Introduction

As stated in the Health Aspects of Kindergarten Readiness Measure: System-Level Social-Emotional Health measure specifications, CCOs must attest to all required components of the measure that took place as of December 31 of the measurement year. CCOs must complete all of the required must-pass items for the measurement year. No partial credit will be given. The questions below describe each must-pass requirement and optional actions for MY 2 (2023). Please review the details of each question and answer accordingly for your CCO. This survey must be completed by February 29, 2024. Additionally, completed Action Plans and Asset Maps must also be submitted to metrics.questions@odhsoha.oregon.gov by February 29, 2024.

Health Aspects of Kindergarten	Readiness:	System-Level	Social-	Emotional	Healtl
Attestation Survey, MY 2 (2023)					

Respondent Information

* 1. Name	
* 2. CCO	
* 3. Email	

Aggregate Reports and Child-Level Data File Review (Component 1.1)

Required item details:

Review of the aggregate and child level reports provided in the Social-Emotional Health Reach Metric Report. The aggregate report provides the CCO-level findings over time and specifically by the child health complexity data specific to the social complexity factors, a number of which are anchored to adverse childhood events (ACEs) correlated with social-emotional health needs and after which social-emotional health assessments are particularly recommended.

* 4. Answer yes if applicable CCO staff have reviewed both the aggregate and child-level
reports provided in the Social-Emotional Health Reach Metric Report. Roles within the CCC
that may benefit from reviewing the data include: Population Health, Quality Staff, Quality
Improvement, Data Analysts, and teams focused on Child Health. Otherwise, answer no.

Yes No

Examination of Data for Population with Historical Inequitable Outcomes (Component 1.2)

Required item details:

CCOs are required to examine the Social-Emotional Health Reach Metric data for at least one population with historical inequitable outcomes, using CCO data available. Specific examples provided are anchored to stakeholder and data findings such as examining data by race, ethnicity, use of translator, and geographic region.

* 5. Answer yes if you have examined the data provided in the aggregate or child-level file
broken down to at least one population with historical inequitable outcomes to understand
the population(s) served by your CCO. Otherwise, answer no.
○ Yes
○ No

Assessment of Payment Policies and Contracts for Claims and Services (Component 1.3)

Required item details:

O No

CCOs are required to assess payment policies and contracts for the claims and services included in the Social-Emotional Health Reach Metric to ensure there is a continuum of services that address social-emotional health from prevention to treatment, including community options and arrangements.

* 6. Answer yes if you have reviewed your CCO's written payment policies and contracts with
entities that could provide services that support Social-Emotional health to better understand
opportunities for clarification and improvement, and gaps in payment policies and contracts
that could be focused on. Otherwise, answer no.
○ Yes

Identification of Missing Assessment or Service Claims (OPTIONAL) (Component

Optional item details:

additional data capturing children accessing services not yet reflected in the reach metric results. (Documentation for proposed enhancement of the data to be based on CCO-provided claims for OHA measure validation.)			
* 7. Answer yes if your CCO has identified missing assessment or services claims and intend to submit additional data capturing children accessing services not yet reflected in the reach metric results. Otherwise, answer N/A.			
Yes			
○ N/A			

Asset Map Development (Component 2.1)

Required item details:

CCOs are required to update the MY 1 (2022) Asset Map for contracted behavioral health services and develop the MY 2 (2023) Asset Map for Patient Centered Primary Care Home (PCPCH) integrated behavioral health.

To receive credit, CCOs will submit the developed Asset Maps and attest to the completion of this task. CCOs may use the standardized forms provided or another form. If another form is used, it must include all components outlined in the specifications:

- · Location of clinic or program site
- County(ies) served by clinic or program site
- · Number of providers who currently serve children birth to age five and have applicable skill sets
- Capacity for new referrals specific for children birth to age 5
- Race, ethnicity of provider(s)
- Language spoken by provider(s)
- Service modalities provided

The updated Asset Map must document contracted behavioral health providers (update of Year 1 asset map).

The newly developed Asset Map must document Patient Centered Primary Care Home (PCPCH) integrated behavioral health providers

ome (1 of oil) moogration behavioral nearth provincies.
he Asset Maps should be submitted to metrics.questions@odhsoha.oregon.gov by ebruary 29, 2024.
* 8. <u>Answer yes</u> if your CCO has updated and submitted the Asset Map for contracted behavioral health providers (update of Year 1 asset map) to attest to the completion of this task using the standardized form provided or ensuring that all components of the standardized form are addressed. <u>Otherwise</u> , <u>answer no</u> .
* 9. <u>Answer yes</u> if your CCO has developed and submitted the 2023 Asset Map for Patient Centered Primary Care Home (PCPCH) integrated behavioral health providers to attest to the completion of this task using the standardized form provided or ensuring that all components of the standardized form are addressed. <u>Otherwise, answer no.</u> Yes No

Review of Key Considerations for Reflection (OPTIONAL) (Component 2.2) **Optional item details:**

CCOs have the option to share key considerations and reflection questions that were p p

CCO-Led Cross-Sector Community Engagement (Component 3.1)

Required item details:

CCOs are required to engage cross-sector community partners to review and discuss the Social-Emotional Health Reach Metric data (Component 1), the Asset Map of Social-Emotional Health Services and Providers developed by the CCO (Component 2), share the CCO reflections, and obtain input about barriers and opportunities to improve Social-Emotional service capacity and access to inform the Action Plan. This engagement must include the content described below, address the partners listed below, and include one or more group-level meeting(s) with the proposed entities collectively to ensure shared understanding and input.

During the meeting(s), the CCO must display or provide copies of the findings from Component 1.1, Component 1.2 and Component 2.1 in order to ensure that the community engagement to inform the Action Plan is anchored to a shared understanding of:

- 1) The current state of child-level CCO-covered social emotional services that are within scope of the metric;
- 2) An understanding of the current network of CCO-covered service providers identified in the Asset Map (Component 2); and
- 3) Descriptive characteristics about the service providers including contracted services available and factors that impact access, capacity, and service modality availability that address the needs of children in the community.

- * 11. **Answer yes** if in the meeting(s), the CCO shared Component 1.1, 1.2, and 2.1 materials below:
- <u>Component 1.1 materials</u>: The Social-Emotional Health Reach Metric data presented in the CCO aggregate report and CCO reflections about the implications of the findings for the Action Plan intended to increase access and capacity of CCO-covered Social-Emotional services.
- <u>Component 1.2 materials</u>: The Social-Emotional Reach Metric data findings for at least one population with historical inequitable outcomes (examples: social complexity factors, race, ethnicity, or geographic region) and CCO reflections about the implications of the findings for the Action Plan intended to increase access and capacity of CCO-covered Social-Emotional services.
- <u>Component 2.1 materials</u>: A summary of the information gathered in the CCO's Asset Map. This should include the overall number of providers identified, and a summary for each of the descriptive information variables listed in the Asset Map (e.g. rows in the table). This also includes the capacity of the current providers for new referrals and the descriptive factors collected (e.g. each row in the Asset Map about the services that impact access and availability of service modalities that meet the needs of children). The CCO should share their reflections on the findings from the Asset Map and implications of the findings for the Action Plan needed to increase access and capacity of CCO covered Social-Emotional services.

O Yes			
O No			

- * 12. **Answer yes** if your CCO engaged all the required cross-sector community partners below:
 - Primary care practices/providers
 - Behavioral health programs/providers that serve children
 - Early Learning Hub(s)

Otherwise, answer no.

• Tribal government(s) and/or the Urban Indian Health Program (To answer "yes" CCOs are required to reach out to tribal government(s) and/or the Urban Indian Health Program.

Whether tribal government(s)/UIHP choose to participate is at their sole discretion. So long as the CCO invited tribal government(s)/UIHP to participate, the CCO may answer "yes,"

"yes,"
regardless of whether the tribal government(s)/UIHP chose to respond or participate.)
• Regional Education Service District(s), including the Early Intervention and Early
Childhood Special Education program
 If applicable, any other CCO serving members in the same region
Otherwise, answer no.
○ No

13. CCOs are also required to engage at leas ocial complexity indicators. Please select all a	
Culturally-specific organizations serving children	Local criminal justice agencies
birth to age 5 and their families	My CCO did not engage with a partner providing
Local department of human services program, including offices of child welfare and self-sufficiency	services aligned with social complexity indicator
Other behavioral health programs/providers serving children birth to age 5 and their families	
Other (please specify)	
14. CCOs are also required to engage at leas artners engaged by your CCO.	st 2 additional partners. Please select all other
Early care and education programs, including	Faith-based organizations
preschool and childcare programs	My CCO did not engage any additional partners.
Local public health programs serving children birth to age 5 and their families (e.g., WIC, home visiting)	
Regional health equity coalitions	
Other community-based organizations serving fami Please specify.	lies with young children (e.g., Family Relief Nursery).

Engagement of Communities Experiencing Historical and Contemporary Injustices (Component 3.2)

Required item details:

CCOs are required to engage communities experiencing historical and contemporary injustices* to review and discuss the Social-Emotional Health Reach Metric data (Component 1), Asset Map of Social-Emotional Health Services and Providers (Component 2), and barriers and opportunities to improve Social-Emotional Health service capacity and access to inform the Action Plan. This engagement must address the partners listed below, include the content described below, and include one or more group-level meeting(s) with the proposed entities collectively to ensure shared understanding and input.

During the meeting(s), the CCO must display or provide copies of the findings from Component 1.1, Component 1.2 and Component 2.1 in order to ensure that the community engagement to inform the Action Plan is anchored to a shared understanding of:

- 1) The current state of child-level CCO-covered social emotional services that are within scope of the metric,
- 2) An understanding of the current network of CCO-covered service providers identified in the Asset Map (Component 2), and
- 3) Descriptive characteristics about the service providers that include the services that are available and factors that impact access, capacity, and degree to which the service modalities address the needs of children.
- *Communities experiencing historical and contemporary injustices include but are not limited to:
- Families who identify as Black, Indigenous, and people of color (BIPOC)
- Families experiencing social challenges including poverty, substance use disorder, mental illness, child welfare involvement, parental incarceration, parental disability, parental death, or language access barriers
- Other groups, depending on the community history and context (e.g., families living in a geographically isolated area of the region).
 - * 15. <u>Answer yes</u> if you engaged at least one population who experiences historical and contemporary injustices to review and discuss the Social-Emotional Health Reach Metric data, Asset Map of Social-Emotional Health Services and Providers, and barriers and opportunities to improve Social-Emotional Health service capacity and access to inform the Action Plan

opportunities to improve Social-Emotion	nai Heaith service capacity and acc
Action Plan.	
Otherwise, answer no.	
Yes	
O No	

- * 16. Answer yes if in the meeting(s), the CCO shared Component 1.1, 1.2, and 2.1.
 - <u>Component 1.1:</u> The Social-Emotional Health Reach Metric data presented in the CCO aggregate report and CCO reflections about the implications of the findings for the Action Plan intended to increase access and capacity of CCO-covered Social-Emotional services.
 - <u>Component 1.2</u>: The Social-Emotional Reach Metric data findings for at least one population with historical inequitable outcomes (examples: social complexity factors, race, ethnicity, or geographic region) and CCO reflections about the implications of the findings for the Action Plan intended to increase access and capacity of CCO-covered Social-Emotional services.
 - <u>Component 2.1:</u> A summary of the information gathered in the CCO's Asset Map, CCO reflections to Asset Map and implications for the Action Plan as described in Component 3.1, with specific emphasis on the Asset Map findings specific to the population and the population needs.

1 1	
Otherwise, answer no.	
Yes	
○ No	

Strategies to Obtain Meaningful Community Input (Component 3.3) Required item details:

CCOs are required to implement strategies to obtain meaningful input from the communities experiencing historical and contemporary injustices engaged in Component 3.2.

* 17. <u>Answer yes</u> if your CCO utilized one or more of the strategies below to obtain meaningful input from the communities experiencing historical and contemporary injustices engaged in Component 3.2.

Strategies the CCO can use to obtain meaningful input from communities experiencing historical and contemporary injustices include:

- The CCO reviewed existing data that has been collected in the CCO region about families' experience accessing Social-Emotional health services.
- The CCO partnered with and paid parent/family representatives from communities experiencing historical and contemporary injustices to engage on advisory councils or in meetings.
- The CCO included providers and/or advocacy groups that represent communities experiencing historical and contemporary injustices on advisory councils or in partner meetings.
- The CCO attended meetings hosted by families, providers, and/or advocacy groups that represent communities experiencing historical and contemporary injustices (e.g., Early Learning Hub Parent Advisory Council meetings) to hear family perspectives.
- The CCO partnered with families, providers, and/or advocacy groups that represent communities experiencing historical and contemporary injustices to collect new family data (e.g., via focus groups or listening sessions).
- Other

Otherwise,	answer no.
O Yes	
O No	

select at least one strategy to meet this require	ement.
 The CCO reviewed existing data that has been collected in the CCO region about families' experience accessing Social-Emotional health services. The CCO partnered with and paid parent/family representatives from communities experiencing historical and contemporary injustices to engage on advisory councils or in meetings. The CCO included providers and/or advocacy groups that represent communities experiencing historical and contemporary injustices on advisory councils or in partner meetings. 	The CCO attended meetings hosted by families, providers, and/or advocacy groups that represent communities experiencing historical and contemporary injustices (e.g., Early Learning Hub Parent Advisory Council meetings) to hear family perspectives. The CCO partnered with families, providers, and/or advocacy groups that represent communities experiencing historical and contemporary injustices to collect new family data (e.g., via focus groups or listening sessions). My CCO did not engage communities experiencing historical and contemporary injustices.
Other (please specify)	

Reflections from Conversations with Community Partners and Families (Component 3.4)

Required item details:

CCOs are required to submit a summary of reflections from conversations with cross-sector community partners and families. Reflections may include steps the CCO took to minimize harm and specific lessons learned about engaging communities experiencing historical and contemporary injustices. Summaries can be submitted via the comment box below or can be submitted separately to metrics.questions@odhsoha.oregon.gov. All reflections must be received by February 29, 2024.

* 19. <u>Answer yes</u> if your CCO will submit its reflections via email to metrics.questions@odhsoha.oregon.gov. All reflections must be submitted by February 29,
2024. Otherwise, answer no and provide your reflections in the comment box in the
question below.
Yes
○ No
20. Please note your reflections in this comment box or submit separately to metrics.questions@odhsoha.oregon.gov by February 29, 2024.

Action Plan Required Items - Target Areas (Component 4.1)

Required item details:

CCOs are required to identify at least two target areas to be included in their Action Plan informed by data review, asset mapping, and community conversations in Components 1-3.

* 21. **Answer yes** if your CCO has identified at least two target areas from the options below for improvement, informed by Components 1-3 of this measure. **Otherwise, answer no.**

Target areas for improving provision of Social-Emotional health services, informed by family input, improvement pilots, and stakeholder survey findings, include:

Therapy Services (within Specialty Behavioral Health and Integrated Behavioral Health)*

- Increase range of Social-Emotional health therapy services by CCO contracted providers
- Workforce development to improve skills of available providers (e.g., training, support for credentialing, tool provision, quality improvement facilitation)
- Workforce development to increase provider diversity and availability (e.g., recruitment strategies, training, support for credentialing or other educational attainment)
- Enhancement of the types of therapy modalities offered (e.g. group, focused on trauma, etc.)
- Enhancement to how therapy services are provided to address barriers to access (provision in home, community-based settings, etc.)
- Pursue new contract and payment options for community-based providers to enhance provision of Social-Emotional health services.

Screening & Assessment by CCO Contracted Providers

- Increase Social-Emotional health assessments provided to children in CCO covered settings.
- Increase Social-Emotional screening of young children in CCO covered settings.
- Workforce development to improve skills of available providers (e.g., training, support for credentialing, tool provision, quality improvement facilitation)
- Workforce development to increase provider diversity and availability (e.g., recruitment strategies, training, support for credentialing or other educational attainment)
- Workforce trainings/quality improvement support on flags of social-emotional delays based on current screenings conducted that could be used to flag children for assessments.
- Workforce trainings/quality improvement support to implement population-based screening of children birth to five for social-emotional delays in primary care.

<u>Supporting Access - Referral Pathways</u>

- Address access barriers for families (e.g., improve language access supports, provide child care supports, provide transportation supports, expand hours or offer flexible scheduling)
- Improve care coordination for families, including providing support navigating Social-Emotional health services and improving referral pathways
- Support Publicly Available Information about Providers to Inform Referrals: Materials about

 behavioral health providers identified in the as including provider capacity and descriptive chain and essentiation of "warm referrals", feedback loops. Address barriers to accessing services through 	aracteristics that inform referrals/access
Environment • Public health messaging efforts to increase a and/or reduce stigma.	wareness of Social-Emotional health services
*Identifying an action within the therapy service one or more of these strategies will be required	ces category is strongly encouraged in 2023, as d in 2024.
YesNo	
Integrated Behavioral Health)?	ervices (within Specialty Behavioral Health and
○ Yes	
○ No	
* 23. If your Action Plan targeted Therapy Ser and Integrated Behavioral Health), identify apply) N/A - did not target Therapy Services Increase range of Social-Emotional health therapy services by CCO contracted providers Workforce development to improve skills of available providers (e.g., training, support for credentialing, tool provision, quality improvement facilitation) Workforce development to increase provider diversity and availability (e.g., recruitment strategies, training, support for credentialing or other educational attainment)	
Other (please specify)	
* 24. Does your Action Plan target Screening	& Assessment by CCO Contracted
Providers?	
Yes	
O No	

* 25. If your Action Plan targeted Screening &	Assessment by CCO Contracted
Providers, identify the specific target areas be	elow (select all that apply)
N/A - did not target Screening & Assessment by CCO Contracted Providers	Workforce development to increase provider diversity and availability (e.g., recruitment strategies,
Increase Social-Emotional health assessments provided to children in CCO covered settings.	training, support for credentialing or other educational attainment)
 Increase Social-Emotional screening of young children in CCO covered settings. Workforce development to improve skills of available providers (e.g., training, support for 	Workforce trainings/quality improvement support on flags of social-emotional delays based on current screenings conducted that could be used to flag children for assessments.
credentialing, tool provision, quality improvement facilitation)	Workforce trainings/quality improvement support to implement population-based screening of children birth to five for social-emotional delays in primary care.
Other (please specify)	
Yes No * 27. If your Action Plan targeted Supporting specific target areas below (select all that appl	•
N/A - did not target Supporting Access - Referral Pathways	Support Publicly Available Information about Providers to Inform Referrals: Materials about
Address access barriers for families (e.g., improve language access supports, provide child care supports, provide transportation supports, expand hours or offer flexible scheduling)	behavioral health providers identified in the asset made available in easy-to-use formats, including provider capacity
	and descriptive characteristics that inform referrals/access
Improve care coordination for families, including providing support navigating Social-Emotional health services and improving referral pathways	Pilot of "warm referrals", feedback loops.
	Address barriers to accessing services through open time slots for evaluation.
Other (please specify)	Address barriers to accessing services through
Other (please specify)	Address barriers to accessing services through
Other (please specify)	Address barriers to accessing services through
	Address barriers to accessing services through open time slots for evaluation.
Other (please specify) * 28. Does your Action Plan target Environme Yes	Address barriers to accessing services through open time slots for evaluation.
* 28. Does your Action Plan target Environme	Address barriers to accessing services through open time slots for evaluation.

]]	N/A - did not target Environment
	Public health messaging efforts to increase awareness of Social-Emotional health services and/or reduce stigma.
7	Other (please specify)

Action Plan Required Items - Community Input (Component 4.2) Required item details:

CCOs are required to include input from communities experiencing historical and contemporary injustices in the development of the Action Plan.

* 30. Answer yes if feedback and input identified from conversations and/or meetings
facilitated with communities experiencing historical and contemporary injustices was
included in the Action Plan submitted for Component 4.3. Otherwise, answer no.
Yes
○ No

Action Plan Progress Assessment (Component 4.4)

Required item details:

CCOs are required to assess progress on their Action Plan.

- * 31. **Answer yes** if your CCO assessed your Action Plan in all of the following ways:
 - The CCO assessed whether they achieved progress on their Action Plan, measured by meeting progress milestones the CCO set in the Action Plan.
 - The CCO involved communities experiencing historical and contemporary injustices to evaluate the success of improvement strategies in the CCO Action Plan and offer suggestions for revising the targets and strategies in the Action Plan.

Otherwise, answer no	<u>).</u>
Yes	
○ No	

Revised Action Plan Submission (Component 4.5)

Required item details:

CCOs are required to submit a revised Action Plan, including target areas selected and improvement strategies and progress milestones for each target area. It is strongly encouraged that one target area in this year's Action Plan address expansion of Social-Emotional therapy services (including brief interventions), as this will be a required target area in MY 3 (2024).

Revised Action Plans must be submitted to metrics.questions@odhsoha.oregon.gov by February 29, 2024.

* 32. Answer yes if your CCO has submitted a revised Action Plan that includes target areas
selected and improvement strategies and progress milestones for each target area.
Otherwise, answer no.
Yes
○ No