Community Engagement Initiative: A Process for Improved Community Accessibility & Health

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Who We Are

Oregon Office on Disability & Health
Funded by
Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities
Presentation Objectives

• Describe our method (Community Engagement Initiative or CEI) to reduce environmental access barriers

• Review CEI implementation & results in Oregon
Community Engagement (CE)

- Geographic proximity
- Special interests
- Similar situations
- Common issues affecting their well-being.
Underlying Idea of CE

Social Model of Disability
Source: Drum, Kahn, & Bersani, 2009
The purpose is to:

• Help PWDs and families identify local barriers and facilitators to accessing different environments; and

• Encourage local responses to the identified barriers
Types of Barriers Addressed by CE

Access to:

Education, Employment, Housing, Public Places, Recreation, Transportation, and Health Care
Health Status of People With and Without Disabilities

Oregon BRFSS Data, 2011
The Social Model at Work

Local barriers to accessing health care:

• Transportation
• Facility access & services
• Provider attitudes and communication
CEI Methodology

Step 1. Town Hall Meeting
Step 2. Community Infrastructure Meeting
Step 3. Resource Mobilization
Step 4. Follow-up
Purpose: To bring together PWD to discuss accessing health care

• Identify Local Community Partner (recruitment, facilitation, follow-up)

• Identify Community Assets

• Identify Barriers
Step 1: CE Town Hall Meeting

- Prioritize barriers
- Discuss possible solutions
- ID disability reps for next phase
Step 2: Community Infrastructure Meeting

**Purpose:** Bring together Health Care providers, local government and transportation planners to:

• Review assets identified during town hall meetings
Step 3: Resource Mobilization

**Purpose:** Obtain community commitment during the infrastructure meeting to remove identified barriers:

- Facilitated discussion of barriers and potential solutions
Step 4: Follow-Up

**Purpose**: To document change within the community:

- Local liaison designated to record decisions and steps taken to resolve access barriers
- OHSU serves as ongoing resource (technical assistance)
CEI Locations: Oregon

- Bend
- Corvallis
- Pendleton
- Medford
- Newport
- Roseburg
- Coos Bay
- Klamath Falls
Prioritized Barriers

Transportation
- Coordination of transportation and appointments
- Limited city bus service & bus stop location

Facility Access & Services
- Accessibility of hospital parking
- Accessible exam tables
Prioritized Barriers

Provider Attitudes & Communication

• Lack of understanding among health care providers/front desk staff regarding disability issues

• Lack of health promotion materials in alternative formats (Braille, large print, reading level)
Progress to Date

• (Corvallis & Pendleton) Hospital improved parking, more spaces, drop-off point, better signage, shuttle service

• (Newport) added bus routes to increase access to hospital services for outlier communities and travel trainer program
Progress to Date

- (Medford) Increased disability representation on local health/medical coalitions and transportation work groups

- (Coos Bay) Development of patient advocate tip sheets and clinic health information specialist
Progress to Date

- (Roseburg) Disability Sensitivity & Awareness Trainings
  - Area Health Education Center of SW Oregon
  - Umpqua Valley DisAbilities Network,
  - Umpqua Community College Nursing Program
  - Brain Injury Association
  - Commission for the Blind
Nursing Students in Training
Thank You!

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