

Phase II Essay Instructions (Do Not Delete):

The Phase II application provides an opportunity for you to add to your Phase I Essay in order to broaden and deepen judges' understanding of your community's commitment to building a Culture of Health.

Since judges will carefully and systematically review each community's Phase I and Phase II submissions as a complete package, applicant communities are strongly urged to use the Phase II Essay to *enhance rather than repeat* content submitted in Phase I.

The Phase II Essay should have five distinct sections, composed of responses to each of the five items below. To maximize space for responses, signal the start of each new section by using the bolded phrases as shown (rather than repeating each question or prompt in its entirety).

- 1. Building a Culture of Health.**
 - a. Showcase additional accomplishments that go beyond the efforts featured in your Phase I essay. Describe each additional accomplishment in a brief paragraph that illustrates:
 - Specific policies, programs, or strategies undertaken
 - Different sectors, partners, and populations involved
 - Impact to date and/or expected future impactDo not simply list additional accomplishments.
 - b. Describe how your accomplishments, taken together, reflect intentionality toward building a Culture of Health in your community.
- 2. Working Together.** Describe the role of partnerships in your community. How is your community working together across health factors, sectors, and organizations, and weaving efforts to improve health outcomes?
- 3. Defining Success.**
 - a. How do you define success in your efforts to build a Culture of Health? How are shared priorities, definitions of success, and specific goals established among partners?
 - b. Describe a specific example of how the community is consistently using data and evidence to continuously improve processes and inform action.
 - c. How do you know your community is making measurable progress on desired results? What measurable outcomes is your community especially proud of?
- 4. Creating Conditions to Improve Equity.**
 - a. How would you describe your community's approach to cultivating a shared commitment to equity, and what actions are you taking to improve opportunities for all to be healthy?
 - b. Describe a specific example to illustrate how community residents – especially excluded or marginalized groups and those most affected by poor health outcomes – are regularly engaged in making decisions and driving solutions to address barriers to good health.
- 5. Sustaining Community Impact.** Building a Culture of Health means creating change designed to last. Tell us why you believe your health improvement efforts will endure for the long haul. Provide brief but specific examples to illustrate your community's continued commitment to ensuring that your accomplishments take root and flourish over time. Judges recognize the important role that financial resources play, but are eager to learn about other effective sustainability strategies that cut across all Prize criteria.

Please note that there are no expectations or requirements as to the length of each response. Depending on your community's experience, responses to some questions may be necessarily longer or shorter than others. For each response, judges will value quality and authenticity over length. The only requirement is that all five essay questions must be answered within five total pages, using the format settings in this template.

Please begin your essay on the next page. Do not delete the instructions above.

1. Building a Culture of Health.

A rural renaissance is happening in Klamath County, Oregon. Our residents have taken great strides over the past five years to stop the trend of worsening health outcomes and to start moving the needle in the right direction. We are beginning to see success, which is a testament to our community's commitment, collaboration, and innovation. Leaders and lay community members alike are building a culture of health in the place we call home. Policy changes, cross-jurisdictional partnerships, green infrastructure development, new programs, and social connectedness are taking hold to bring about a community revival. As our health improvement journey continues, Klamath County is at the forefront of health initiatives and is gaining notoriety across the state.

Leading the way in tobacco policy change, Klamath County was the fourth county in Oregon to adopt a local Tobacco Retail Licensing (TRL) ordinance. TRL is a critical step for us in preventing our youth from purchasing tobacco products. After evaluating the data, we understood the magnitude of the problem. When state compliance inspections were conducted, one in three attempts by youth to purchase tobacco products were successful. In an effort to understand the proximity of tobacco retailers to schools, a Geographic Information System (GIS) map was created. This served as a visual depiction of the frequent exposure and easy access Klamath County youth have to tobacco products. With a focus on protecting our youth, the community mobilized. With Klamath County Public Health at the helm, local high school students, physicians and community members were instrumental in advocating for TRL. The ordinance was passed last year and it is anticipated that this will lead to a decrease in tobacco use rates.

The food system is another focus area in our pursuit of health improvement. As an agricultural community, Klamath County has the resources to support consistent access to healthy, affordable, local food for our community members, but we were lacking a delivery mechanism. Expanding upon the Klamath Falls Farmer's Market and the "Find Your Farmer" event, a virtual farmer's market was launched in November 2017. Klamath Farmer's Online Marketplace (KFOM) is the first of its kind. It is a hybrid that combines elements of a farmer's market, a food buying club, and a community supported agriculture (CSA) model. With 18 local producers, KFOM connects our area farmers and ranchers with community members, making fresh produce and livestock products available year-round. KFOM functions through an online, weekly ordering system with a centralized drop-off and pickup location. KFOM is one of many steps in the right direction as our community continues to build partnerships and drive efforts toward creating a robust, health-driven food system.

Klamath County has a handful of areas that have been ranked among the top poverty hotspots in the state of Oregon. Although our local economy is slowly starting to recover, many barriers to overcoming poverty remain. To address these barriers, a diverse group of partners came together in 2014 to implement a co-location model for social services. Local realtors, business leaders, community foundations, health and human service providers, law enforcement, the Klamath Tribes, local government, substance abuse treatment providers, and the Gospel Mission joined forces to create the Klamath Works Campus (KWC). The KWC is a centrally located human services campus designed to unify providers and decrease transportation barriers caused by our geographically widespread community. It is expected that it will take at least five years for the vision for this project to be fully realized, however construction and programming are already underway. Ultimately the campus will house the Gospel Mission, the new Sobriety Station, mental health services, and a variety of other health and human services. An additional element of the KWC project is the Klamath Works Inc. job and life skills training program. Klamath Works has already helped more than 100 participants find jobs since the first cohort in 2016. As with many pilot projects, the program experienced barriers and stakeholders are continuously improving their methods. Overall, the Klamath Works Campus is intended to streamline the delivery of critical services and connect its clientele to the resources needed to overcome poverty.

As an area known for its natural beauty, our community has capitalized on the great outdoors to continue to build a culture of health. Many initiatives are in the works to create a healthy built

environment. While some agencies are focused on increasing safety or improving air quality, other agencies are making investments in green infrastructure. New trails are being built to improve connectivity, a regional Urban Trails Master Plan was completed, and a Safe Routes to School Master Plan is in progress. New green spaces are being built and older parks are being revitalized. In turn, this provides more family friendly options and makes it easier for people to be physically active.

One grassroots organization formed to improve the safety and connectedness in the Mills Addition neighborhood. In response to being ranked as a poverty hotspot, the residents organized to establish the Mills Neighborhood Association (MNA). The group works to improve the quality of life in the neighborhood, rehabilitate blighted areas, and enhance relationships. They are working on cleaning up the neighborhood and even hosted an inaugural bicycle parade last year. Beautification projects prompted our local coordinated care organization (CCO) to host a workday in one of the neighborhood parks to make necessary repairs and install new playground equipment. The MNA continues to engage residents and bring people together to restore the neighborhood to the vibrant community it once was.

Health improvement efforts have gained momentum and we have seen a resurgence in Klamath County. Over the past five years, inspiring, collective work has happened because of widespread partnerships. Additionally, as a community we have learned to focus on systems and environmental change and health in all policies to influence overall health outcomes. As our journey progresses, we will continue to collaborate strategically, share resources, and lift up Klamath County to reach its full potential. That is how we are building a culture of health in our community and the feeling of change and excitement is palpable.

2. Working Together.

In a small, rural community, one of our greatest assets is our people. Sharing resources and aligning priorities whenever possible, we have learned that we are stronger together than alone. Time and time again our community members mobilize for change. Coming from all walks of life, our residents contribute to the collective impact by volunteering their time to facilitate self-management groups, attending public meetings to support policy change, or supporting worksite wellness initiatives. We strive to not only maintain, but to continue to grow our partnerships and networks. For example, the initial group of 27 volunteers rallying for the Blue Zones Project (BZP) to select Klamath as a demonstration community has grown to a network of 453 volunteers. Additionally, County and City Officials increasingly work together on initiatives to help the entire community. Our accomplishments would not be possible without the many partnerships that have been formed in our community.

A prime example of working together across organizations to improve health outcomes is the Living Well Coalition. Klamath County has a high prevalence of chronic conditions and limited resources to help people manage them. From 2006 to 2012, one organization administered Stanford's Living Well with Chronic Conditions self-management program. Unfortunately, a lack of resources and capacity resulted in the program ending in 2012. However, the desire for these self-management programs endured. In 2014, the program was resurrected through a partnership of four organizations. Within a year the partnership blossomed into the Living Well Coalition with cross-sector representation from 11 community-based agencies. Today, the coalition is thriving and respected throughout the state. To make the programs possible, the coalition partners paid for training, contributed space, incentives, and staff volunteers to facilitate the groups. The coalition continues to grow by securing funding, gaining new partners, and adding more programs, and strategically planning for sustainability.

Another example of how our community has networked to address health concerns is with the formation of the Klamath County Oral Health Coalition. With the Klamath Promise mission in mind, a school administrator approached the health department after he noticed that students were missing school or performing poorly due to dental problems. As a result, the public health director convened local partners and garnered state support to launch the coalition in early 2017. The coalition, comprised of public and private agencies, community organizations, and individuals, is focused on improving oral

health outcomes in Klamath County. In its first year, the coalition hosted a free dental clinic day in Merrill, a rural town that is home to a predominantly Hispanic population. In partnership with Medical Teams International, dental hygiene students and dentists volunteered to make this event possible. Additionally, the Merrill Lions Club supported the event by providing free vision screenings. Because of its ability to organize so quickly, the new coalition was called upon to share its experiences during a recent statewide conference. As the coalition begins its second year, it is poised to grow and will continue its work to address the oral health needs of our community.

Through its continued focus on public safety and relationship building, the Klamath Falls Police Department (KFPD) has been instrumental in creating positive change in our community. KFPD is working diligently to change the community's perception of law enforcement through meaningful community engagement. The Community/Police Advisory Team (CPAT) was formed to help repair broken bonds, build relationships, and enhance trust among community members. It is comprised of individuals who represent each neighborhood, various cultural groups, other law enforcement, and KFPD personnel. CPAT helps align policing practices with community wants and needs. For example, the use of body cameras for the officers was being considered. Before moving forward with the project, CPAT acted as a sounding board to navigate the pros and cons from a layperson's perspective. This type of collaboration fosters a mutual respect between law enforcement and community members. The positive relationships being built by KFPD not only contribute to the vision for our community, but will contribute to overall improved health. When asked recently how the work the department is doing has an impact on the health of our community, Chief Dave Henslee, of KFPD explained, "The goal at the KFPD is really to create a community where people are proud to live, to work, and to raise families. We recognize if we accomplish that goal, if that's our priority, then people are more apt to be outside, they're more apt to go out and enjoy the outdoors, and to have a very healthy and active lifestyle that promotes well-being. That's something that is really important to us."

3. Defining Success.

Success in our community is not solely defined by data, as not all successes can be measured quantitatively. There has been a shift in public perception and an increased sense of pride as Klamath County gains recognition both at the state and national level. There is a growing desire for people to work together and a renewed optimism is energizing our community. Becoming the first BZP demonstration community in Oregon was a huge success for us and it served as a catalyst for change. Other communities around the state are now reaching out to us to learn more about our models, whether it's with the Blue Zones Project, Tobacco Retail Licensing, or the Living Well Coalition. Ever the underdog, our counterparts across the state are beginning to say, "If Klamath can do it, we can do it." These areas, along with our accomplishments to date, the partnerships formed, and the amount of people becoming involved are ways we measure success.

With that being said, part of every journey is showing measurable progress. Our health rankings and health statistics have been the driving force behind our health improvement initiatives. Stemming from the Healthy Klamath Coalition, BZP gave our community the needed structure and direction to make measurable changes in health and well-being in a short amount of time. At its inception, all BZP sector committee members participated in a workshop to discuss community values, select projects, and establish metrics and milestones. Additionally, BZP conducts an oversampling of the community for Gallup Polls' Well-Being Index. A "blueprint" was drafted to guide our health improvement activities and evaluation. Milestones within the blueprint included passing policies, improving specific health indicators, completing a marquee project within the built environment, and increasing awareness of BZP to achieve the tipping point. In just three years, we have seen community awareness increase from 24% to nearly 75%. Community involvement in BZP activities has also grown from 8% to almost 34%. This means people are volunteering, participating in purpose workshops, and joining "moais," which are

social groups that gather to walk or simply socialize. The framework provided by the Blue Zones Project increased our capacity to collect and analyze community-level data.

To help us launch data-driven projects, we have relied on the expertise provided by our academic partners at Oregon Tech. While working on several walkability and bikeability projects, the BZP Built Environment Committee realized that there was a lack of comprehensive data on active commuting. Under the direction of Dr. Kristen Konkell, her students, along with County and City Planning, Oregon Department of Transportation, and community members who actively commute, are conducting year-round bike/pedestrian counts. They also felt compelled to evaluate culture and perceptions of active commuting. Anecdotally, the perception in Klamath was that those who walk or bike are poor, so active commuting had a negative perception. Dr. Konkell developed a survey to supplement the counts, giving us comprehensive baseline and year-two data. This project is contributing to a national body of evidence through the National Bicycle and Pedestrian Documentation Project and can help us prioritize projects from the Urban Trails Master Plan or Safe Routes to Schools Master Plan.

Another data-driven collaborative with Oregon Tech is the protected bike lane (PBL) project. In 2014, two local health professionals from the Sky Lakes Wellness Center had the vision to build a PBL as a way to promote safe, active commuting. To determine where it should be built in the community, they teamed up with Dr. John Ritter and two students to use GIS to analyze and map health data obtained from 60,000 hospital records. Two areas stood out on the maps; one neighborhood with an older population with a high prevalence of chronic illness, and one with a younger demographic with a higher occurrence of obesity, yet without the subsequent chronic conditions. It was determined that the second neighborhood would be the prime location for an intervention. The maps were instrumental in getting the PBL approved by City Council. In the future, the same methods will be used to analyze the health data in the designated neighborhood to measure overall impact of the protected bike lane.

We are continually becoming more data-focused at the community level. On the Healthy Klamath website, features have recently been built to track the progress of our latest Community Health Improvement Plan. As we enter our next health assessment cycle, we are aligning the metrics of our partner organizations to better understand our data needs and are putting systems into place to track health indicators. Most of our health interventions are fairly recent, and we await the day we will see their impact reflected in our health statistics. In the meantime, we take pride in our many community accomplishments. In particular, the Blue Zones Project, Tobacco Retail Licensing, the Protected Bike Lane, Klamath Farmer's Online Marketplace, and the Produce Connection stand out for us.

4. Creating Conditions to Improve Equity.

Klamath County is home to many different types of people and unique perspectives. After decades of division, the health equity landscape is beginning to change. Although there is always more work to be done, agencies in our community are starting to work together to address the needs of our marginalized populations, which include our Tribal, Hispanic, and LGBTQ populations. For the first time in years, coalitions and groups now have individuals and agencies that represent our marginalized populations sitting at the table. Groups are seeking those with lived experience but often struggle to identify with them. In recent years, we have realized that to be more equitable, we need to meet people where they are at.

A grant to start a Health Equity Coalition was one opportunity for us to improve the landscape around equity in our community. In 2014, Klamath County Public Health, with support from community partners, created the Klamath Regional Health Equity Coalition (KRHEC). A noteworthy accomplishment for KRHEC was a Social Exclusion Simulation (SES) implemented in partnership with Klamath Tribal Health & Family Services and their health partners. The purpose of the simulation was to demonstrate the social constructs that create systemic barriers and prejudice, which prevent access to community resources for our Tribal population. Adapted to focus on a Tribal population, this SES was the first of its kind. It not only exposed the broader community to the real-life issues faced by Tribal populations, but it

was pivotal for relationship building with Klamath Tribal Health & Family Services. Although KRHEC grant funding ended, the work will continue through a variety of avenues. First, Klamath Tribal Health & Family Services is continuing the Chiloquin First Coalition, an offshoot of KRHEC, to affect positive youth development and prevent substance abuse in a high-risk rural area. Additionally, the work will continue through community education that focuses on implicit bias training and also on creating safe spaces for those who identify as LGBTQ.

Furthermore, agencies are responding to the need for more linguistically and culturally appropriate information in our community. The BZP realized they were not reaching the Spanish-speaking segment of our population and have started to provide materials in both Spanish and English. In addition to organizational equity work, there have been individual champions driving change. Sergio Cisneros is a local educator, business leader, and a pillar of the Hispanic community. With unique public media experience, he joined the Editorial Board for the newspaper. He leveraged this opportunity and spearheaded our first-ever all-Spanish publication in the Herald and News, with plans for a quarterly edition. Taking it a step further, he empowered Hispanic students to submit pieces in their native language and celebrate their heritage. He is an agent of change, and one of many champions in our community, working on building a culture of health that is equitable for all of our community members.

5. Sustaining Community Impact.

Being consistently ranked at the bottom of the RWJF County Health Rankings has been a wakeup call for our community. We knew if we were going to become a healthier and happier place to live, we had to come up with sustainable solutions. As a community, we are making the shift to policy, systems, and environmental changes to make healthy choices practical and available to all of our residents. In addition, the cross-sector partnerships that have been established are one of the keys to sustainability in our community. When programs are developed, we strive to align our projects, so that another organization can come along and carry the torch if need be. For example, the Blue Zones Project was funded for an initial three-year project period. With the end in sight, discussions among community leaders are already happening to shift its trajectory so that this great work can continue. The committee structure used by BZP is conducive to health improvement planning and can be transitioned to fall under another umbrella, such as the Healthy Klamath Coalition. The partners comprising the Tobacco and Smoking Committee can continue to work on tobacco policy change, such as establishing tobacco free city parks. For the Built Environment Committee, creating master plans lends itself to sustainability. Now steps can be taken to put these plans into action. These are just a few examples of how work will be carried forward in our community.

Another important aspect of sustainability for us is creating institutional memory. The work being done through our Community Health Assessment and Community Health Improvement Plan offers a written history and provides a framework for organizations to follow even as personnel come and go. Our community is fortunate to have the Healthy Klamath website, which serves as a clearinghouse for this type of information and community data. We continue to improve upon the website and encourage community members and partners to utilize it. In our community, we have no epidemiologists. This website helps fill that need by providing county-level health indicators, trend analysis, and comparisons to state and national-level data. In a community where the need is high, and the resources are often limited, creating sustainability in all of our efforts is essential.

Although programs may morph and change as priorities shift, the key accomplishments that have defined our success will not disappear in the foreseeable future. The focus on health improvement will continue as our community leaders understand that it is an essential part of turning around our community to make it a better place to live, work, and play for everyone. Finally, the passion, dedication, and involvement of our community members cannot be replicated, however, the momentum and energy that has been created is spreading and that will be the ultimate catalyst for change in Klamath County.