 units of affordable housing, 2) Passage of state legislation allowing ADUs in unincorporated areas of the County and 3) Implementation of a Short-Term Rental Operators (STR) fee. Collected quarterly from area vacation rentals, the STR fees provide grant funding to assist with offsetting systems development costs for new housing construction. These grant funds will be made available in 2022. It is worth noting that $400,000 of American Rescue Plan funding allocated to Tillamook County in 2021 will be added to that fund.

A fourth accomplishment, tied to our Community Health Plan, involves a communications plan to address public perception of low-income housing or changes to neighbor aesthetics that contributes to an inhospitable climate for development in Tillamook County. AHTM's involvement in the commission's

effort centers on increasing public understanding of housing as a social determinant of health and how collaborative problem-solving can improve community livability, economic viability and individual health and well-being. During 2021, AHTM assisted the Housing Commission in developing a brand, logo, website, and social media presence featuring regular news and stories about the work of the commission and the various stakeholders impacted by the housing crisis. One of the most important successes during 2021 has been increasing awareness that someone really is working on the, seemingly intractable, housing crisis.

Adventist Health Tillamook

PRIORITY HEALTH NEED: MENTAL HEALTH						
GOAL STATEMENT: ALLOW ACCESS TO AND CAPACITY FOR ANY INDIVIDUAL SEEKING MENTAL HEALTH SERVICES						
Mission Alignment: Well-being of People						
Strategy 1: Increase access to mental and behavioral health and treatment for substance use disorders through new services, education and partnerships.						
Programs/ Activities	**Process Measures**	**Results: Year 1**	**Short Term Outcomes**	**Results: Year 2**	**Medium Term Outcomes**	**Results: Year 3**
Activity 1.1 Increase education and trainings related to SUD and / or OUD through O.U.R. Tillamook	Create messaging campaign, informational website and provider trainings	Website & training completed	Number of AH behavioral health providers who have completed training	1	10% increase in AH provider trainings (initial or continuing education)	
Activity 1.2 Develop comprehensive medication assisted treatment (MAT) program	Development of a comprehensive model which supports MAT programs	See narrative below	Number of AH behavioral health providers who complete training	0	10% increase in AH behavioral health provider trainings (initial or continuing education)	
Source of Data: • AH Tillamook • O.U.R. Tillamook						
Target Population(s): • Anyone seeking mental health services						
Adventist Health Resources: • Financial • Staff • In-kind donations						
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) • AH Tillamook • O.U.R. Tillamook (HRSA funded grant)						
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement						

Strategy Results 2021:

Opioid Use Response: September 2021, marked year two of the Rural Communities Opioid Response Program- Implementation (RCORP-I), $1M grant, (O.U.R. Tillamook). This is a collaborative effort to increase provider and community education around opioid use/overuse/overdose, as well as prevention and treatment for opioid and substance use disorders.

Accomplishments include:

- 18 Naloxboxes distributed to schools, businesses and organizations. This gives naloxone access to anyone in or around their building.
- Distributed over 500 kits of Narcan in Tillamook County.
- Over 180 local professionals have been trained in how and when to use Narcan.
- AHTM launched a Medication for Opioid Use Disorder (MOUD) program. Frequently known as MAT, this program makes OUD therapy more accessible and allows patients to have options of where they want to receive OUD care. The MOUD team has created guidelines and workflows to support current and future providers treating patients with OUD.
- Through OUR Tillamook, the Tillamook County Community Health Centers (LPHA) started a monthly syringe exchange. It has quickly grown to a weekly event, with 110 kits of naloxone (nasal and injectable) and about 24,000 syringes exchanged from April – December 2021.
- A substance use navigator joined AHTM for approximately 6 months in 2021, working with nearly 70 clients to connect them with the right local resources.

Grief Support: In addition to providing hospital and home visits to individuals who are suffering, our AHTM Chaplain led no-cost, weekly grief support classes for 109 individuals during 2021.

Adventist Health Tillamook

PRIORITY HEALTH NEED: ACCESS TO HEALTH CARE						
GOAL STATEMENT: ELIMINATE BARRIERS TO PRIMARY CARE, INCLUDING, GEOGRAPHIC AND TRANSPORTATION INCONVENIENCES, LACK OF KNOWLEDGE, AND LACK OF INSURANCE COVERAGE.						
Mission Alignment: Well-being of People						
Strategy 1: Increase access to primary care through programs that seek to address barriers by engaging in the community.						
Programs/ Activities	**Process Measures**	**Results: Year 1**	**Short Term Outcomes**	**Results: Year 2**	**Medium Term Outcomes**	**Results: Year 3**
Activity 1.1 Explore and create a mobile integrated healthcare team	Develop and implement program	In process	# of people served (meals, other services…)	1,722	10% increase in the number of people served	
Activity 1.2 Connect Oregon Network (UniteUs)	Prioritize and implement integration of a secure community-referral platform	Completed in 2021	# of trained staff with program access	14	# of referrals for community-based services and programs	
Activity 1.3 Screening for early childhood developmental delays	All providers seeing children (especially ages 0-5) are screening for developmental delays	3 providers meeting this	# of trained staff # of screenings # of PTOT/Speech encounters	Not actively pursued due to staff capacity issues	# of closed loop referrals for developmental and pediatric behavioral health services Revenue generated from increase in encounters	
Source of Data: • AH Tillamook • UniteUs Reports • Early Intervention Services/Northwest Regional ESD						
Target Population(s): • Individuals in need of increased access to healthcare, community programs and social services						
Adventist Health Resources: • Financial • Staff • Supplies • in-kind donations						

PRIORITY HEALTH NEED: ACCESS TO HEALTH CARE
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) • AH Tillamook • Tillamook County Wellness • UniteUs (funding through Columbia Pacific CCO) • TSD9 • Approx. 30 Community-Based Organizations (CBOs)
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) *** A**- Community Health Improvement

Strategy Results 2021:

Health Insurance Enrollment: AHTM continues to provide enrollment assistance for people in need of health insurance through the Oregon Health Plan (Medicaid). Due to system and staff capacity constraints, we were unable to count the number of individuals served.

Free/Discounted Prescription Drugs Program: In 2021, AHTM provided free and discounted prescription medications to community members in need. Response to the COVID-19 pandemic, providing vaccines and timely treatment for individuals hospitalized with COVID, precluded our pharmacy staff from tracking this expense during 2021.

Community-Based Care: During 2021, AHTM Care Coordinators provided care in non-traditional settings, including in people's homes and at community meal sites. Workforce capacity constraints have not allowed Nurse Care Managers/Coordinators to document thoroughly encounters. Some examples of community-based care delivered in 2021 include:

- Home visits and welfare checks for individuals lacking transportation
- Offsite pharmacy medication pick-ups for elderly and homeless patients
- Street welfare checks for homeless
- Community outreach events – flu shots and COVID education

Closed-Loop Referrals: AHTM collaborated with Tillamook County partners to engage with and attract UniteUs to provide a web-based, closed-loop referral platform for connecting clinical care with community services that address social determinants of health. The "Connect Oregon Network" stakeholder group convened in late 2020 and AHTM leaders and decision makers were on-boarded during this time. With the network launch on February 23, 2021, AHTM will continue to explore steps necessary for care integration.

Early Childhood Developmental Screenings: During 2021, improvements were made in revisiting and standardizing screening and referral procedures for early childhood development. With new clinic leadership in 2021, and with newly established incentive metrics for this by the Columbia Pacific CCO, it is expected that more providers will become aware of and implement these practices in 2022.

Children & Youth: AHTM provided 136 annual adolescent exams/sports physicals at no charge to area youth during 2021. Additionally, AHTM's athletic trainer provided assessments and treatment for 27,950 student athlete encounters, through a no-cost program partnership with Tillamook School District 9.

Education: Increasing Access to Care requires a ready workforce. In 2021, AHTM proctored/mentored a total of 974 students for future careers in medicine, radiology, physical therapy, nursing and other healthcare occupations.

Adventist Health Tillamook

PRIORITY HEALTH NEED: PREVENTION AND MANAGEMENT OF CHRONIC DISEASES						
GOAL STATEMENT: DECREASE CHRONIC DISEASE PREVALENCE THROUGH FOCUS ON REDUCING CHRONIC DISEASE RISK FACTORS.						
Mission Alignment: Well-being of People						
Strategy 1: Provide follow up care to high-risk individuals and partner to increase lifestyle management programs targeted to those with chronic disease.						
Programs/ Activities	**Process Measures**	**Results: Year 1**	**Short Term Outcomes**	**Results: Year 2**	**Medium Term Outcomes**	**Results: Year 3**
Activity 1.1 Follow up process for critically ill and discharged patients	# of patients recently discharged or at high risk receiving visits from mobile integrated healthcare team.	See narrative regard-ing commun-ity based care	Decrease in: emergency room visits, urgent care visits, and readmissions	68 Read-missions (66 in 2020)	Decrease in: emergency room visits, urgent care visits, and readmissions, specifically level 4 and 5	
Activity 1.2 Screen for prediabetes	Internally operationalize pre-diabetes screening: - Communication - Clinician buy-in	2 providers participa-ting	Increased # of at-risk patients screened for prediabetes	3 referrals not operatio nalized	# of closed loop referrals to NDPP (National Diabetes Prevention Program)	
Activity 1.3 Lifestyle Medicine	Number of patients enrolled in Lifestyle Medicine program	N/A	# of participants who are diagnosed with: - Diabetes - Hypertension - Obesity - Cholesterol	N/A	# of participants referred to community lifestyle programs # of continuing participants with: - Diabetes - Hypertension - Obesity - Cholesterol	
Activity 1.4 Develop comprehensive medication assisted	Development of a comprehensive model which supports MAT programs	On-going	Number of AH healthcare providers who complete training	11	10% increase in AH healthcare provider trainings (initial or continuing education)	

PRIORITY HEALTH NEED: PREVENTION AND MANAGEMENT OF CHRONIC DISEASES						
treatment (MAT) program						
Source of Data: • AH Tillamook • County Health Rankings • Unite Us Reports • Community program participation data (National Diabetes Prevention Program, Walking groups, Cooking Matters, etc)						
Target Population(s): • People at risk for or with chronic diseases						
Adventist Health Resources: • Staff • Supplies • In-kind						
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) • AH Tillamook • Tillamook County Wellness • Tillamook YMCA • OSU Extension • NWSDS						
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations)						

Strategy Results 2021:

Opioid Addiction Treatment/MAT: Adventist Health Tillamook officially launched the MOUD program in July 2021 with 11 providers certified ("x-waivered") to offer MOUD. The MOUD Team promoted training opportunities and is in the process of updating policies relating to MOUD and withdrawal symptoms.

The MOUD Team is also working to bring MOUD services to adults in custody. This was a service previously not offered at the jail.

Reducing Readmissions: Representatives from Northwest Senior & Disability Services, AHTM, Home Health & Hospice, Columbia Pacific CCO and other partners convene on a bi-monthly basis, hosted by AHTM, to discuss and strategically problem solve recurring emergency room admissions for critically ill and discharged patients. In addition to reducing readmission rates through improvements in self-management and in-home support, this process facilitates wrap-around care to reduce stress and improve outcomes for patients and their families. During 2021, the collaborative served 48 individuals.

Lifestyle Medicine: Efforts were made during 2021 to determine the viability of offering a virtual/hybrid option. This program will be relaunched in 2022 and will integrate the new Connect Oregon (Unite Us) referral network for closed-loop referrals to community-based programs that promote healthy lifestyles.

Tillamook County Wellness Coalition: Since 2015, AHTM has been a leading member of the Tillamook County Wellness (TCW) coalition. A program of Tillamook County Public Health, TCW is a population health improvement initiative focused on reducing the number of people at risk for developing type 2 diabetes. AHTM leadership is appointed to the 20-member TCW Advisory Council by the Tillamook County Board of Commissioners. There are four action committees working collectively and strategically to deliver upstream interventions that address social determinants of health.

Through a partnership agreement between AHTM, Tillamook County Public Health, Oregon Health & Sciences University and Oregon State University, AHTM's Director of Community Well-Being provides overall coordination to TCW.

In addition to the Advisory committee, AHTM associates support many of the TCW committees to further TCW goals and intervention strategies in multiple domains, including access to Health Screenings & Referrals, Healthy Food, Physical Activity, Health Promotions and Workplace Wellness.

The TCW Connect & Screen committee is working to: 1) Increase rates of prediabetes screenings and referrals to the National Prediabetes Prevention Program for those who qualify, 2) Implement and integrate the Connect Oregon (Unite Us) Network to facilitate closed-loop referrals between community and clinical partners and vice versa, and 3) explore and implement Community Health Workers (CHWs) to expand care delivery. During 2021, AHTM registered 14 users on the Connect Oregon Network and began the process of integrating the platform with our electronic medical records system (Cerner) to streamline referrals. AHTM also participated in a state grant-funded collaborative to explore CHW funding pathways and implementation models.

Physical Environment was identified as a priority in our CHNA. TCW has been a driving force in this domain, launching an interactive recreation map, seven volunteer-led walking groups and 4 group hikes during 2021. During this time, they also advocated for a Tillamook County Trails & Recreation Coordinator which was established in 2021 with funding through the county transient lodging tax. The individual hired for that role became co-chair to the TCW Access to Physical Activity committee.

The Adventist Health + Blue Zones Solution

Our desire to improve community well-being grew out of not only our mission at Adventist Health -to live God's love by inspiring health, wholeness and hope – but also by the sheer need as seen across our system of 23 hospitals. Overwhelmingly, we see issues related to health risk behaviors, mental health and chronic illnesses throughout the communities we serve. That is why we have focused our work around addressing behavior and the systems preventing our communities from achieving optimal health.

In an effort to meet these needs, our solution is to create a sustainable model of well-being that measurably impacts the well-being of people, well-being of places and equity.

In 2020, Adventist Health acquired Blue Zones as the first step toward reaching our solution. By partnering with Blue Zones, we will be able to gain ground in shifting the balance from healthcare – treating people once they are ill – to transformative well-being – changing the way communities live, work and play. In 2021, Adventist Health committed to launching six Blue Zone Projects within our community footprint, and as we enter 2022 these projects are active. Blue Zone Projects are bringing together local stakeholders and international well-being experts to introduce evidence-based programs and changes to environment, policy and social networks. Together, they measurably improve well-being in the communities we serve.