



SBHC Coordinators Meeting

February 6, 2020



Adolescent and School Health

Staffing and Budget Updates

A&SH Staffing & Budget Updates

Welcome Liz Stuart – Policy and Assessment Specialist



Currently interviewing for School Mental Health Specialist Position

A&SH Staffing & Budget Updates

Welcome Francis.

Tara Miller, SBHC Systems Development Specialist, welcomed Francis on October 19, 2019.



Next up – Let's dive into data



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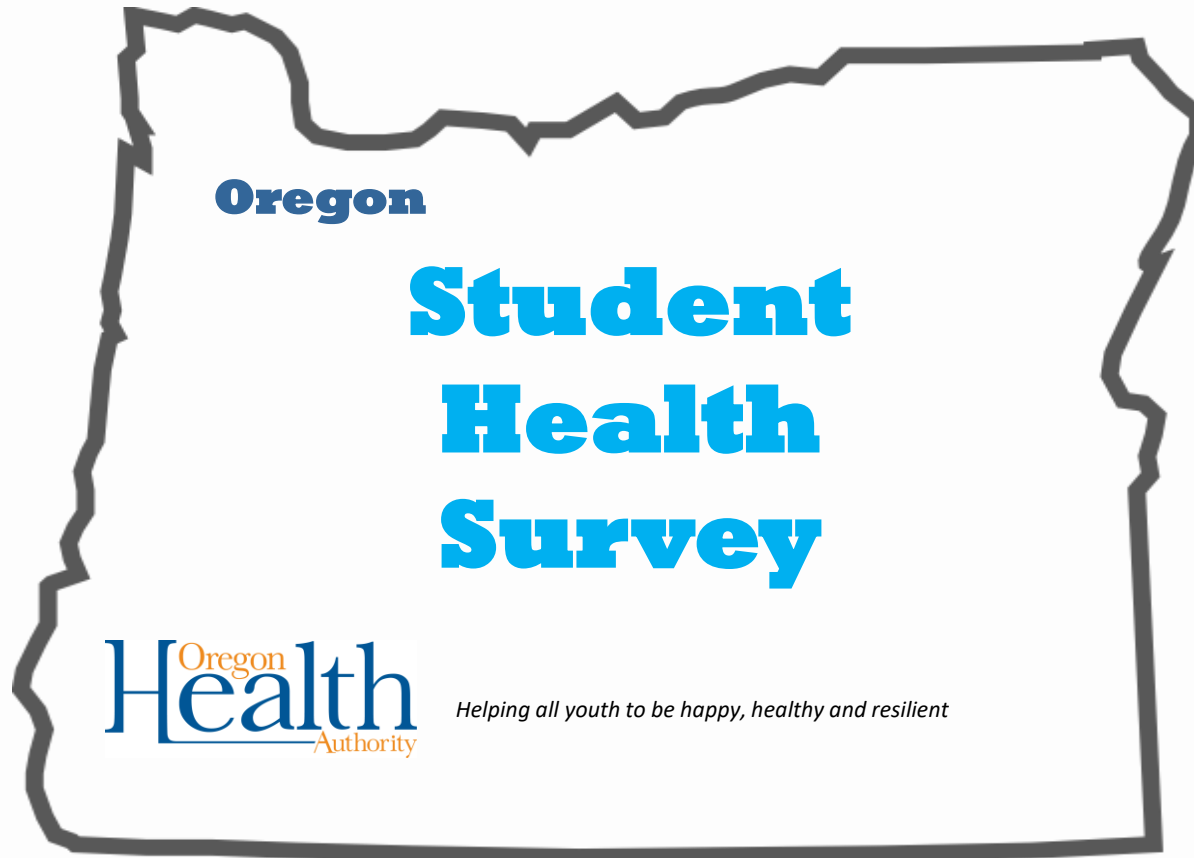
Adolescent Health Indicators

2019 OREGON HEALTHY TEENS SURVEY

2019 Oregon Healthy Teens Survey

- 28,070 students participated
 - 15,244 8th graders
 - 12,826 11th graders
 - 77 districts and 227 schools
- Representative weighted data at state and county levels
- Historically, conducted in Spring of odd years
- 2019 was the last year of OHT

Coming in Fall 2020...



We Made Improvements!

- 1** Added Q's on youth assets, suicide, & social media; refined ACEs q's
- 2** Made survey shorter: cut drug/alcohol q's
- 3** Creating data tools for districts to have timely and easy access to data
- 4** Refining survey scripts, providing resource sheets for youth
- 5** Fall survey administration

We Made Improvements!

6 Contractor, Bach-Harrison, LLC

- Survey administration procedures
 - ✓ Online submission of district and school approvals
 - ✓ Improved process
 - ✓ Better instructions for teacher proctors
 - ✓ Improved data reporting tools

2019 OHT RESULTS

Who Participated?

Baker County

Baker SD 5J
Pine Eagle SD 6I

Benton County

Corvallis SD 509J

Clackamas County

Gladstone SD 115
Molalla River SD 35
North Clackamas SD 12
Oregon City SD 62
West Linn-Wilsonville SD 3J

Clatsop County

Astoria SD 1
Knappa SD 4
Seaside SD 10

Columbia County

Clatskanie SD 6J
Scappoose SD 1J
St Helens SD 502

Coos County

Coos Bay SD 9

Jackson County

Ashland SD 5
Central Point SD 6
Medford SD 549C
Phoenix-Talent SD 4

Jefferson County

Jefferson County SD 509J

Josephine County

Three Rivers SD

Klamath County

Klamath Falls City Schools

Lake County

Lake County SD 7

Lane County

Bethel SD 52
Creswell SD 40
Eugene SD 4J
Junction City SD 69
Pleasant Hill SD 1
Siuslaw SD 97J
South Lane SD 45J3
Springfield SD 19

Sherman County

Sherman County SD

Tillamook County

Tillamook SD 9

Umatilla County

Athena-Weston SD 29RJ
Hermiston SD 8
Milton-Freewater Unified S
Pendleton SD 16
Umatilla SD 6R

Union County

La Grande SD 1

Wallowa County

Did not participate

Wasco County

North Wasco County SD 21

Washington County

Forest Grove SD 15
Hillsboro SD 1J
Sherwood SD 88J
Tigard-Tualatin SD 23J

Crook County

Crook County SD

Curry County

Brookings-Harbor SD 17C
Central Curry SD 1

Deschutes County

Bend-LaPine Administrative SD 1
Redmond SD 2J
Sisters SD 6

Douglas County

Oakland SD 1
South Umpqua SD 19
Winston-Dillard SD 116

Gilliam County

Did not participate

Grant County

John Day SD 3
Prairie City SD 4

Harney County

Harney County SD 3

Hood River County

Hood River County SD

Lincoln County

Lincoln County SD

Linn County

Greater Albany Public SD 8J
Lebanon Community SD 9

Malheur County

Nyssa SD 26

Marion County

North Marion SD 15
Silver Falls SD 4J
Woodburn SD 103

Morrow County

Ione SD R2
Morrow SD 1

Multnomah County

Centennial SD 28J
David Douglas SD 40
Gresham-Barlow SD 10J
Portland SD 1J
Reynolds SD 7

Polk County

Central SD 13J

Wheeler County

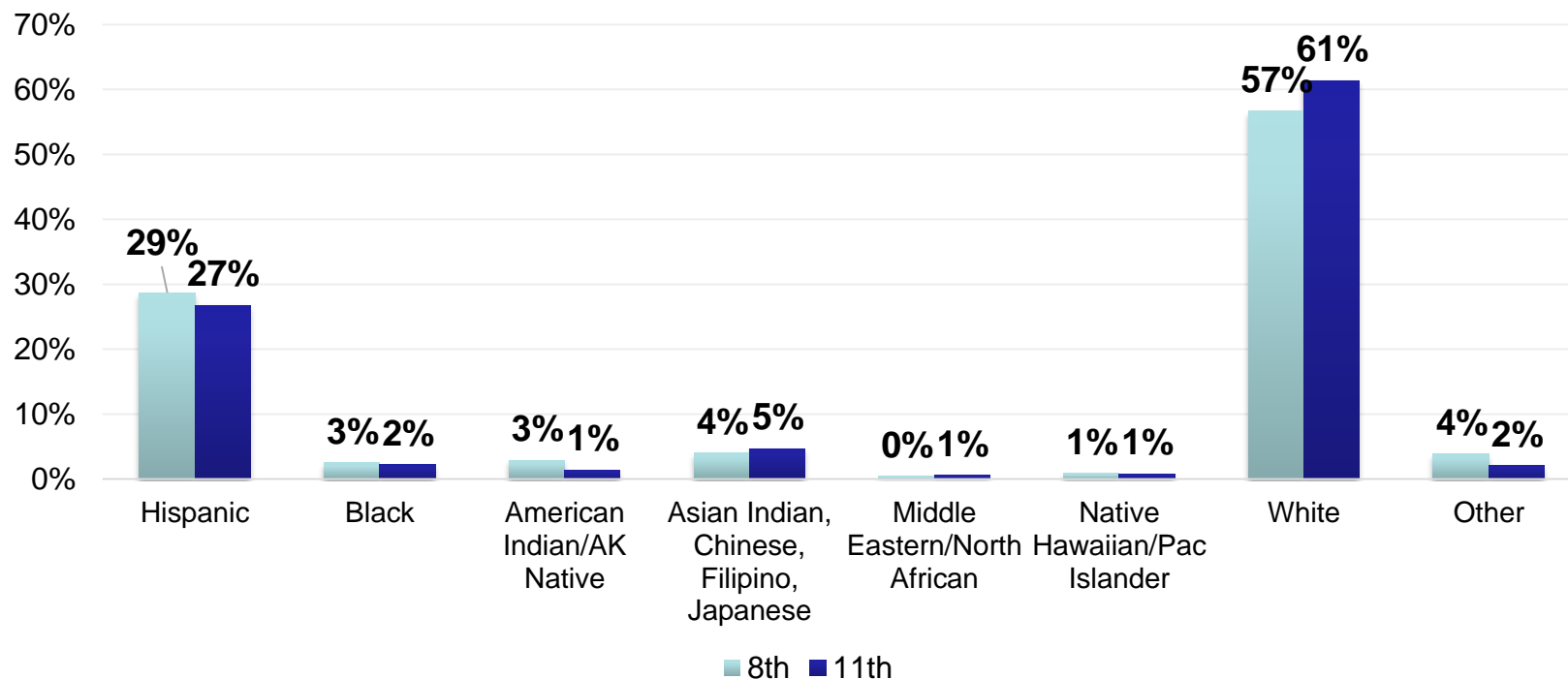
Spray SD 1

Yamhill County

Newberg SD 29J
Sheridan SD 48J
Willamina SD 30J
Yamhill Carlton SD 1

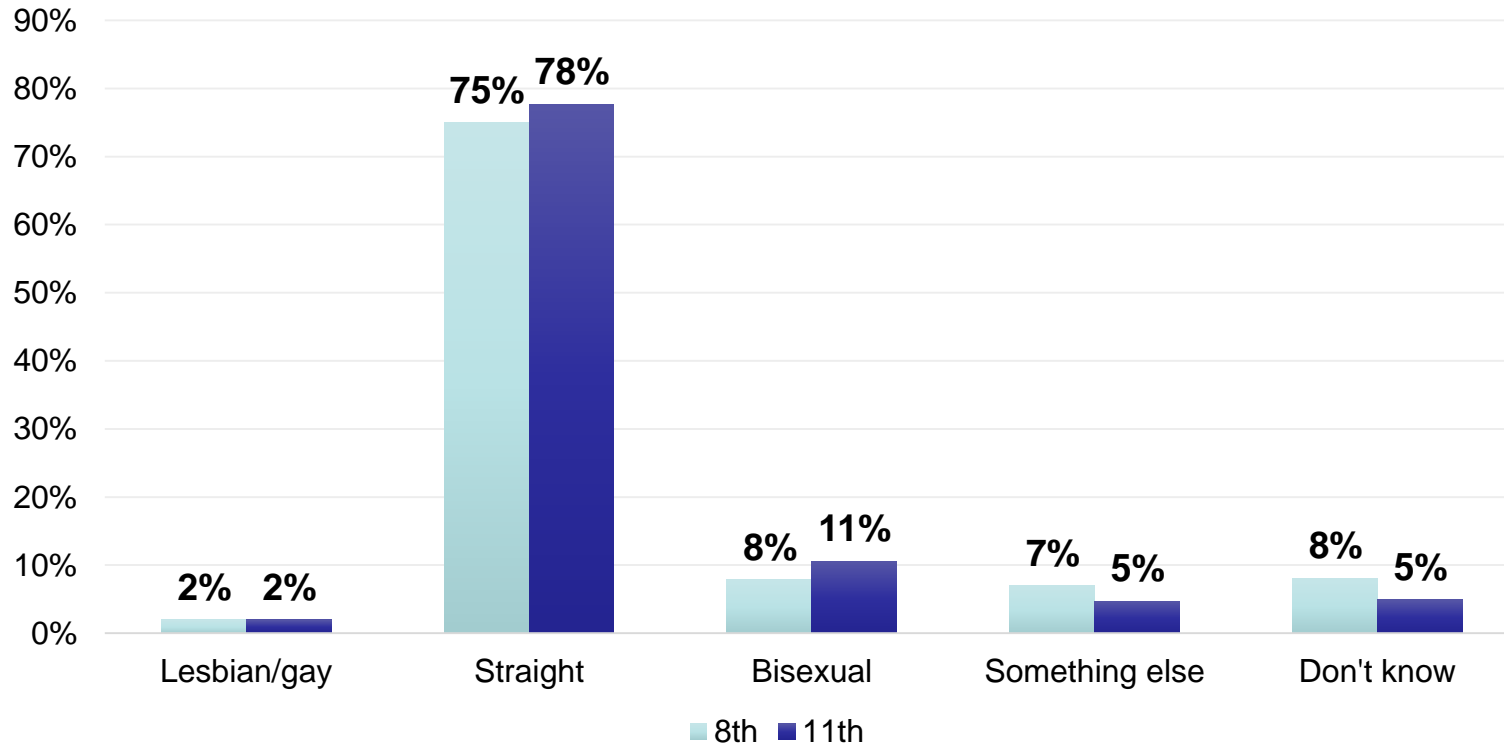
Student Demographics

Race/Ethnicity of OHT Participants



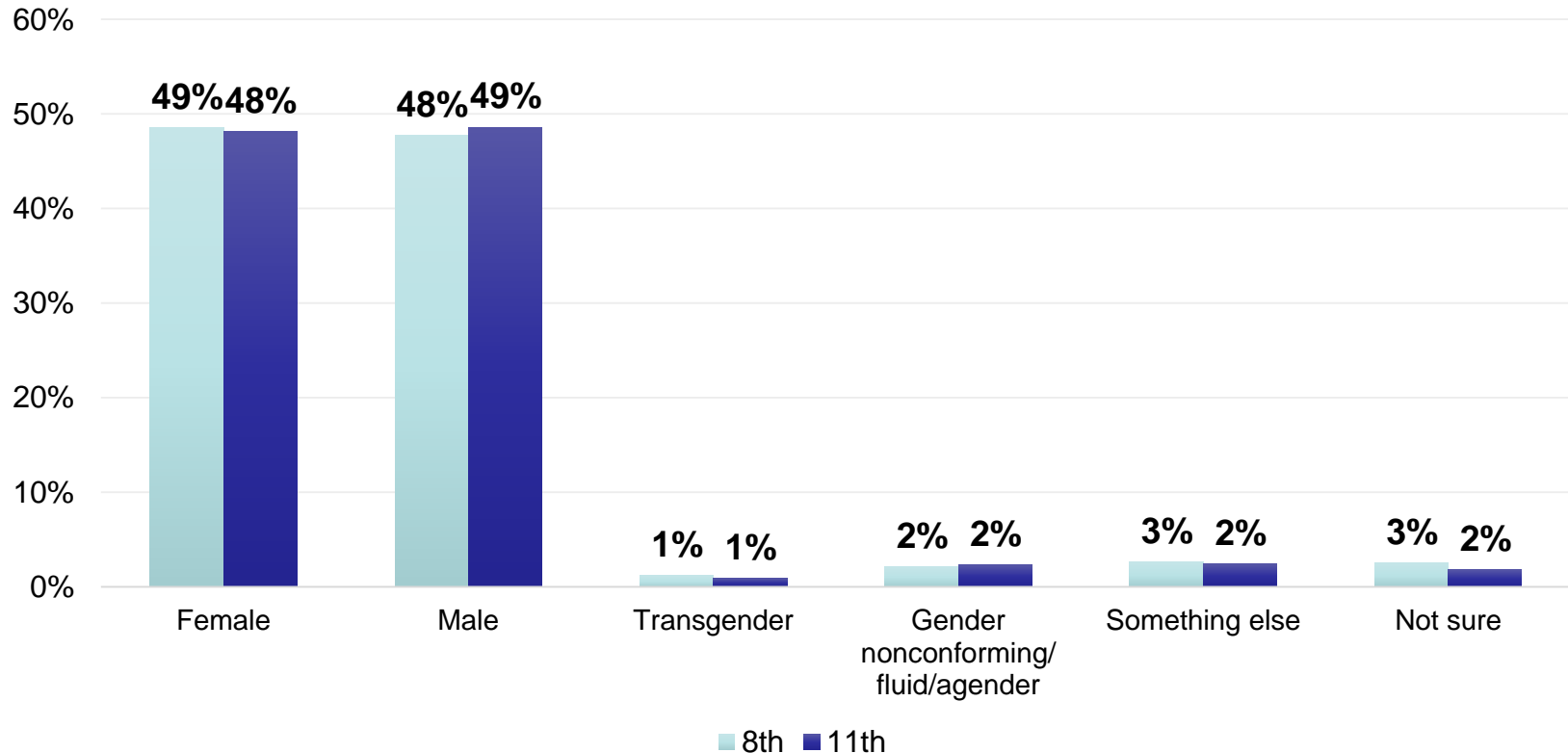
Student Demographics

Sexual Orientation



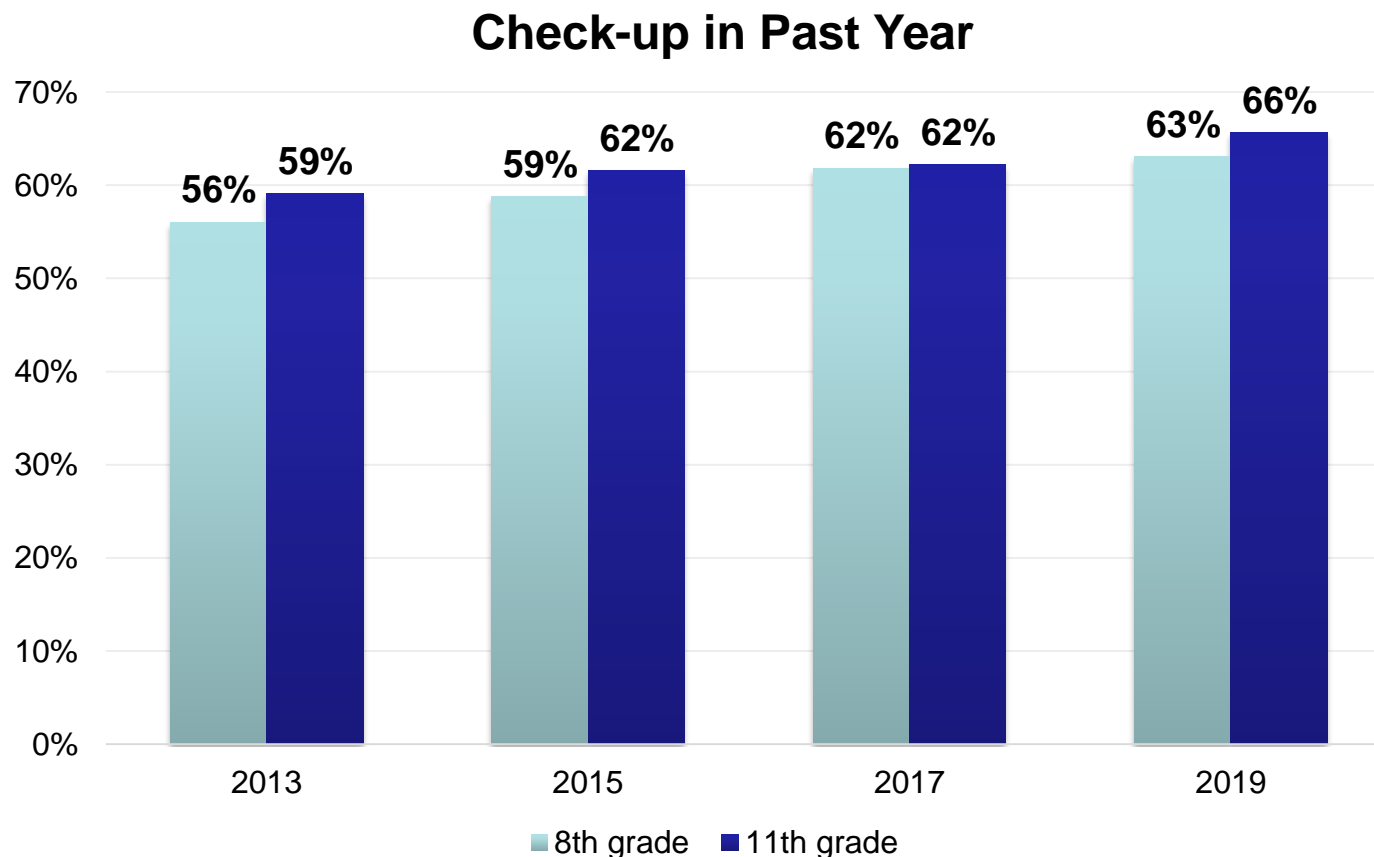
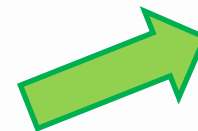
Student Demographics

Gender Identity

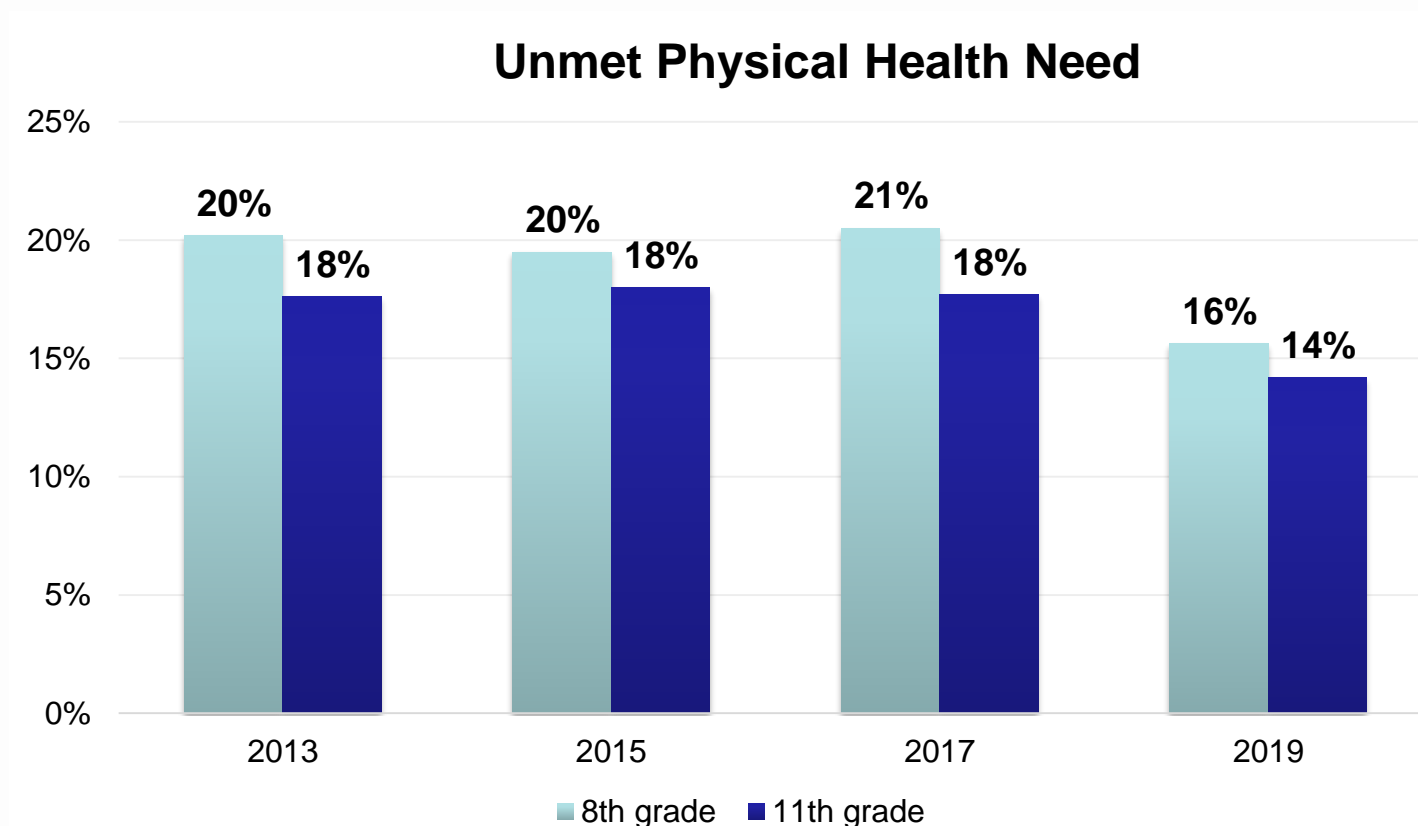


ACCESS TO CARE

Check-up/well visit in past year



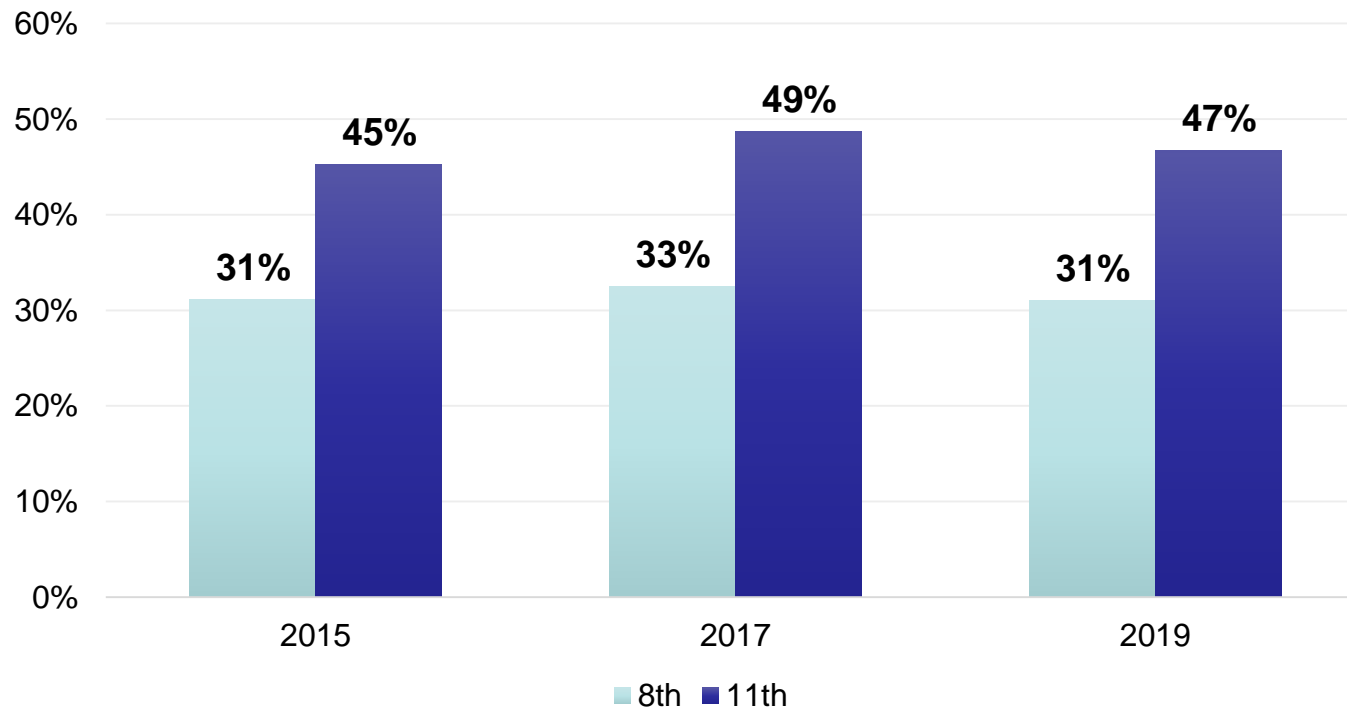
Unmet Physical Health Need



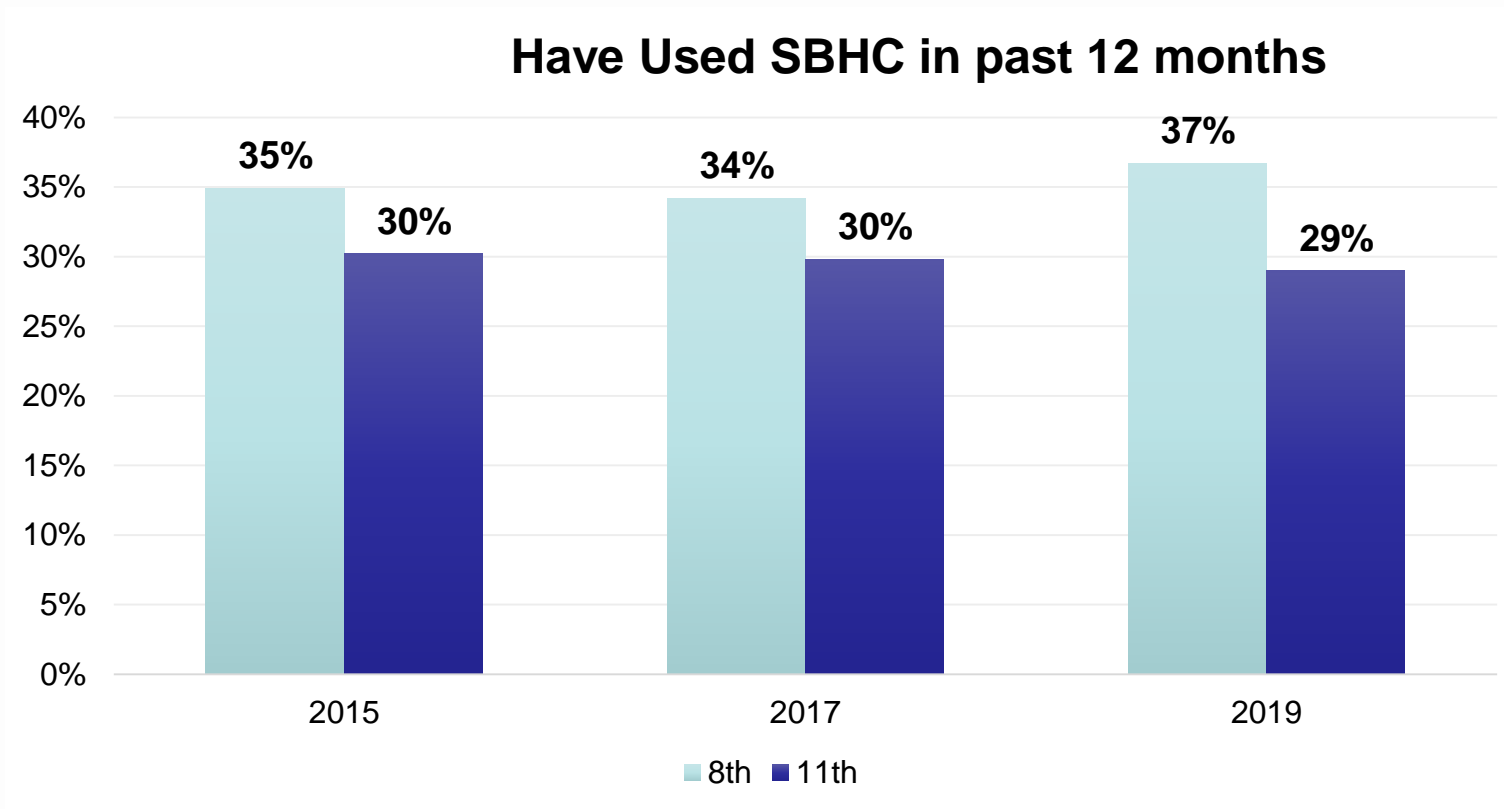
Access to SBHC at School



School has an SBHC

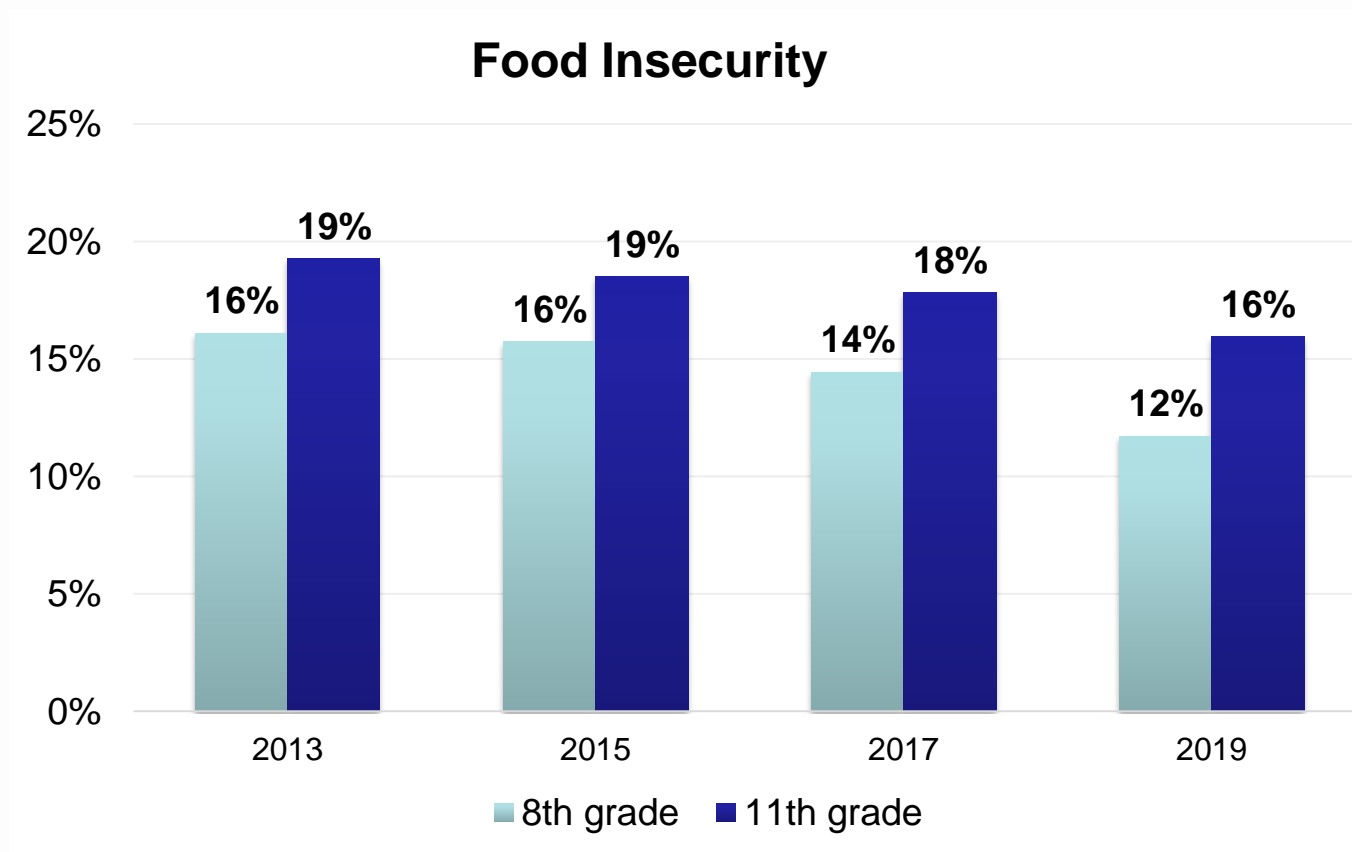


Have Used SBHC at School

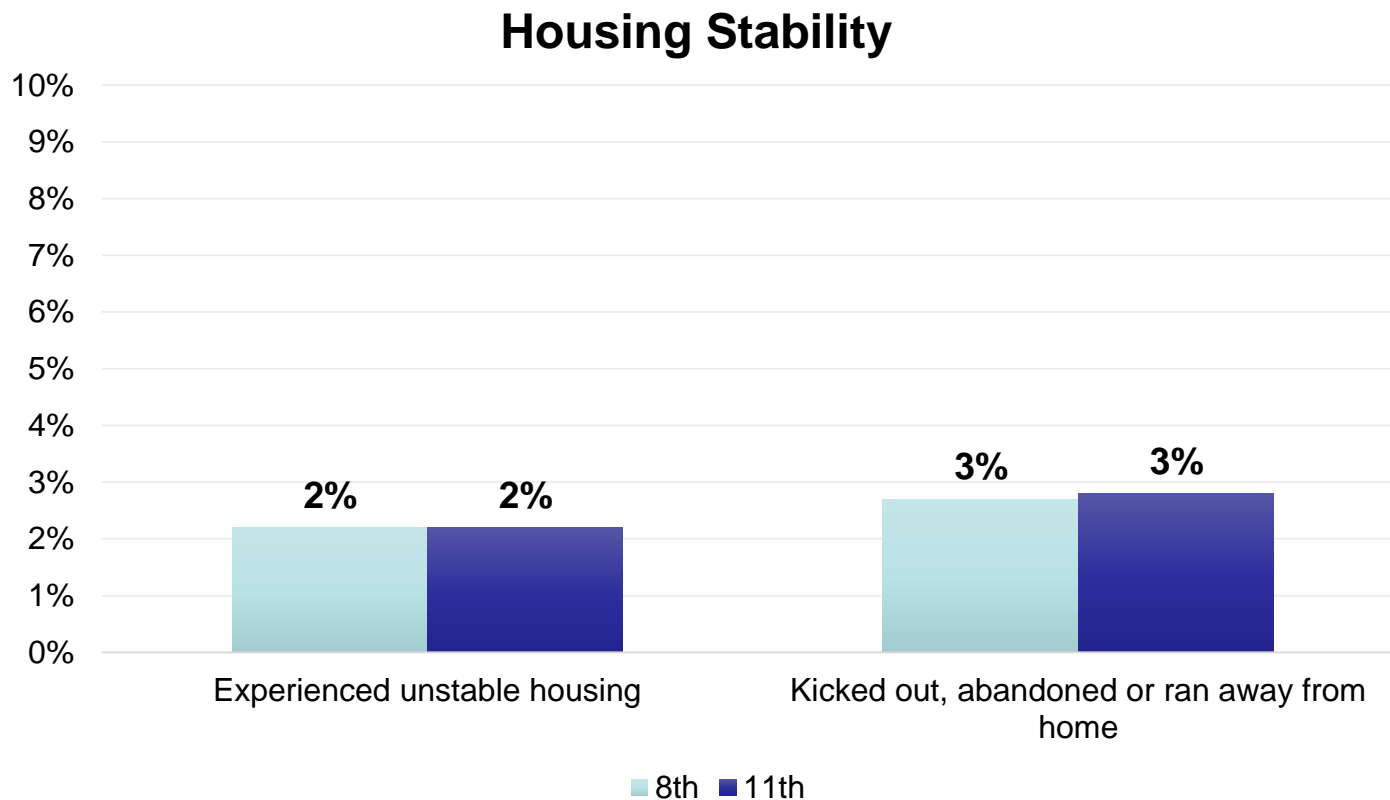


SOCIAL DETERMINANTS OF HEALTH

Food Insecurity (12 mo.)

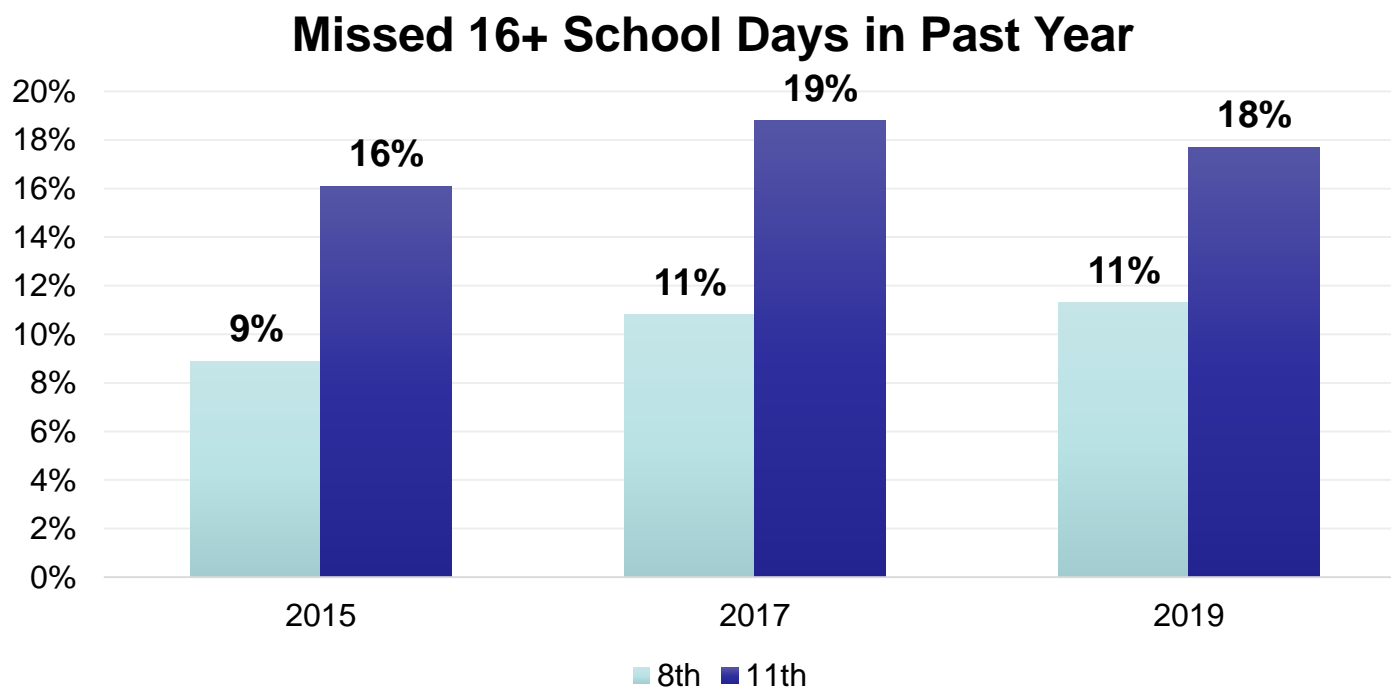


Housing Instability

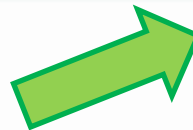


SCHOOL CLIMATE & VIOLENCE

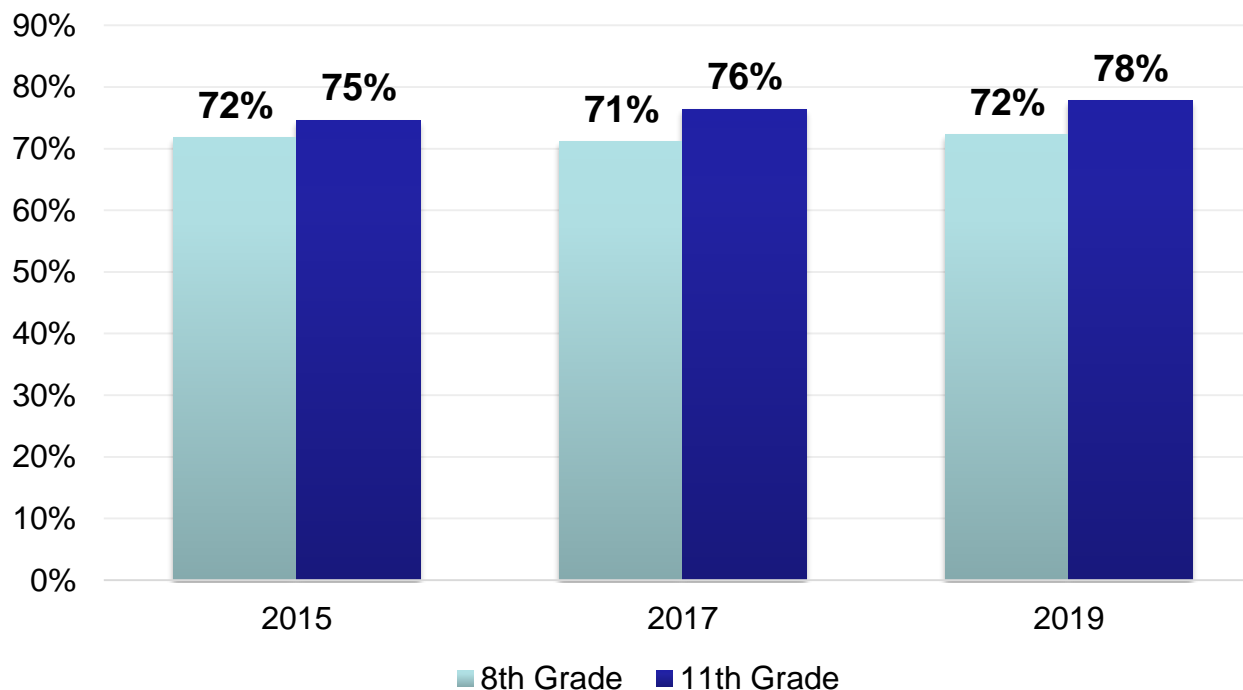
Chronic Absenteeism



Caring Adult at School



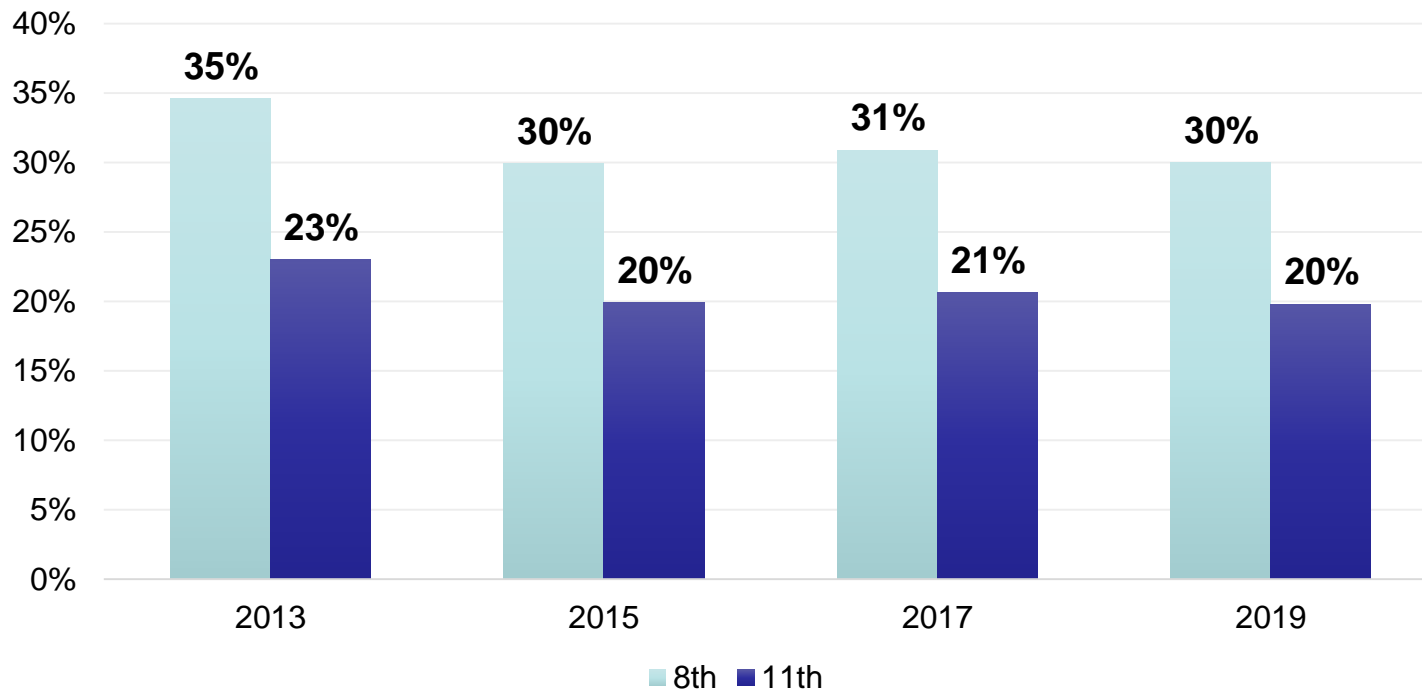
I Have a Teacher or Other Adult at School Who Cares About Me



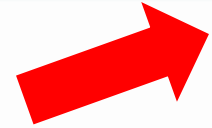
Bullied at School



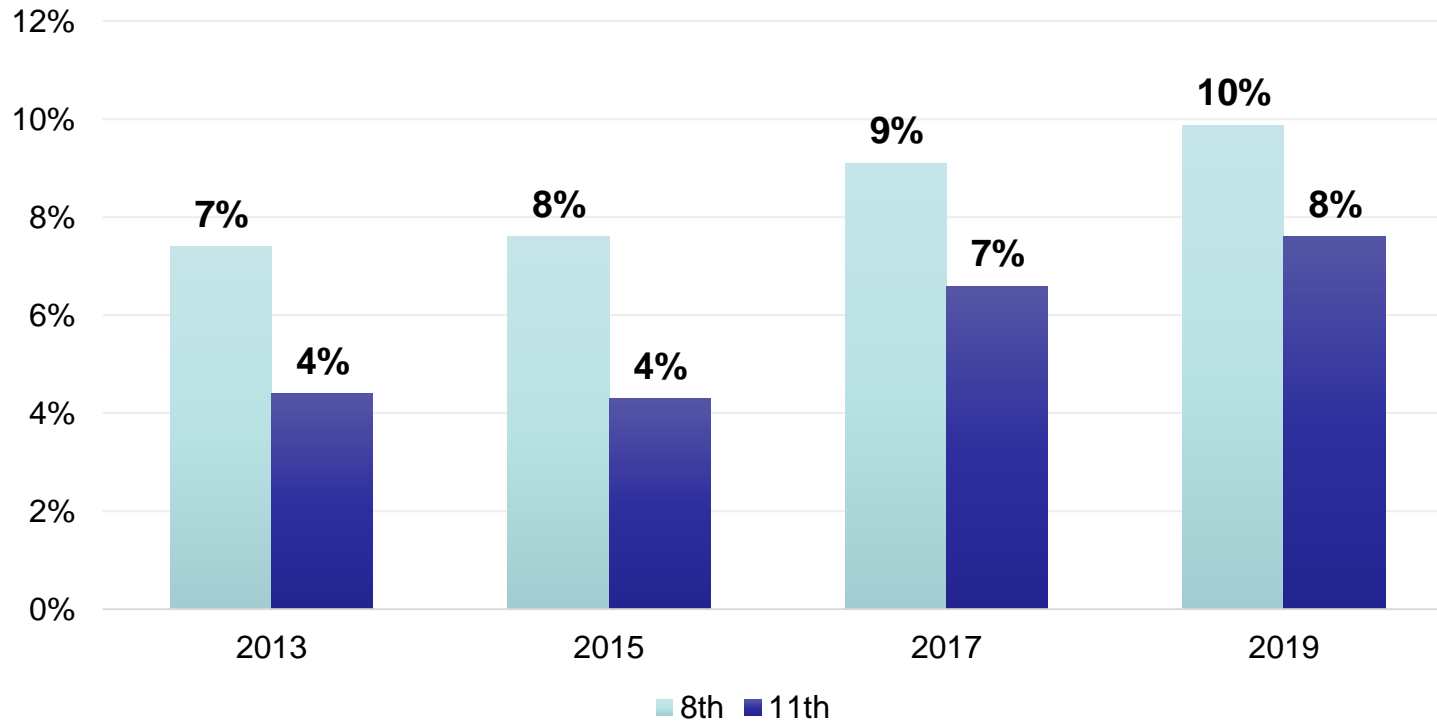
Bullied at School in Past 30 Days



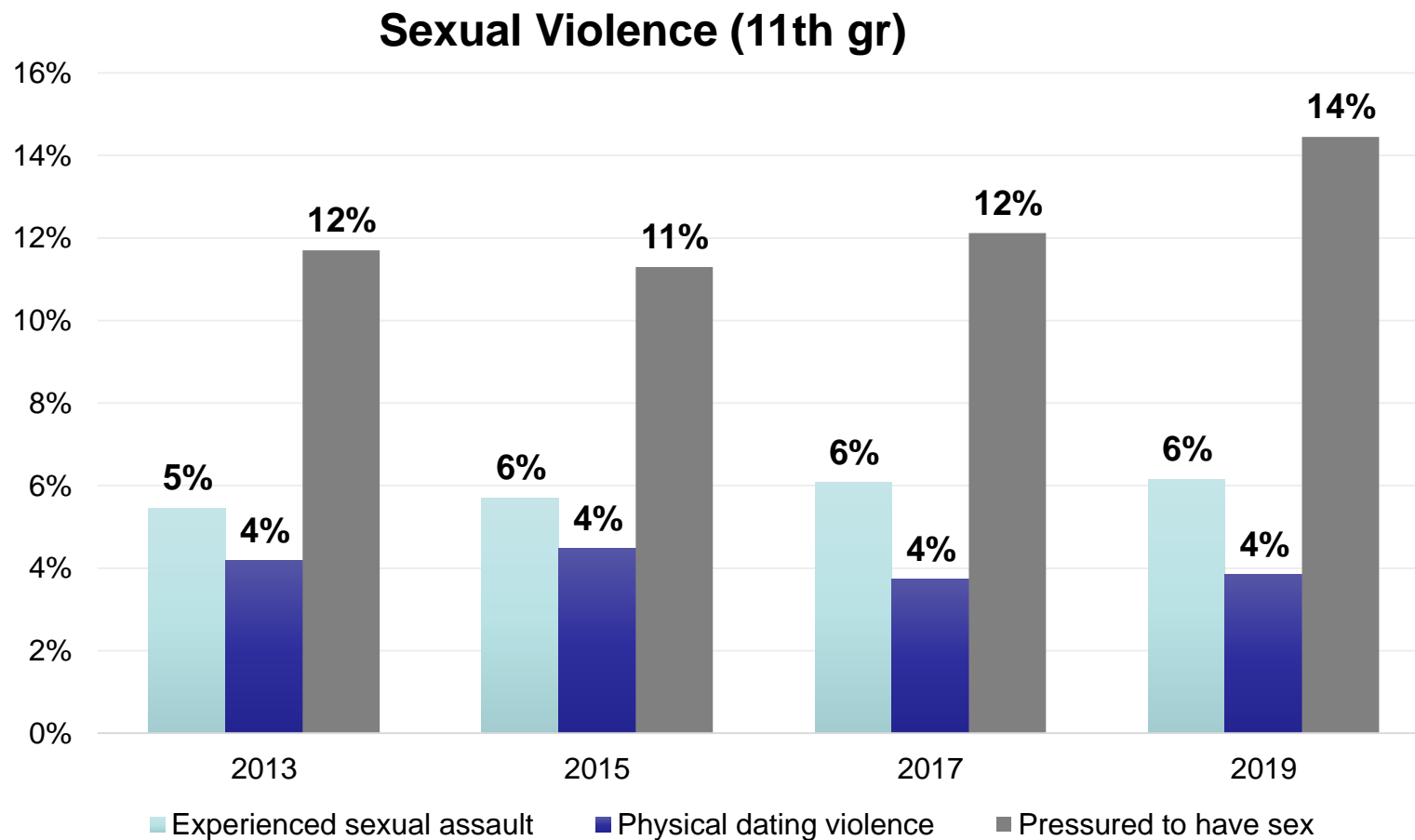
Missed School for Safety Reasons



Missed School Due to Safety

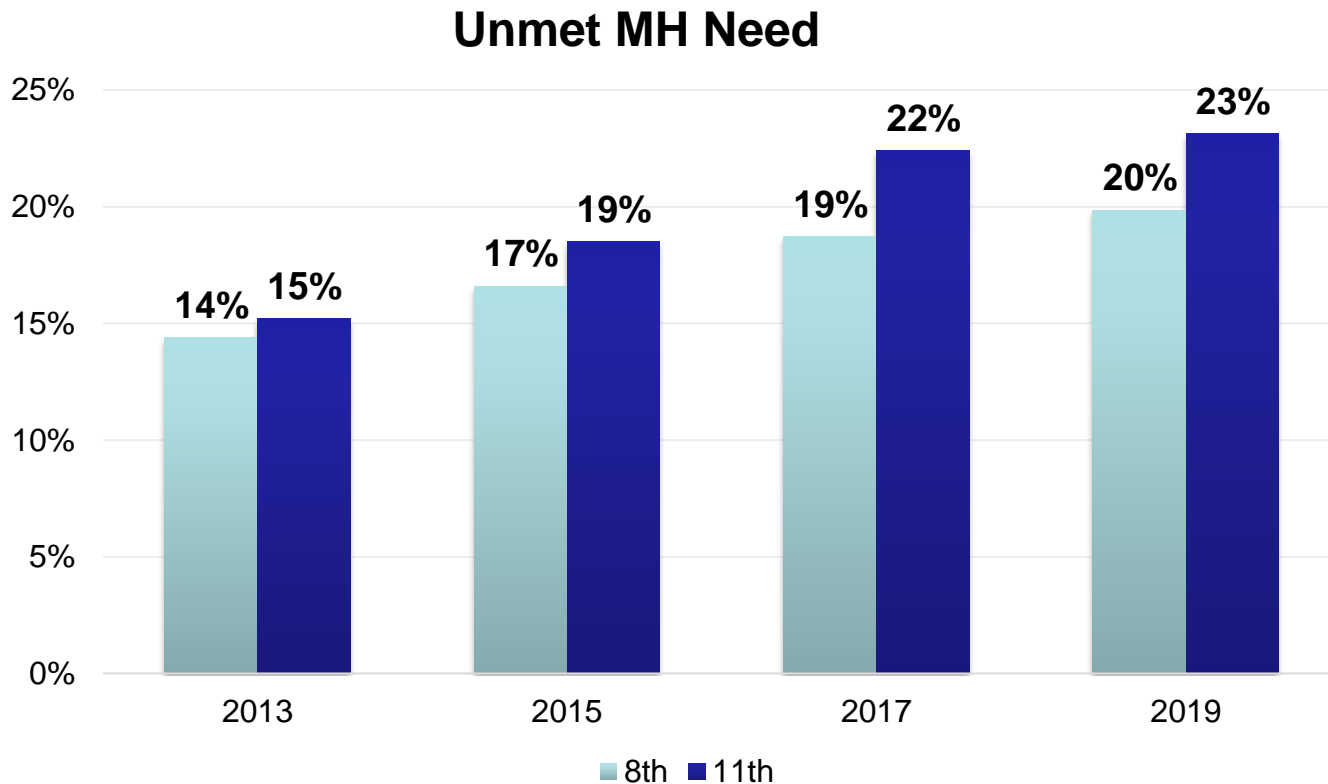


Sexual Violence

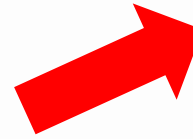


RESILIENCE & EMOTIONAL HEALTH

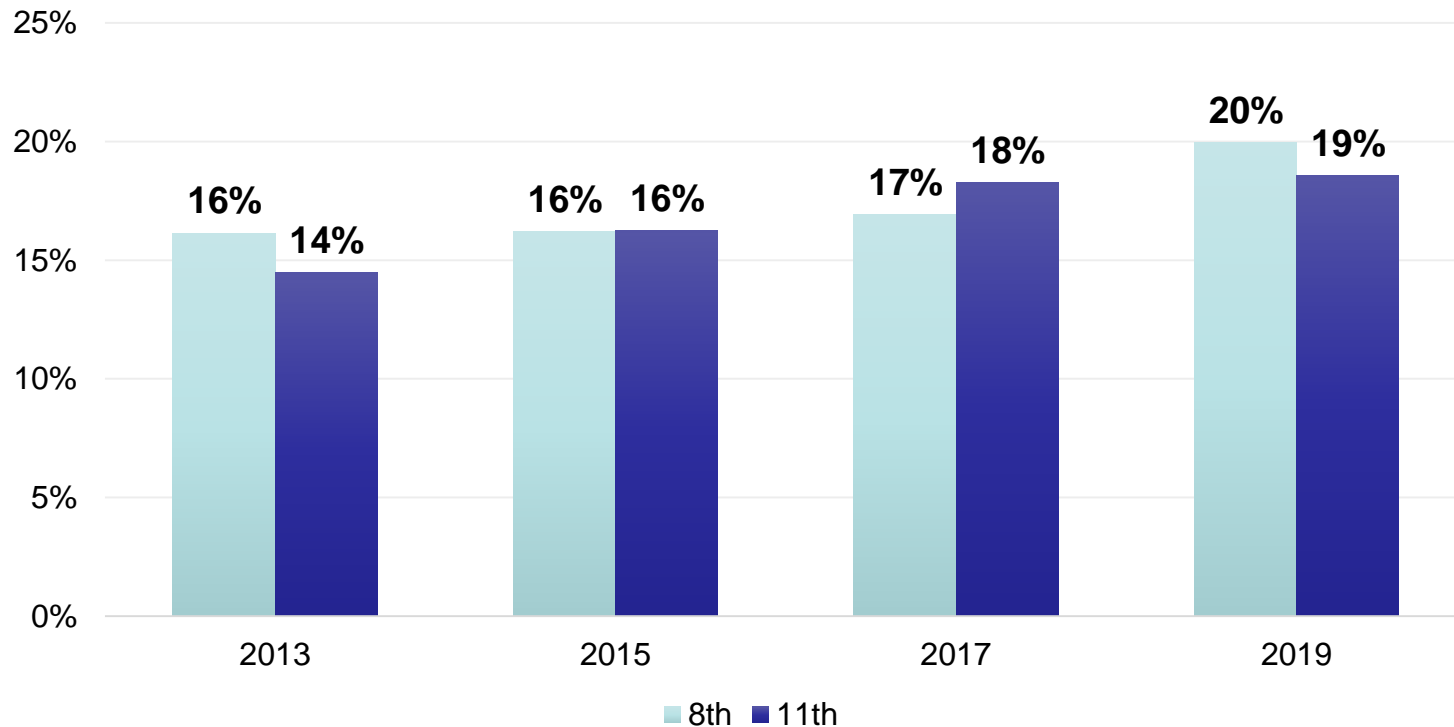
Unmet Mental Health Need



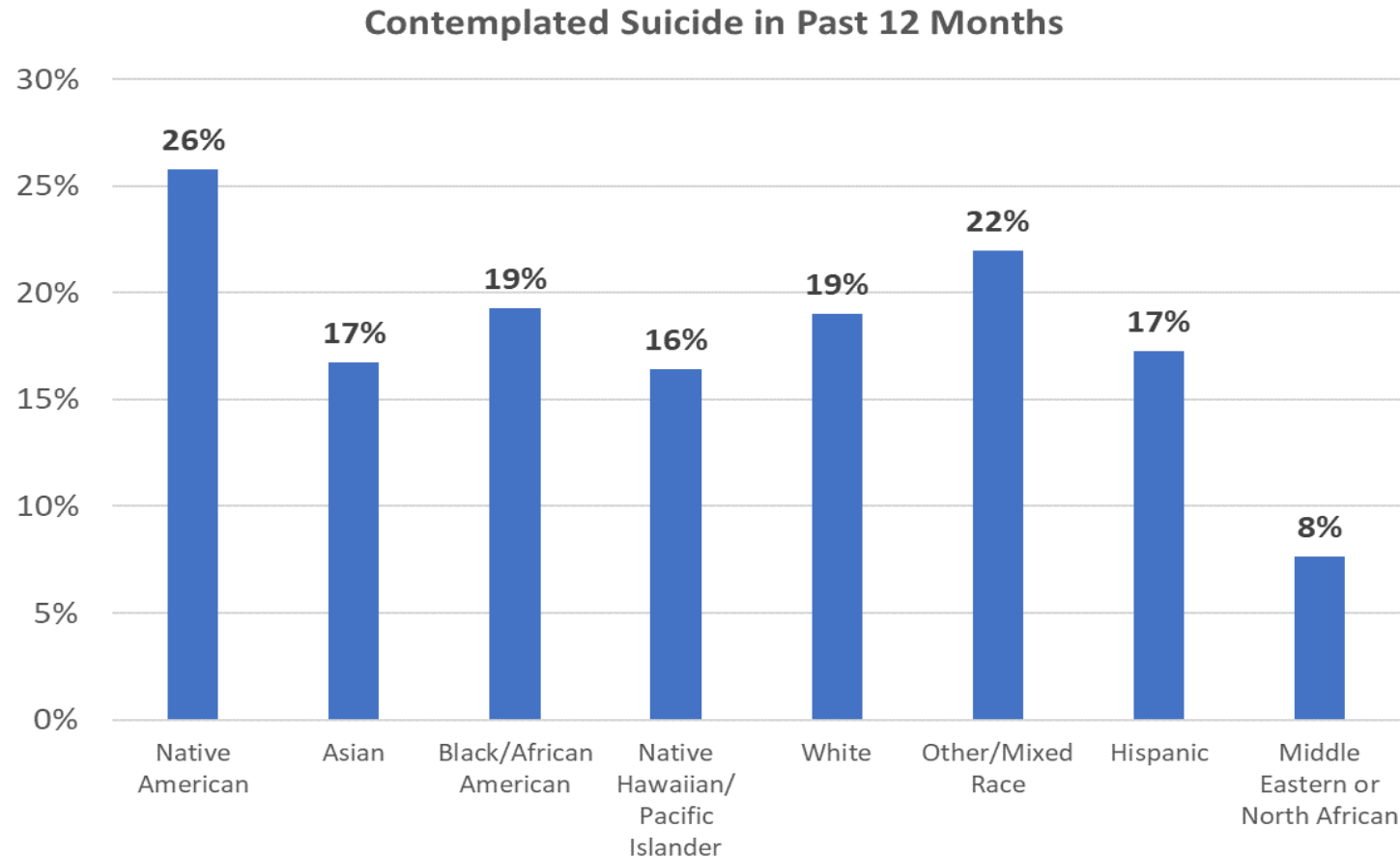
Adolescent Suicide



Contemplated Suicide Past 12 Mos.

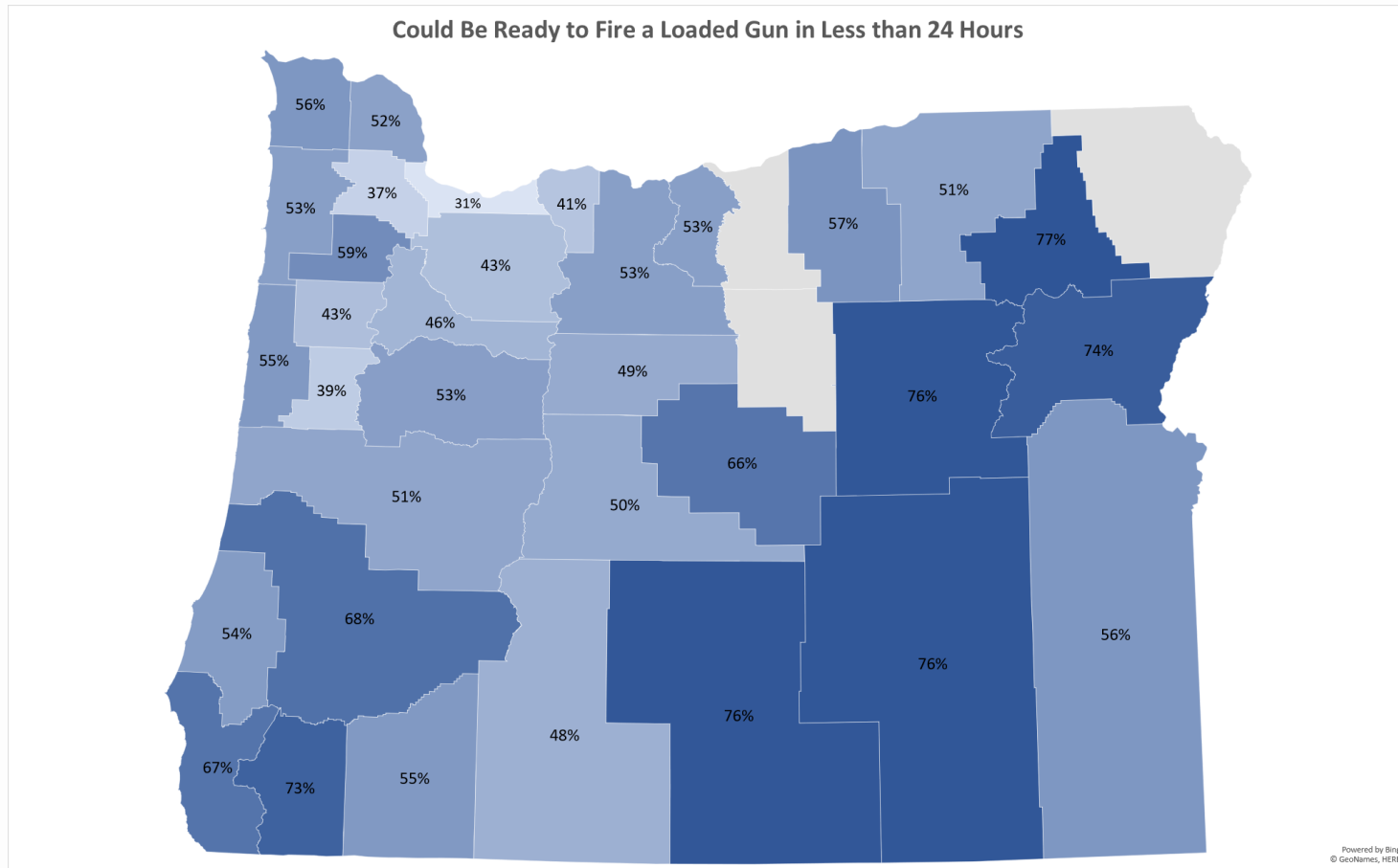


Adolescent Suicide



Source: 2019 Oregon Healthy Teens Survey (11th grade)

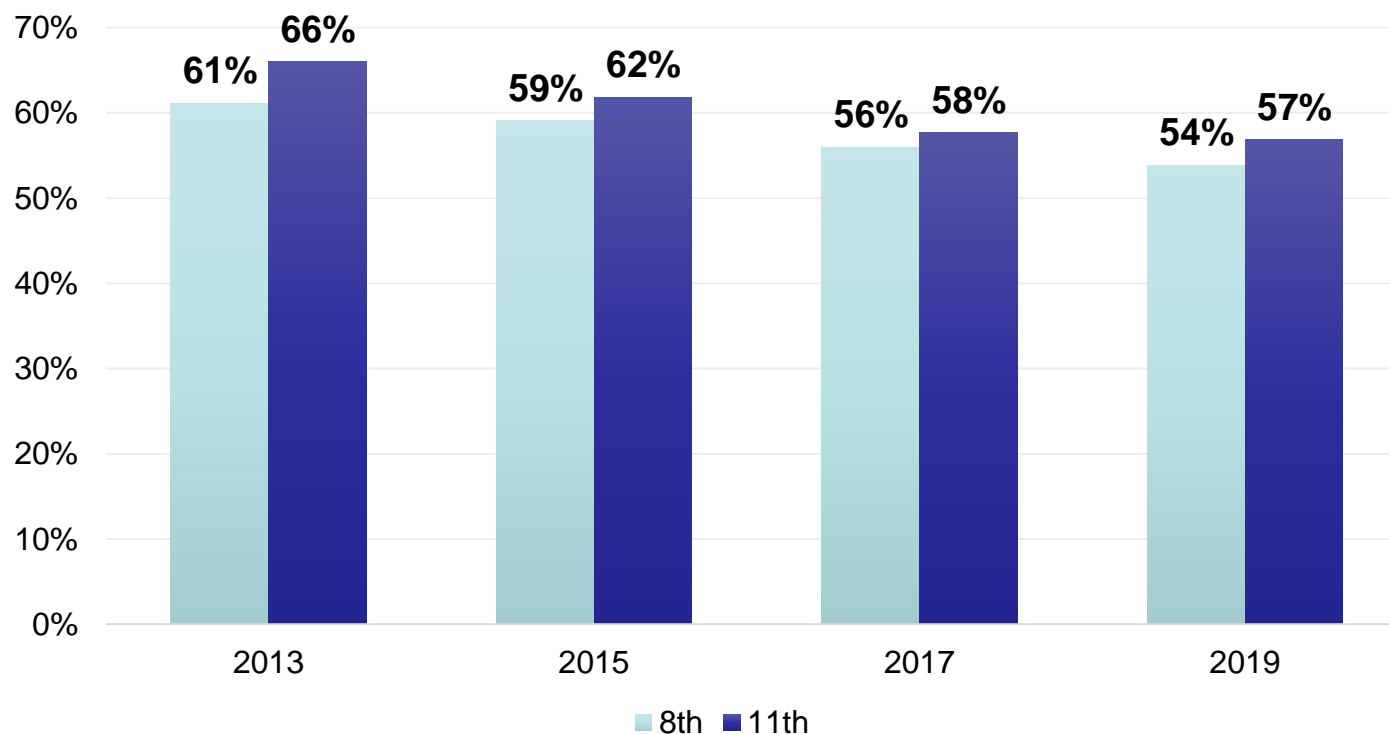
Access to a Loaded Weapon (11th)



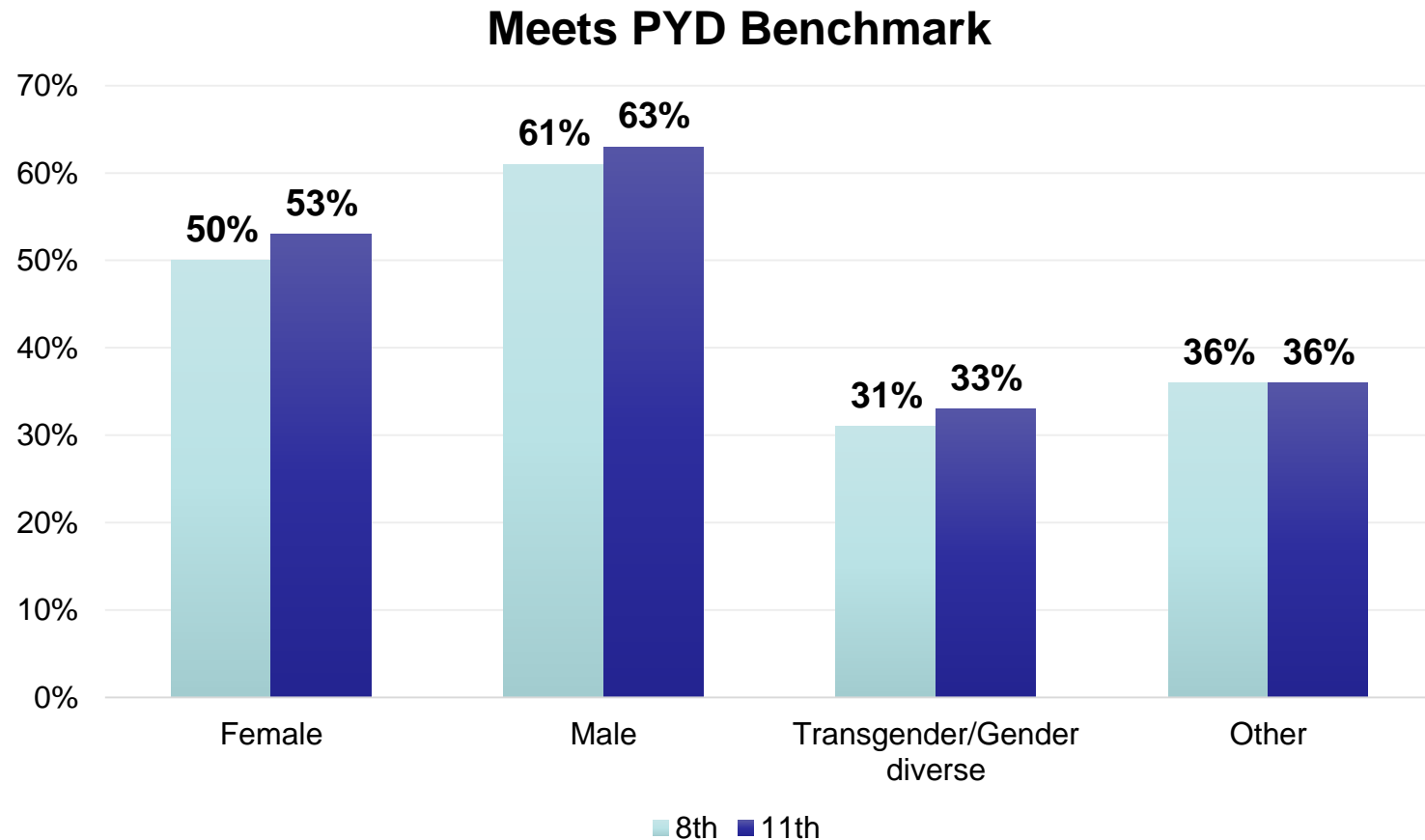
Positive Youth Development



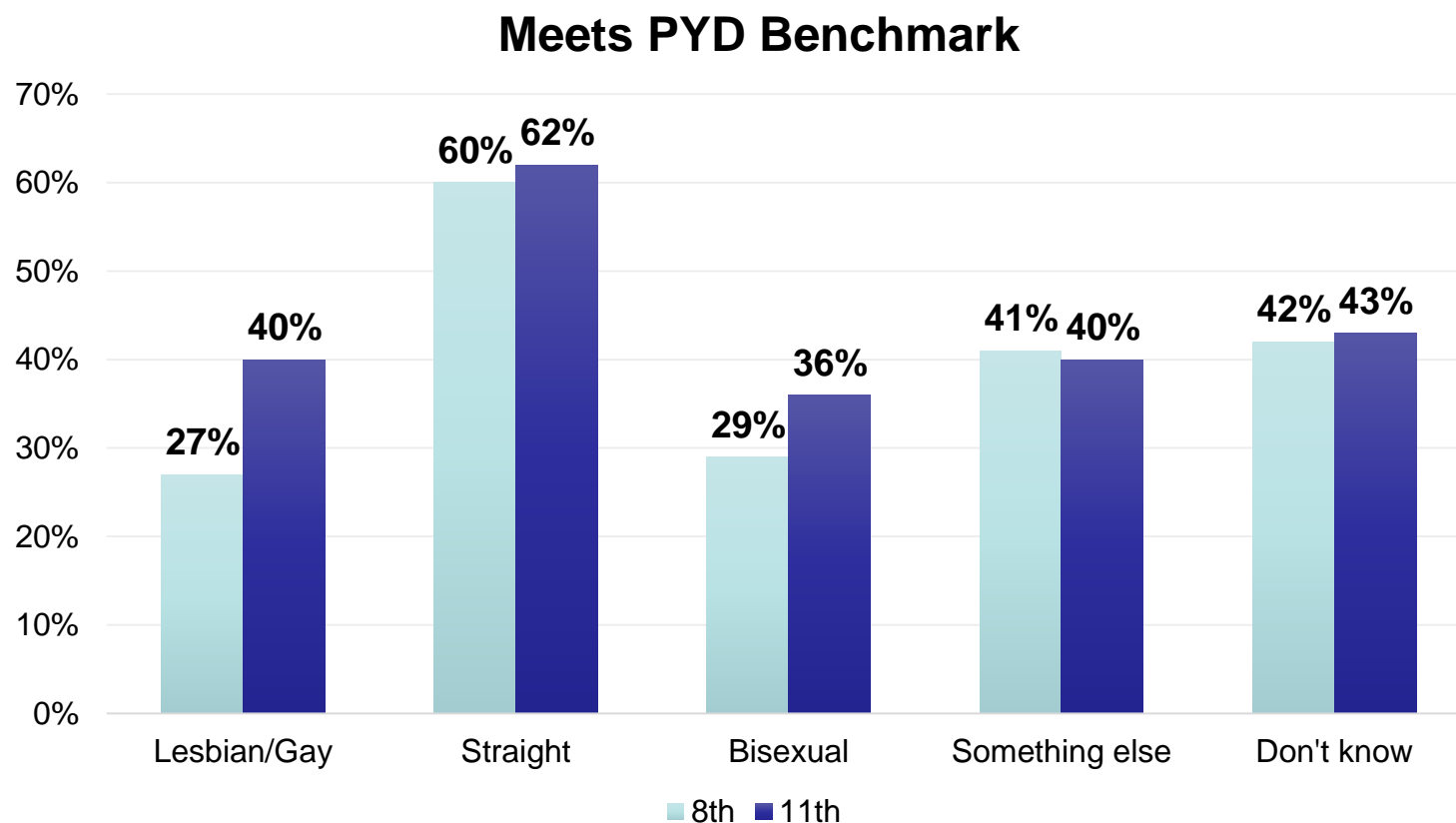
Meets PYD Benchmark



Adolescent Resilience

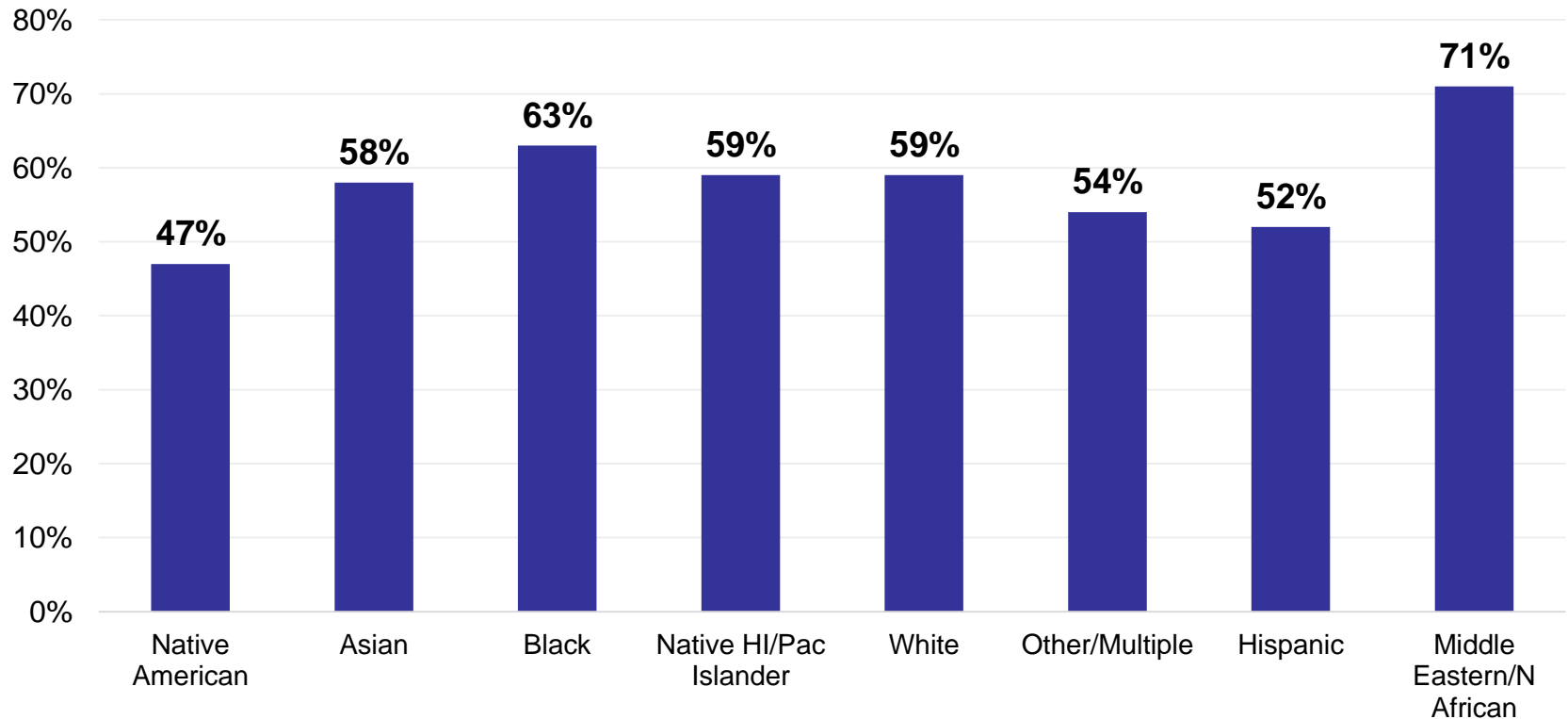


Adolescent Resilience



Adolescent Resilience

Meets PYD Benchmark (11th gr)

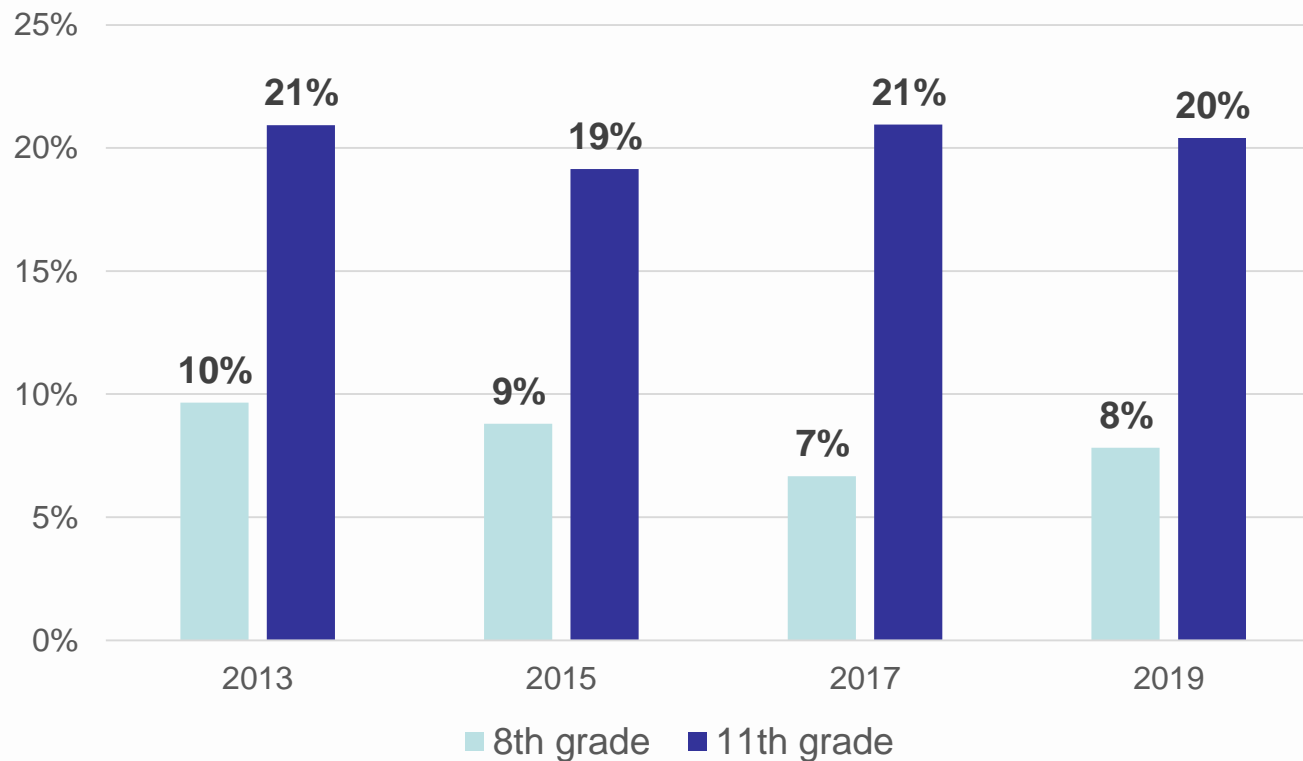


SUBSTANCE USE

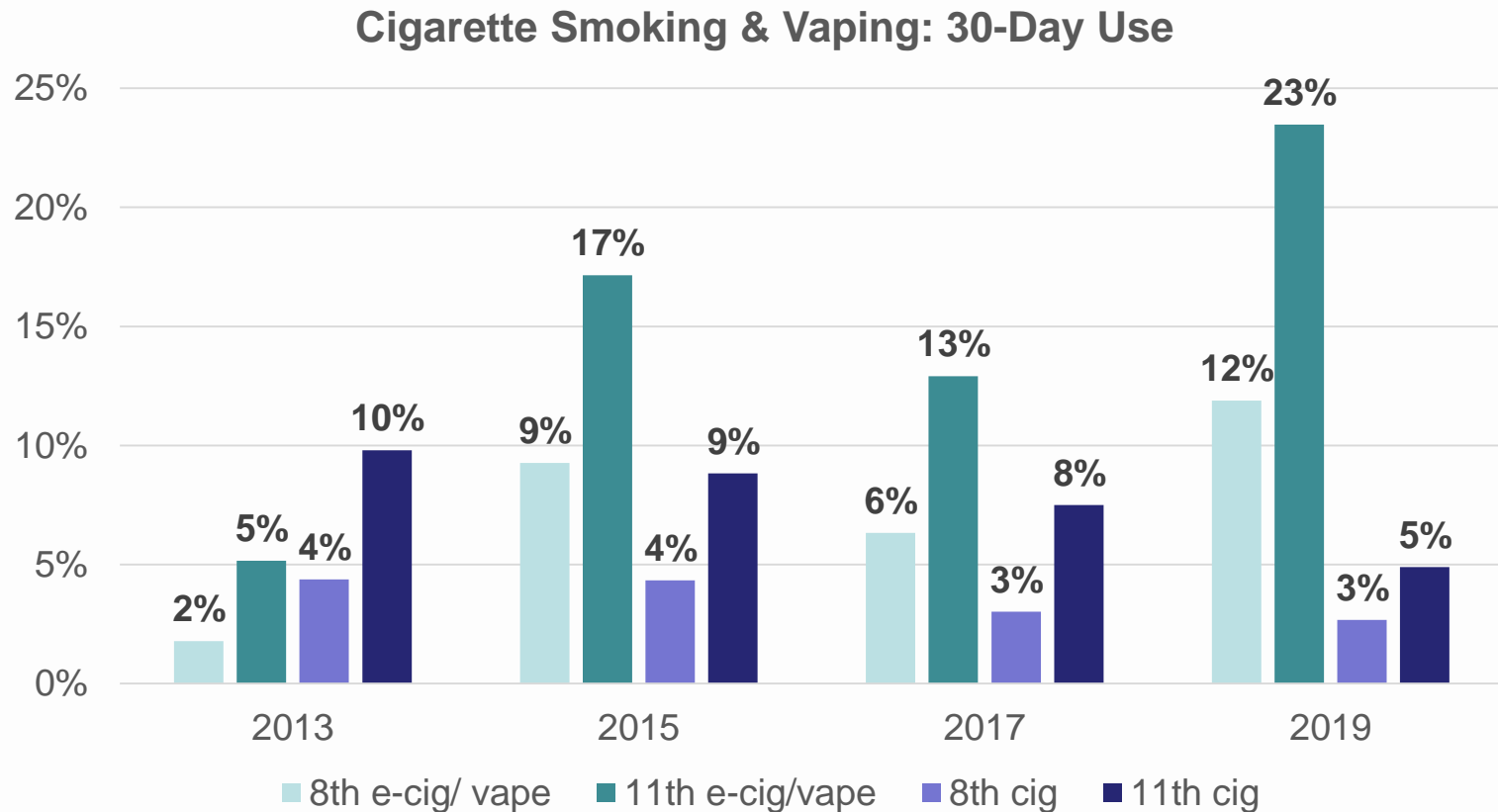
Marijuana Use



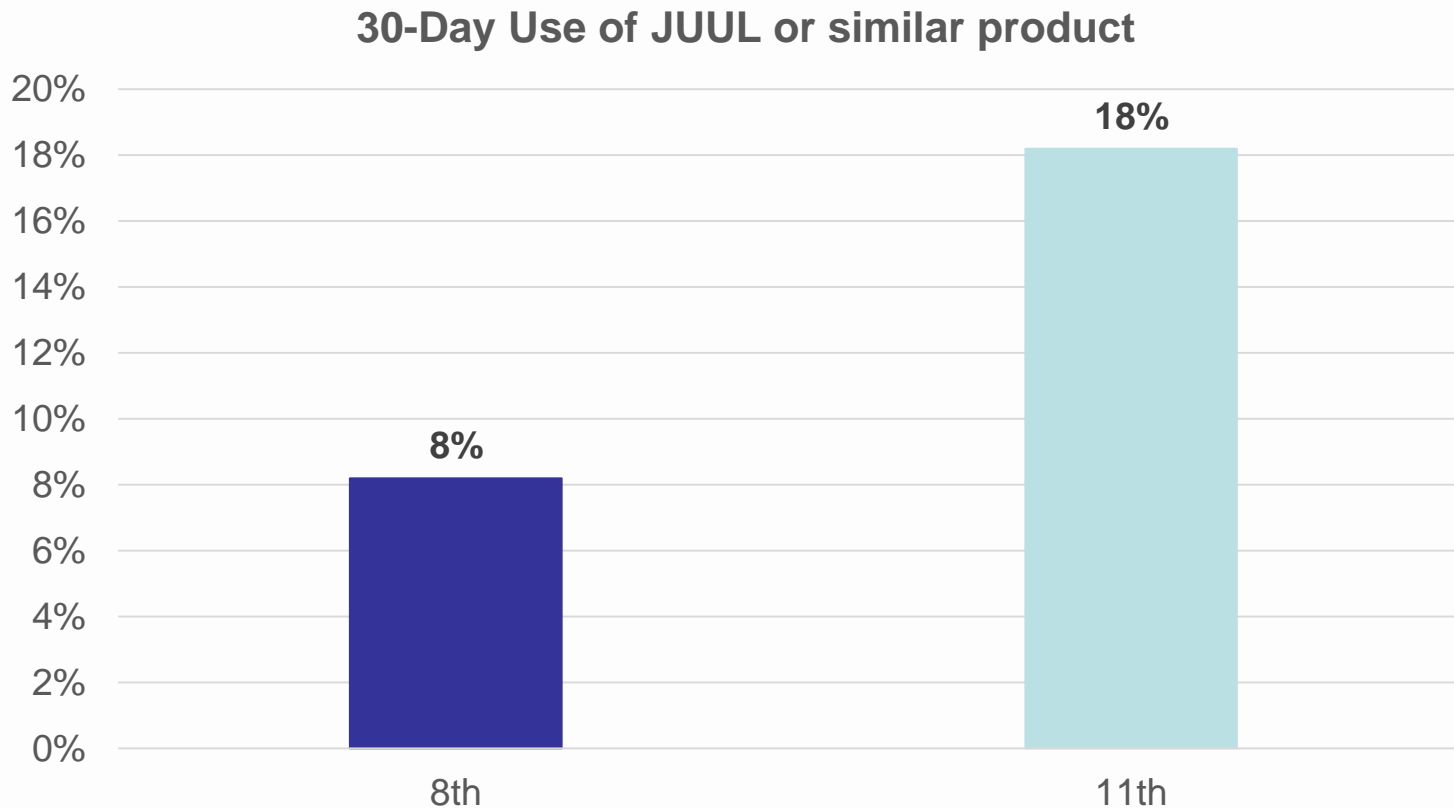
30-Day Marijuana Use



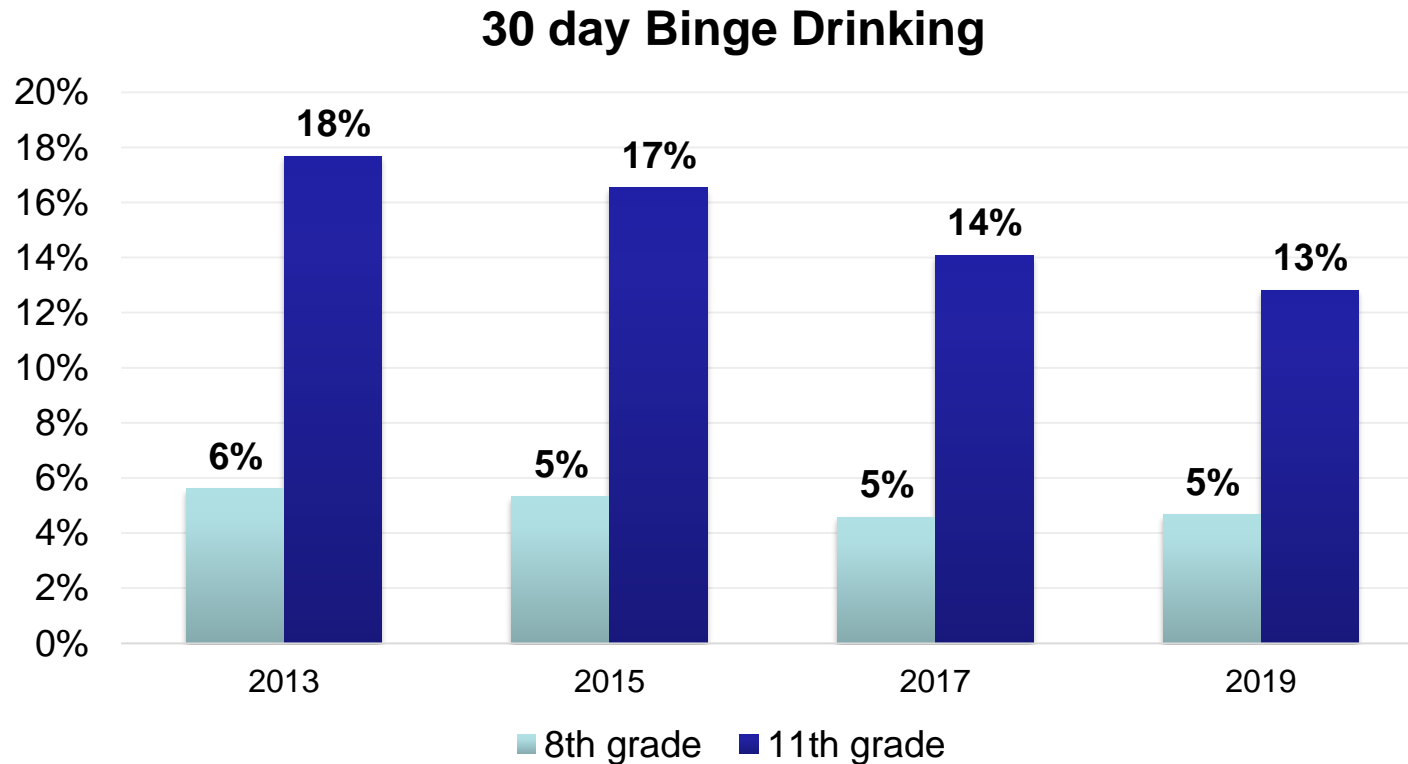
30 Day Smoking/Vaping



30-day JUUL-ing (new data point)



30-day Binge Drinking

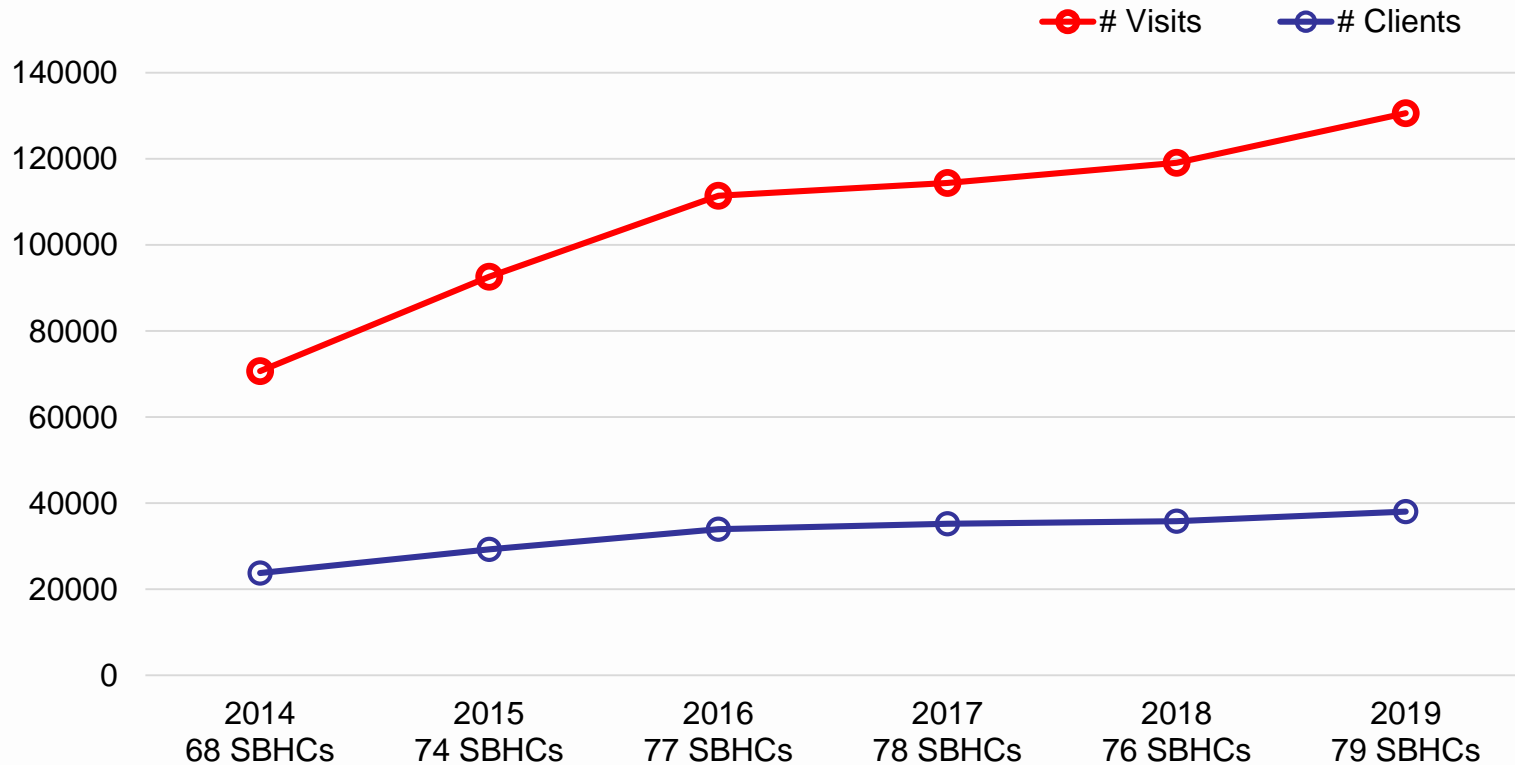


What's Next/More Information

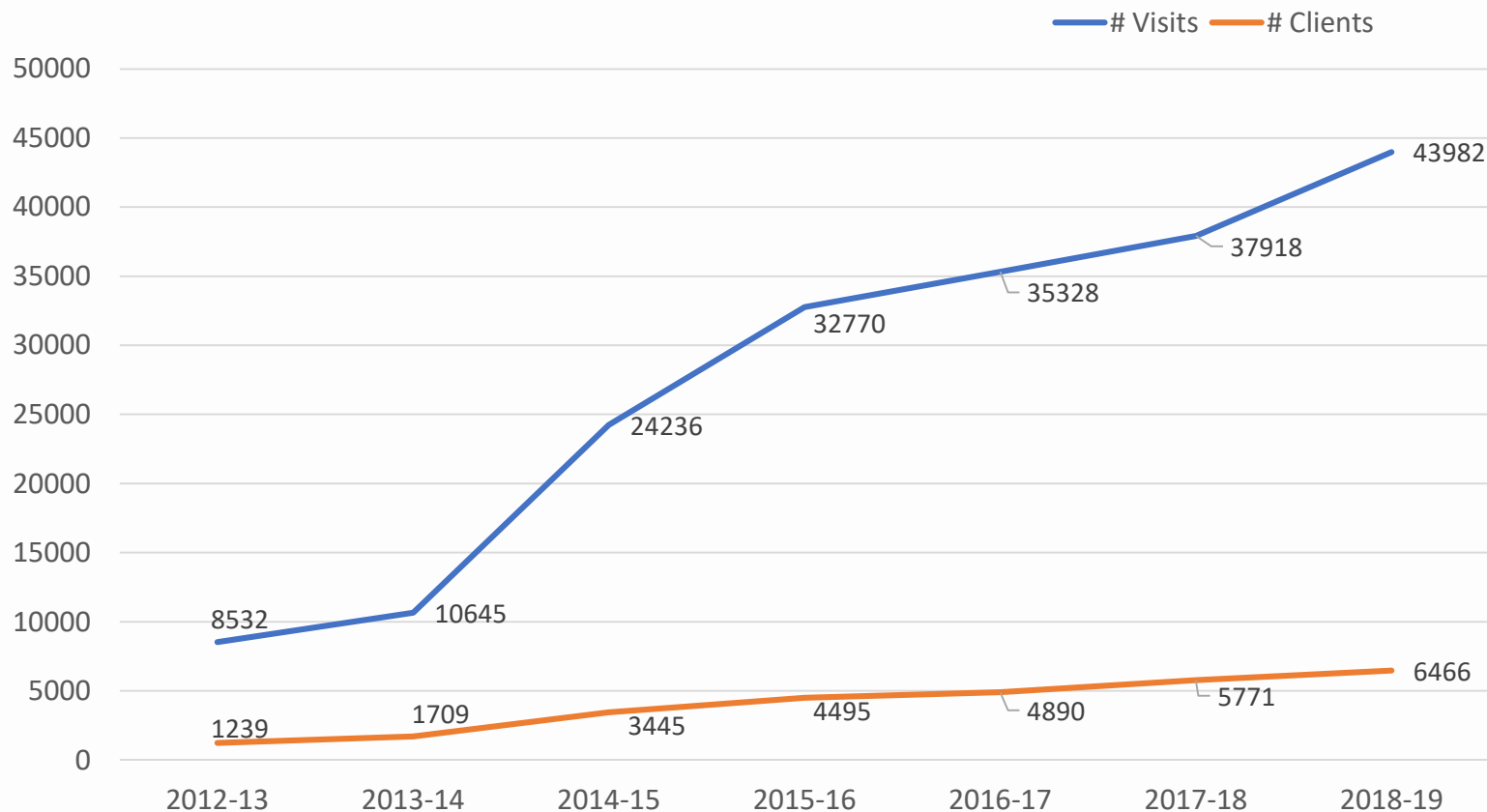
- 2019 County Reports
 - <https://tinyurl.com/oht19county>
- New interactive data tool being developed for 2020
 - Districts will be able to
- Schools & districts being invited this spring for Fall 2020 SHS
- EVERY public school is eligible to participate with 6th, 8th and/or 11th grades

SBHC DATA

Encounter data visits & clients 2014-19



Behavioral health visits & clients 2012-19



Contraceptive services at SBHCs 2019

- 62% (49 of 79) of SBHCs reported dispensing at least one type of contraceptive on-site.
- 48% (38 out of 79) of SBHCs are providing Long-Acting Reversible Contraceptives on site, which is an increase of 12 SBHCs.
- Condoms are available at 49 (62%) SBHCs.

	Dispense on-site	Prescription to pharmacy	Refer to other clinic or provider
Birth Control Pills	30	27	22
Cervical Barriers	20	28	31
Emergency Contraceptive	40	15	24
Implant	38	1	40
Injectable	46	1	32
IUD/IUS	26	1	52
Patch	28	25	26
Ring	28	25	26



The Transformation Center & CCO Incentive Metrics

Adrienne Paige Mullock
Transformation Analyst

SBHC Coordinators Meeting
2/6/2020

Place Your Logo Here - Align Center



Transformation Center

- The Transformation Center was launched in 2013 with the goal of supporting innovation within Oregon's health system
 - **Mission:** The Transformation Center is the hub for innovation and quality improvement for Oregon's health system transformation efforts to achieve better health, better care, and lower costs for all.
 - **Goal:** The Transformation Center identifies, strategically supports, and shares innovation at the system, practice, and community levels.

Population Health

CAC

Social Determinants
of Health & Health
Equity

Behavioral Health
Integration

Health-Related
Services

Transformation Center
Topics of Support

Oral Health
Integration

CCO Incentive
Metrics

Primary Care

Value-based Payment

Coordinated Care Organization's (CCO) Metrics

- **CCO Incentive measures**, for which CCOs are eligible to receive payments based on their performance each year (CCO Quality Incentive Program pay-for-performance measures); and
- **State Quality measures**, which OHA has agreed to report to the Centers for Medicare and Medicaid Services (CMS) as part of Oregon's 1115 Medicaid waiver.

Transformation Center Role: provide targeted technical assistance to CCOs, clinics and other interested health system partners for the following incentive metric

Health Analytics' primary roles are: to be the single point of accountability for continual improvement of health analytics coordination and data integration across OHA and DHS programs; to develop analyses, data strategies, and monitoring tools to assess the performance of OHA programs; and to support OHA policy development, implementation, and evaluation,.

2020 CCO Incentive Measure Benchmarks

- Metrics & Scoring Committee has selected the measure set, adopted updated benchmarks and improvement target floors, and selected Challenge Pool measures for 2020.
- The 2020 benchmark decisions are reflective of improvements in CCO performance, and changes in CCO composition and member assignment expected for the first year of CCO 2.0 contracts.
- The three measures included in the Challenge Pool are:
 1. Disparity measure: Emergency department utilization among members with mental illness
 2. Oral evaluation for adults with diabetes
 3. Well-child visits in the 3rd, 4th, 5th, and 6th years of life (kindergarten readiness)

Transformation Center Supports: CCO Incentive Metrics

- Adolescent immunizations
- Developmental screening and follow-up
- Diabetes (HbA1c poor control and oral evaluations for adults with diabetes)
- Emergency department utilization among members experiencing mental illness (disparity measure)
- Oral health (preventive visits for ages 1-14 and oral evaluations for adults with diabetes)
- Screening, Brief Intervention and Referral to Treatment (SBIRT)
- Timeliness of postpartum care
- Tobacco cessation/cigarette smoking prevalence
- Well-child visits (ages 3-6)

SBHC Related CCO Metrics

Adolescent Immunizations	Developmental screening and follow-up
Screening, Brief Intervention and Referral to Treatment (SBIRT)	Preventive Dental Visits for ages 1-14
Tobacco Cessation/Cigarette Smoking Prevalence	Well Child Visit (ages 3-6)

With the support of the Transformation Center:

- All CCOs increased colorectal cancer screening *(one by 9.2 percentage points in one year)*
- CCOs increased their childhood immunization rates *(one by 14 percentage points in one year)*

Well-Child Visits (ages 3-6)

- How is your School-Based Health Center collaborating with your local CCO with regard to this incentive measure?
- What type of support do you need from your CCO?
- Who is interested in continuing this conversation?

Thank you!

Adrienne Paige Mullock adrienne.p.mullock@state.or.us

*Sign up for the Transformation Center's Technical Assistance
distribution list*

here: <https://www.surveymonkey.com/r/OHATransformationCenterTA>

For more information:

www.TransformationCenter.org



SBHC SPO Strategic Planning

- SBHC State Program Office team (full team!!!) met in September 2019 to discuss our goals for the next 2-4 years.

- Brainstorm →
 - what's working,
 - what can we improve on,
 - what are the important policies or practices we need to address and
 - how do we best support and advance the SBHC field.
- Identify our priorities and continue the brainstorm.



***We do not move forward any major program or policy changes without stakeholder engagement.

SBHC Strategic Planning Goals

- ✓ Update Certification Standards to reflect current best practice in adolescent health care.
- ✓ Align SBHC Key Performance Measure Program with quality improvement strategies in other systems
- ✓ Provide SBHCs opportunity to learn from peers and clients to improve policy and practice.

Update Certification Standards to reflect current best practice in adolescent health care.

- Research mental health integration in primary care settings.
 - Effective models of integration
- Align certification standards with existing best practice with respect to youth-centered care.
- Make improvements to SBHC site visit process and certification compliance practices.

Align SBHC Key Performance Measure Program with quality improvement strategies in other systems

- Research state and national key performance measures and delivery of incentive programs specific to adolescent health.
- Create Workgroup to evaluate existing options and to develop recommendations on new incentives.
- Gather input on work group recommendations from SBHC field and put forward final recommendation for incentives to pilot in 2021-2022 school year

Provide SBHCs opportunity to learn from peers and clients to improve policy and practice

- Provide SBHC staff with opportunities to learn from the youth they serve.
- Conduct Technical Assistance Needs Assessment for SBHCs
- Develop a plan to focus on training and technical assistance based on needs assessment results.



Adolescent and School Health Unit

- Our **Vision:** Oregon is the very best place for all youth to learn, grow, and thrive.
- Our **Mission:** To support the health of all youth in Oregon through evidence-based and data driven policies, practices, and programs.
- Our **Program Areas:**
 - Adolescent Health Policy and Assessment
 - School-Based Health Centers
 - School Nursing
 - Youth Sexual Health



State School Nurse Consultant 2020 Updates

- 2019 Oregon School Nurse Annual Report
 - SN/SBHC partnership activities

Corinna Brower RN-BC, BSN, MPH

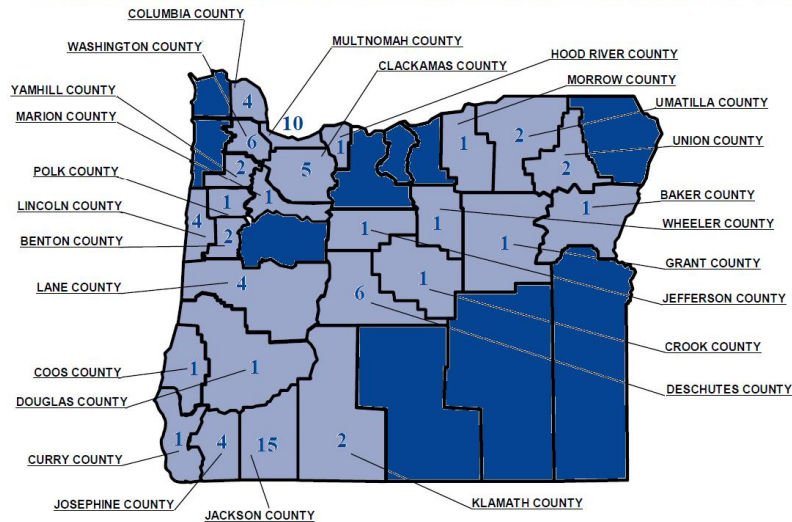
State School Nurse Consultant

Adolescent and School Health Programs

Public Health Division | OREGON HEALTH AUTHORITY

SBHCs and School Nurses: partners in school health

OREGON SCHOOL-BASED HEALTH CENTERS 2019



Oregon Health Authority
PUBLIC HEALTH DIVISION
School-Based Health Center Program

As of October 2019

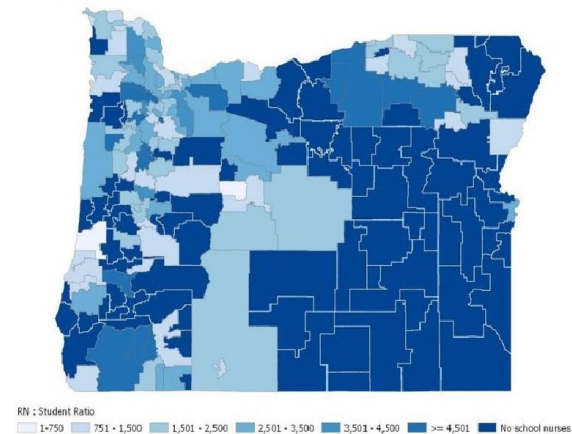
Certified SBHCs = 79

Counties with certified SBHCs

Oregon SBHC
School-Based Health Centers

OREGON SCHOOL NURSE RATIOS 2017*

Ratio of registered nurse to student by school district, Oregon 2017
Source: ODE State Nursing Report and enrollment data



As of October 2019

Total FTE school nurse services = 340
Over 400 individual nurses
13 districts gained school RN services



OREGON DEPARTMENT OF EDUCATION
Oregon achieves... together!

Oregon Health Authority

ODE's Annual Report: Oregon School Nurses

As of 2018-2019:

- Oregon has approximately **580,000** public school students.
- **28,330** students with reported medical needs (medically complex, medically fragile, or nursing dependent)
 - *less than 5%*
 - *OPIP - Oregon Child Health Complexity: 25%*
 - *National (other state) school nurse services: 17-20%*

ODE's Annual Report: Oregon School Nurses

As of 2018-2019:

- **340** full-time equivalent (FTE) nurses provide services in Oregon schools
 - 21% increase compared to 2017-2018
- **33% of districts** (66 total) **report no RN access**
 - 40% (79 total) had no RN access in 2017-2018

ODE's Annual Report: Oregon School Nurses

Recommended by 2020: 1 RN for every 750 generally well students

As of the 2018-2019 school year:

- Statewide average is 1 RN for 2,352 students
- General population ratio of **1 RN per 5,565 students**
 - 197 school districts
 - 18 districts (9%) meet 2018 recommended ratio, 1:1500
 - Of those, **4 districts** meet the 2020 recommended ratio of **1:750**

ODE's Annual Report: Oregon School Nurses

*“School nurses support federal and state requirements to **provide health services to all students.**”*

- Identify need (and provide support/refer)
- Support school-wide health efforts

ODE's Annual Report: Oregon School Nurses

Oregon law (ORS 336.201) identifies that “a registered nurse or school nurse is responsible for coordinating the school nursing services provided to an individual student.”

- UAP vs RN assessments
- Referrals to SBHCs
- Collaboration with SBHC providers, school staff, families

State School Nurse Consultant partnership activities

CDC-1801 grant “Oregon Healthy Schools”

- 6 priority districts
- WSCC model
- Focus on school-wide collaborative efforts
 - PE/PA
 - Nutrition
 - Chronic disease management

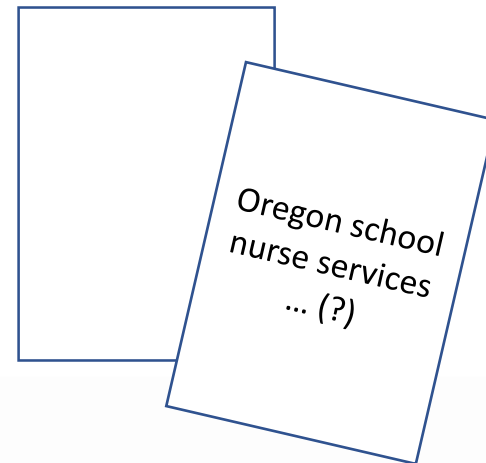
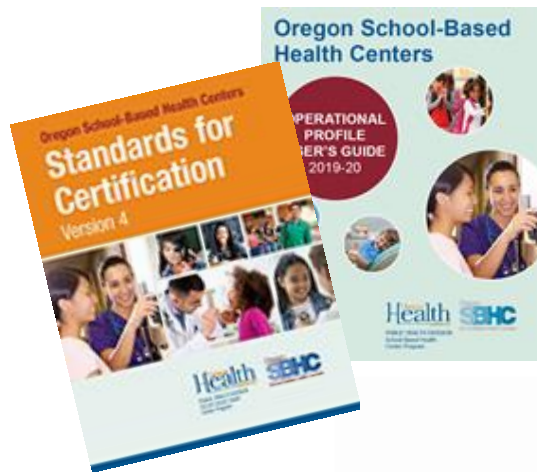
WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD
A collaborative approach to learning and health



State School Nurse Consultant partnership activities

HB3165 School Health Services Planning Grant

- 11 grantees
- Phase 1: needs assessment
- Phase 2: implement services to address identified needs



State School Nurse Consultant partnership activities

Oregon Department of Education

- SNAG – School Nurse Advisory Group; statewide guidance
- Medicaid billing
 - 9 pilot districts
 - IEP services – current billing
 - 504 services – future billing
- Student Success Act



Join In! Our Students. Our Success.

THE STUDENT SUCCESS ACT MARKS A TURNING POINT FOR EDUCATION IN OREGON

When fully implemented, our state will see an additional **\$1 BILLION INVESTMENT** in schools each year. This investment will provide new opportunities for every student in our state, particularly students who have been historically underserved.



STUDENT SUCCESS ACT

HOW THE STUDENT SUCCESS ACT INVESTS IN OUR STUDENTS

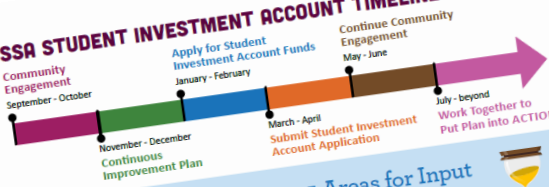
- At least **50%** Student Investment Account
- At least **20%** Early Learning Account
- Up to **30%** Statewide Education Initiatives

ROOTED IN EQUITY, AUTHENTIC COMMUNITY ENGAGEMENT, AND SHARED ACCOUNTABILITY FOR STUDENT SUCCESS.

The law requires school districts to build on the strengths and assets of young people, educators, families across the state, including members of the nine federally recognized tribes; students of color; students with disabilities; emerging bilingual students; and students navigating poverty, homelessness, and foster care.



SSA STUDENT INVESTMENT ACCOUNT TIMELINE 2019-2020



- September - October: Community Engagement
- November - December: Continuous Improvement Plan
- January - February: Apply for Student Investment Account Funds
- March - April: Submit Student Investment Account Application
- May - June: Continue Community Engagement
- July - beyond: Work Together to Put Plan into ACTION

WHAT IS THE STUDENT INVESTMENT ACCOUNT?


Close to **\$500 MILLION** in non-competitive grant money for all Oregon school districts and eligible charter schools.

New money has two purposes:

1. Meet students' mental and behavioral health needs.
2. Increase academic achievement and reduce academic disparities for:
 - Students of color;
 - Students with disabilities;
 - Emerging bilingual students; and
 - Students navigating poverty, homelessness, and foster care; and other students that have historically experienced disparities in our schools.

5 Areas for Input

- 1 Reducing academic disparities (gaps between outcomes for different student groups)
- 2 Meeting students' mental and behavioral health needs
- 3 Providing access to academic courses
- 4 Allowing teachers and staff sufficient time to collaborate, review data and develop strategies to help students stay on track to graduate
- 5 Establishing and strengthening partnerships



Allowable Investments

- CLASS SIZE
- WELL-ROUNDED EDUCATION
- INSTRUCTIONAL TIME
- HEALTH & SAFETY

FOR MORE INFORMATION

Visit [oregon.gov/ode/StudentSuccess](https://www.oregon.gov/ode/StudentSuccess)
Follow us @ORDeptEd | #studentsuccessact

OREGON DEPARTMENT OF EDUCATION
Oregon achieves... together!

https://www.oregon.gov/ode/StudentSuccess/Pages/StudentInvestmentAccount.aspx?utm_medium=email&utm_source=govdelivery

Education and Health: School Nurses and Student Success

4 Categories for the Student Investment Account:



Student Investment Account purposes:

1. Meet students' **mental and behavioral health** needs.
2. Increase **academic achievement** and **reduce academic disparities**

School nurses:

Provide crucial mental health support

- School nurses spend 1/3 of their time providing **mental health services** (Foster, 2005; Bohnenkamp, 2015)
- School nurses are trusted adults who **help students feel safe** at school, correlating with increased attendance and lower rates of depressed mood (Kvarme, 2019; Oregon Healthy Teen Survey, 2019)

Improve education outcomes

- Hiring Registered Nurses improves **attendance, achievement, and graduation rates** (Basch, 2011; Pennington, 2008; NASN, 2015)
- School nurses contribute to **improved education outcomes** for students with health conditions (Kocoglu, 2017)

Increase instructional time

- When a full-time Registered Nurse is in the school building, **teachers gain 20 minutes of instructional time** and administrators gain **1 hour per day** to focus on their primary work (Baish, 2011)
- Registered Nurses are **less likely to dismiss a student early**, compared to unlicensed staff (Pennington, 2008)

Promote health and safety

- School nurse interventions support **lifelong health and wellness for all students** (AAP, 2015; Egarter, 2011)
 - Presence of a Registered Nurse in schools **increases immunization rates** (Salmon, 2006; Lorick, 2015)
 - Registered Nurses **keep students safer** by educating school staff and preparing for medical emergencies (NASN, 2019)
 - School nurses are critical partners in **school-wide wellness and safety efforts** (CDC, 2014)
- School nurses **improve health and safety for students with special needs**
 - **Lower school nurse caseloads** result in improved services for students (Daughtry, 2018; Kruger, 2009)
 - Registered Nurses in schools yield **measurable improvements** in health and academic outcomes for students with chronic conditions, such as asthma and diabetes (Leroy 2016; McCabe 2019)
 - Oregon's **mandated school nurse-to-student ratios** ensure students with health needs have access to federally-mandated **Free and Appropriate Education (FAPE)** under the Individuals with Disabilities Education Act and Section 504 of the American Disabilities Act. (ORS 336.201 and Duncan, 2010)

School nurses support education



Updates from Youth Sexual Health Program

SBHC Coordinators Meeting
February 6th, 2020



Transitions with Federal Funding (PREP)



University Center for Excellence in
Developmental Disabilities

- Youth Transition Programs (18-21 years of age)
- Partnering with Oregon Department of Education (ODE)
- Friendships and Dating Program <https://www.fdprogram.org/>

Community Partners – Resources for IDD

Multnomah County Health Department – Youth Sexual Health Equity Program

Guidelines for Supporting the Sexual Health of Young People Experiencing Intellectual and Developmental Disabilities

www.multco.us/school/sexual-health-youth-developmental-disabilities



University Center for Excellence in Developmental Disabilities

Sexual Health Equity for individual with Intellectual and Developmental Disabilities (SHEIDD)

www.ohsu.edu/sexual-health-for-all

Oregon Teacher Training Institute (OTTI)

Collaboration between OHA, DHS, and ODE supporting local school districts with implementation of comprehensive sexuality education inclusive of gender and sexual orientation, K-5.

Roseburg - March 4-5, hosted by Douglas ESD

Astoria - April 23-24, hosted by Astoria SD

Ontario - July 21-22, hosted by Malheur ESD

More to come in Fall/Winter 2020

The Map 2020

Oregon Sexual Violence Prevention Resource Map

healthoregon.org/svpmap

We are here for you!

Shelagh Johnson – general info, sex education, the map, etc.

Youth Sexual Health Coordinator

shelagh.m.johnson@state.or.us

LaShanda Friedrich – data requests, research support, evaluation, etc.

Youth Sexual Health Research Analyst

lashanda.n.friedrich@state.or.us

Lindsay Weaver – all things PREP, youth with IDD, curriculum, etc.

Youth Sexual Health Project Coordinator

lindsay.weaver@state.or.us



Student Success Act

Tamara Dykeman

Student Success Act Coordinator

Oregon Dept of Education



OREGON

SCHOOL-BASED
HEALTH ALLIANCE

OREGON SCHOOL-BASED HEALTH ALLIANCE

SBHC Coordinator's Meeting
February 6, 2020



The OSBHA Team



Laurie Huffman
Executive Director



Antonia Rangel-Caril
Program and Advocacy
Coordinator



Maureen Hinman
Director of Policy and
Strategic Initiatives



Jessica Chambers
Administrative Coordinator



Ashley McAllister
Program Manager

Our mission is to strengthen school-based health services and systems that promote the health and academic success of young people.

School Health Advocacy Day


- Join us at the Capitol on Tuesday, **February 25** for the only youth-driven advocacy event that supports school-based health services in Oregon.
- This year, we are providing a poster template that you can customize to share info about your SBHC/s with legislators.
- Email Jessica@osbha.org for more info.

SCHOOL-BASED HEALTH MATTERS TO US


THIS SCHOOL HEALTH ADVOCACY DAY, WE ARE CELEBRATING...

34 YEARS OF SCHOOL-BASED HEALTH CENTERS IN OREGON

SBHCs are in 79 elementary, middle and high schools across 26 Oregon counties.

79 


BENEFITS OF SBHCS


100%

- SBHCs get youth the care they need, when they need it, so they can get back to class and learn.
- 82% of surveyed students were unlikely to have received care that day if there was not an SBHC available to them.
- In the 2018-2019 school year, 100% of SBHCs had a behavioral health provider onsite.


SPOTLIGHT ON OUR SBHC

- Add highlights of local services / programs / YAC / issues here.
- Add data you would like to share about your SBHC here. Possible data to include: number of students who visited your health center last year, number of uninsured youth in your county, etc.



Add a photo of your SBHC here. Add a photo of your YAC here.

FOR MORE INFO ON SBHCS IN OREGON, VISIT OSBHA.ORG



YAC Coaching

Through our contract with SPO, we are creating a model for YAC coaching.

Current focus areas with YAC Coaching:

- Recruitment & retention
- Supporting skill building for youth and adults
- Equity & inclusion

We are working with Hood River and Lone SBHCs for the 2019-2020 school year.

Email ashley@osbha.org to receive YAC recruitment tips we've developed through this new program.

Keep in Touch with OSBHA

- Email our staff:
 - Laurie Huffman: Laurie@osbha.org
 - Maureen Hinman: Maureen@osbha.org
 - Ashley McAllister: Ashley@osbha.org
 - Antonia Rangel-Caril: Antonia@osbha.org
 - Jessica Chambers: Jessica@osbha.org
- Visit osbha.org to sign up for our bimonthly newsletter
- Connect with us on Facebook, Instagram, and Twitter
[@OregonSBHA](#)



Spring Coordinators Meeting Webinar

Save the Date

Wednesday, May 6th 9-11AM

Contact Us

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Health
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