

# What is your favorite place to visit in Oregon?

The  
Wallowas

Lake Billy  
Chinook -  
Near Madras,  
OR

Cannon  
Beach

jefferson  
park -  
south of  
mt. hood

anywhere  
on the  
coast

Portland

Coast

Astoria

Anywhere  
on the  
coast

Mt  
Hood  
Forrest

Sisters (family)  
and Depoe  
Bay

Bend,  
OR

Lake of  
the  
Woods

Anywhere  
in Oregon

The  
Gorge!  
Also the  
Wallowas.

any of  
the  
forests

Anywhere  
near a big  
body of  
water :)

Bend

# What partners are you communicating with?

**culturally specific CBOs**

partners who work with youth who have special health care needs

Primary Care providers , Early learning Hubs, Relief nurseries, general membership

**Early learning hubs**

child psychologists

**social workers**

Head Start, Relief Nurseries, CMHP's, PCPCH's

Early Learning Hub (various partners) / Head Start, Relief Nursery, Clinics/PCPCHs

**clinics**

**nurse home visitors**

**Clinics and CBOs**

Specialty BH providers, BH integrated PCPCH practices, and primary care practices serving birth to five.

**primary care providers**

Integrated Behavioral Health programs in the Portland Metro region and clinics wanting to start up or improve their IBH programs.

# What partners are you planning to communicate with?

**CBOs**

# Why are you communicating or planning to communicate with those partners?

to learn more about what they need.

Workforce Development and Workforce diversification

leverage their expertise on communicating with parents and care givers

They can play a role in supporting a CCO covered SEH service

referral capacity

To enhance collaboration and develop unified messaging

Feedback about what areas of work to focus on

Understanding where they are with reaching 0-5, what barriers exist, and what supports are needed.

to understand the services they currently do or can provide

They play an important role in the healthcare services and support available to members birth to five.

to better understand needs of more socially complex families so we can design interventions

Improve access, diversity and services available

current readiness to incorporate new learning

# How are you communicating or planning to communicate with those partners?



# What has gone well?

**strong engagement**

**Recognizing their experience and expertise in the area.**

we have been having lots of conversations at Health Share about clinician burnout and how the job is turning out to not be what they originally trained in. All the new screenings, short visit

Speaking of breaking stigma, seems like that "pop in" should be part of the initial preventive visits. Just as orientation to the clinic - here is your physical health provider and here is th

**good engagement and participation**

Clinic partners and clinicians have been open with what they may need or want to be more successful. Learning what they see is necessary also.

**Identification of vulnerable young members**

**"snowball" effect - communicating with one person/group leads to outreach/communicating with a new partner.**

**Hub's willingness to collaborate**

**Community support around this topic has been strong.**

**Engagement has been good.**

we have developed summary reports after our community engagement using lay language and it has been well received

**Can you say more about how you did this?**



# What challenges have you experienced?

Competing priorities for practices & it has been hard to engage individual providers at the level that we would like.

Competing priorities and reduced bandwidth

competing initiatives

This is not a top priority for health professionals and CCO's

There is a theme here.. just keep reaching out to partners- don't give up on those connections/relationships!

PCPs are overwhelmed with all the asks of them

Transitions in staffing

figuring out how to explain what "social emotional health" even means - to families, PCPs etc... I don't think it's self-evident

Clinicians often feel that they need to focus on more high-risk situations they are seeing in clinic (e.g., SI)

Clinics are often worried about the financial cost of having clinicians out the clinic for training.

figuring out how primary care providers are equipped to respond/referr - training or knowledge of resources.

# What challenges do you anticipate?

figuring out how CBOs can bill medicaid

supporting providers who may be providing some of the services, but they are not in claims data

Why did it go well?

Why have you experienced those challenges?



# What are the next steps?

**create some  
messaging or use  
some of what's  
already been  
created by OHA  
and/or other CCOs**



