



AllCare CCO Collaborative Community Health Improvement Plan (CHIP)

Jackson & Josephine/So. Douglas
CHIP Progress Report
July 2022 through June 2023



Certified



Corporation



AllCare CCO
Collaborative Community Health Improvement Plan
(CHIP) **Jackson & Josephine/So. Douglas**
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* Equity was added as a CHIP Priority Area in 2022

AllCare health crafted two additional Priority Areas in response to information included in the CHA and input from the AllCare Community Advisory Councils:

- Oral Health: integration and awareness of services; and
- Equity: accessible and appropriate health care.



Introduction to the Jackson & Josephine CHIP Progress Report

Foundations for Progress: In Southern Oregon, we believe that improving community health is not something that any one agency or organization can accomplish on their own. We know that creating meaningful change involves planning and collective action to generate solutions to community-wide issues. To this end, we know that creating meaningful change involves collaboration between all partners. This report is a joint effort between AllCare and Jackson Care Connect, knowing that a collaborative CHIP effort means that we are working together on these initiatives and using collective impact. This information represents the efforts of all partners in the Collaborative CHIP and is based on the reports shared with the CCOs last year and this year.

A regional Community Health Improvement Plan (CHIP) is a community-based blueprint for improving population health and health system performance. It lays out a long-term, strategic effort to address health-related issues in the community. It looks beyond individual organizations' priorities and actions, and instead outlines ways multiple organizations will contribute to addressing the community's priorities to improve overall community health and well-being.

The All In for Health: Jackson and Josephine Counties Community Health Improvement Plan 2019-2022 was developed after conducting a Community Health Assessment (CHA) and is informed by the CHA results. Initially hoping to continue on the 3-year CHA/CHIP cycle to align with hospital requirements, it was determined that the CHIP Collaborative would move back to a 5-year cycle, extending the CHIP to cover 2019-2024. The CHA provided data and information to identify community health issues which are then prioritized by the community. The CHIP is used to describe how community stakeholders will address the health priorities identified through the CHA.

- Collective Impact to achieve improved community health;
- Improved organizational and community coordination and collaboration, stronger partnerships, and strengthened partnership structures;
- Increased visibility of efforts;
- Increased public health system resiliency to adapt to change and tackle a variety of issues;
- Sharing of best practices, successes, and lessons learned; and
- Increased efficiency in use of resources.

Vision, Values and Priorities: The Vision of All In for Health centers on our communities being healthy, inclusive, engaged, and empowered. Southern Oregon will be a place where everyone lives in an environment that supports health, and has access to the resources they need for well-being. To support this Vision, our common Values include:

- **Equity:** Committing to tackling root causes of inequity to ensure health and well-being are within everyone's reach.
- **Inclusive Community Voice:** Engaging diverse populations and perspectives to keep community voice central throughout our process.
- **Collaboration:** Working together respectfully to seek common ground and build meaningful partnerships for the benefit of the community.
- **Accountability:** Meeting responsibilities to partners and the community by acting with transparency and integrity.
- **Communication:** Communicating openly, honestly, and respectfully with partners and the public.

We have sought Collective Impact on the three community-identified Priority Areas related to health and well-being:

- **Behavioral Health & Well-Being:** mental health and substance use;
- **Housing for All:** safe, affordable, accessible, appropriate;
- **Families Matter:** parenting support and life skills development; and
- **** New Priority Area** Equity:** remove barriers to accessing services and supports in our communities and address systemic racism and institutional bias.

The CHIP was always intended to be a living document that is responsive to our communities as we learn more about the diverse range of needs and barriers faced by our residents and able to adapt as those needs change over time.

While the CHIP was developed with the understanding that all three priority areas would be viewed through an equity lens, the impacts of COVID and the wildfires on our communities have elevated the need for greater intentionality around equity in our work.

Based on community feedback since the CHIP was finalized and the strategic work of our leadership team over the past year, we recognize the immediate need for developing equity and addressing the lack of adequacy in our current systems. We have experienced success but

we have a lot more work to do. We will build on the successes, addressing the immediate need for developing stronger policies and involving those impacted by our current systems.

We developed an addendum to the current CHIP document that identifies Equity as a fourth priority area of need in our community.

While we engage in a community-driven needs assessment and develop formal goals and measurable outcomes for a collective community equity plan, we offer the following high-level goals to guide early investment in equity programs and development of a more fair, welcoming, and equitable Rogue Valley for everyone:

1. Remove barriers to accessing services and supports in our communities* - especially those services intended to help our most vulnerable residents.
2. Address systemic racism and institutional bias within our region, be that current, historical, or developing policy.

Organizing for Success: *All in for Health* invites individuals and organizations throughout the region to come together to create a healthier community because “A healthy community is everyone’s business.” All in for Health includes a Core Team comprised of members of Jackson County Public Health, Josephine County Public Health, AllCare Health, Jackson Care Connect, and a contracted Coordinator; a Steering Committee comprised of members from over 20 partner organizations in Jackson and Josephine Counties; and four Networking Groups, one for each CHIP priority area, led by community leaders representing community organizations. Four subcommittees were created in early 2023 to support the planning and implementation of the 2023 CHIP. These will close in late summer 2023.

Overview of Progress Report: Much like our foundations of the CHA and CHIP, this Progress Report has been built on the collaborative efforts of countless community partners. This report has been completed through a partnership of team members at AllCare Health and Jackson Care Connect, realizing a Collaborative Community Health Improvement Plan requires a collaborative CHIP Progress Report.

For each Priority Area of the CHIP, we have worked to include information on:

- Priority Area Overview: A summary of high-level findings from the CHA and CHIP, connections to Healthier Together Oregon (the State Health Improvement Plan-SHIP), high-level strategies, as well as baseline vs. current data (as available);
- Changes in Community: Summary details on shifts in local and regional health priorities, goals, strategies, resources and/or assets;
- Contributing Community Partners: A list of community partners that have contributed to progress (included in a graph at the end of the report);
- Efforts and Progress Made: Overview descriptions of projects or coordination that have moved forward during the reporting period that highlight examples of community collaboration;

- Stakeholder Reflections: Direct reflections from local and regional community partners about their engagement in and work on CHIP Priority Areas or progress made through projects and coordination efforts;
- CCO Team Reflections: Direct reflections from the staff and Subject Matter Experts that have supported engagement in and work on CHIP Priority Areas;
- Challenges and Barriers: Summary of the major challenges and barriers experienced during the reporting period that affected our community’s ability to progress; and
- On the Horizon: Overview of opportunities and innovations on the horizon that we believe will positively impact this important work

This process has reminded us that improving community health is a massive undertaking and that meaningful and measurable systemic change takes time to accomplish. It has also provided us the opportunity to reflect on the remarkable events that took place during the reporting period. Through this, we have been able to celebrate how our history of local and regional collaboration prepared us to work together to support communities as they navigated continued repercussions of the COVID-19 pandemic and the acute 2020 wildfire season.

Pulling together this report has also provided us with an insightful view of where we are thriving in this work and where we might make improvements in the future to ensure that each component needed to ensure effective Collective Impact is addressed well. The beauty of this past year is that it has magnified the urgency of this work. Ideas and innovations that have long been dreamed of found their roots and we moved quickly from strategy to tactics and action. As partners, AllCare and Jackson Care Connect look forward to moving into this future work with renewed intention to hold the community at the center of our work.

NOTE: Due to the COVID 19 Pandemic winding down, and much of the data being on rotating yearly cycles, we were unable to obtain updated data for some of the priority areas. We hope to provide updated data gleaned from our new Community Health Assessment currently being produced, which will inform the new Community Health Improvement Plan.

RESOURCE DOCUMENTS:

[Jackson & Josephine Community Health Assessment](#)

[Jackson & Josephine Community Health Improvement Plan 2019](#)

Jackson & Josephine CHP Website: <https://jeffersonregionalhealthalliance.org/allinforhealth/>

PRIORITY AREA 1: Housing

[Jackson & Josephine Community Health Assessment - pp. 26-32](#)

[Jackson & Josephine Community Health Improvement Plan 2019 - pp. 22-25](#)



Priority Area Overview

Informing Data: Median housing costs are high relative to median income; there are large proportions of households paying more than 30% of their income on housing costs, especially among renters; a substantial proportion of households report severe housing problems (incomplete kitchen facilities, incomplete plumbing facilities, crowded conditions, or cost burden greater than 50%); there is a relatively high percentage of school-age children experiencing homelessness; and a large proportion of households are unable to afford the basic costs of living.

Community Priorities: Housing, including affordability, safety, and homelessness, was the issue of highest concern for community members; cost was of particular concern for renters, low-income community members, and non-White community members; safety and quality were also of particular concern to renters who feel vulnerable in asking for housing repairs and improvements; individuals and families have difficulty with affording other living costs – food, medical care, transportation, child care – due to the high cost of housing; low area wages make it difficult to improve their circumstances; and employers find that the cost of housing negatively affects their ability to recruit employees to the area, which in turn affects their ability to provide needed medical and social services.

Nearly three years after the devastating 2020 Alameda fire, recovery remains one of our community's most urgent needs, and we are committed to helping with recovery and rebuilding efforts.

Key Concerns and Context: The following issues are key concerns: the importance of ADA accessible housing for people who experience disabilities, including older adults wanting to age in place; a need for safe transitional housing and services for people in addictions recovery, post-hospital discharge, and post-incarceration; recognizing veterans and homeless families as priority populations; there is a connection between housing location and access to transportation; the key role of policy and advocacy in addressing the issue; and the need to cultivate a shared sense of understanding and responsibility within the community on the issue.

SHIP Alignment: This regional Priority Area aligns with the Healthier Together Oregon 2020-2024 SHIP priority area of Economic Drivers of Health and has the potential to positively impact issues related to housing, living wage, food security, and transportation.

Housing Priority Area - Strategic Goals

Goal 1: Increase the percentage of households paying no more than 30% of their income on housing.

Goal 2: Increase the percentage of individuals living in housing that is safe, accessible, and connected to community and services.

Key Data Point	Baseline Data	2021 Progress Report Data	Current Data
Percent of households paying more than 30% of income on housing	2012-2016 Jackson County: Renters: 56.9% Owners: 38.9% Josephine County: Renters: 61.7% Owners: 42.9%	2015-2019 Jackson County: Renters: 54.8% Owners: 35.1% Josephine County: Renters: 58% Owners: 41.2%	2016-2020 Jackson County: Renters: 51.6% Owners: 27.1% Josephine County: Renters: 57.7% Owners: 29.3%
Percentage of K-12 homelessness students	2015-2017 Jackson County: 2015: 7.6% 2017: 8.0% Josephine County: 2015: 5.9% 2017: 9.0%	2018-2019 Jackson County: 7.3% Josephine County: 8.7%	2019-2020 Jackson County: 6.8% Josephine County: 8.2%

<p>Percentage of vacant housing</p>	<p>2012-2016</p> <p>Jackson County: Owned: 1.8 Rental: 3.7</p> <p>Josephine County: Owned: 1.8 Rental: 3.7</p>	<p>2015-2019</p> <p>Jackson County: Owned: 2 Rental: 2.1</p> <p>Josephine County: Owned: 1.1 Rental: 3.2</p>	<p>2016-2020</p> <p>Jackson County: Owned: 1.5 Rental: 1.9</p> <p>2016-2020</p> <p>Josephine County: Owned: 0.8 Rental: 2.6</p>
<p>Length of Housing Program Waitlists</p>	<p>1/1/2016 - 12/31/2016</p> <p>On waitlist/in housing: 461 Left waitlist/housing: none available</p>	<p>1/1/2020-12/31/2020</p> <p>On waitlist/in housing: 415 Left waitlist/housing: 350</p>	<p>No update available: significant changes to available services may make limited available data non-comparable.</p>

SOURCE: Jackson County Continuum of Care APR Report; Oregon Department of Education, as reported by Children First for Oregon, Oregon County Data Book; and, U.S. Census Bureau, American Community Survey, 5 Year Estimates.

Changes in Community

Declining Vacancy Rates: Ideally, we would have seen the housing vacancy rates approach an industry-recommended 5%, though any improvement would only have been indirectly related to CHIP activity. Circumstances including the loss of ~2,600 homes due to wildfires in 2020 and a continued housing development rate that is below the projected population growth have contributed to the vacancy rates declining

Increase in Income Spent on Housing: Further investigation is needed but, while the data indicate a decrease in households paying >30% of their income for housing, more recent quantitative and anecdotal data suggest that this number has increased since the 2020 US Census data range due to COVID-19 and regional wildfires. We expect to see these trends represented in updated US Census data and will include that trend in future CHIP reports. Potential reasons why we see a negative trend in the percent of households paying more than 30% of income on housing from 2016-2020 could be the result of decreased supply and increased demand for housing at all levels in the Rogue Valley. This trend could have been positively impacted because of greater connection between housing and service providers, increased outreach and engagement funding from the CCOs and local foundations, and municipal efforts to support housing that have been at least partially informed by the CHIP or CHIP partners.

Connection to services: Community housing providers and service agencies are working effectively together through many avenues. This could be partially supported through the duration of the CHIP process yielding results; the infusion of state and federal funds into our region as a result of the wildfires, and federal policies (American Recovery Plan Act) and state legislation.

Increased Shelter Access: In 2021, several new shelters, transitional housing, and supportive housing projects opened in the Rogue Valley. These include projects in Ashland, Medford, and Grants Pass. These additional programs, coupled with increased connection to service providers, may account for some of the decline in K-12 homelessness rates.

Contributing Community Partners

A list of community partners that have contributed to progress of our CHIP is included at the end of the report. Additionally, in Spring 2023, a partner report survey was administered, and partners shared updates with all in for Health on projects aligning with each of the priority areas. Those updates are provided throughout this report.

Efforts and Progress Made

Housing for All Workgroup: The collaborative of Jackson & Josephine counties Community Health Improvement Plan, known as *All in for Health*, includes a networking group on housing. This group has been meeting since December 2022. Projects that evolved from this workgroup include greater connectivity between housing and service providers; focus on lead remediation as a barrier to housing; increased understanding of the relationship between income and cost-of-living when discussing housing affordability; and the development of YIMBY (yes in my backyard) networks to help advance housing projects and policies.

Much of the work of All in for Housing was to form new or stronger connections, explore new ways of collaborating, and in some cases, design projects based on these new potential ways of working together. This will be an ongoing process and has already shown

results through new project designs, stronger working relationships and improved interagency communication. CHIP presentations have also been received by local municipalities including city councils, committees and commissions, as well as city staff.

Project Turnkey program in Ashland- OHRA Center: Through Project Turnkey funds, Options for Helping Residents of Ashland (OHRA) purchased and has been renovating the former Super 8 Motel in Ashland, to serve as both a shelter and resource center. Since April 1, 2021, the Resource Center has received more than 55 visits per day, serving over 780 unduplicated guests, assisting 199 unhoused families into housing and protecting housing for 299 families. The shelter has housed 333 guests, 72 of whom have moved into permanent housing and 124 who found employment. In the spring of 2023, the construction of the elevator and four ADA accessible bathrooms has been completed.

UCAN Stabilizes Homeless Individuals: Having recently assumed operation of the Grants Pass Shelter and Foundry Village, United Community Action Network (UCAN) offers a wide array of housing services including congregate shelter, motel/hotel vouchers, case management, move-in deposit assistance and housing placement services.

Jackson County Housing Authorities's Snowberry Brook & Freedom Square housing projects: Jackson County Housing Authority's new properties offer 106 new and affordable rental housing units for households earning at or less than 50% of the area median income. A strong partnership with the Maslow Project and the Veterans Administration offers targeted outreach services and referrals.

Consumer Credit Counseling helps build financial stability: Consumer Credit Counseling Services of Southern Oregon helps stabilize families through financial education including credit counseling. Through these services, families have been able to achieve financial stability in order to obtain housing and remain stably housed. Project outcomes include 57% of participants reporting to now have a budget, 37% having paid down debt and 32% having improved their credit score, while 13% of participants have been able to purchase a vehicle.

Rogue Community Health- Rogue Way Home: Rogue Community Health collaborates with 45 community partners on Rogue Way Home, which helps wildfire victims and other houseless individuals find permanent housing and gain some stability in their lives. With cross-agency efforts, 251 needs assessments were conducted with community residents, and case managers were able to provide a total of 542 instances of housing specific navigation support. This support includes connecting individuals with housing providers, completing housing applications and searches, and advocating for rental/deposit assistance.

Coalición Fortaleza forms visionary community housing project: Coalición Fortaleza formed with the goal of benefitting the Latinx and farm working families impacted by the Almeda fire. They are forming the first resident-owned mobile home community in southern Oregon. This year, a series of community engagement workshops for Talent Mobile Estate and other fire-affected residents were completed to provide feedback on what they want their

community look like as it is being rebuilt. Homes have begun being delivered as of May 2023, and Coalición Fortaleza also has been offering financial coaching from DevNW to prepare families for home ownership. An Individual Account Program has also been implemented, along with the financial coaching to support the 180 community members who have participated so far in their recovery process.

Community Works' homeless youth and family services transitional living program:

Community Works provides heavily subsidized rent and safe housing, for up to two years, for homeless youth and families ages 16-24. The organization provides case management and life skills development to every client, at no cost. Through this program, 49 clients and 20 of their children received services, with 84% of clients reaching the goal of obtaining a high school diploma or GED. In addition, 11 clients earned a degree in higher education and 21 clients graduated from the program into permanent housing.

ColumbiaCare expands supportive housing offerings: As part of their ongoing commitment to provide supportive, independent housing to people with mental illnesses, ColumbiaCare Services opened a new facility in December 2022. Rogue Ridge Apartments includes 28 units of affordable housing to Jackson County residents in need, based on referrals from community partners. The property is staffed with a resident manager and daily support staff, and residents can access services including skills training, peer support and community navigation. Jackson Care Connect designated support to serve members living at the property.

Jackson County MAC focuses on shelter and rapid rehousing: In response to Governor Kotek's executive order to address the housing and homelessness emergency throughout the state, the Jackson County Multi-Agency Coordinating (MAC) group was convened by ACCESS, the community action agency of Jackson County. ACCESS is leading a very responsive group to increase new shelter beds and rehouse households. Jackson County was awarded \$8.5 million for the following agencies and projects:

- ACCESS, rapid rehousing supports
- City of Ashland, shelter housing
- City of Medford, shelter housing (urban campground)
- Community Works, rapid rehousing supports
- Rogue Retreat, shelter housing
- Options for Helping Residents of Ashland, rapid rehousing supports

Rebuilding Together Rogue Valley helps people stay/"age in place" in their homes:

Rebuilding Together Rogue Valley's Serving the Unserved program aims to serve populations that often don't meet grant eligibility requirements. They specifically are serving renters in this program. In 2022, they served 12 homes, and each client had at least one person with a disability, and some had more than one. Each client was over age 62.

Hearts with a Mission (HWAM) provides Safe Families for Children program: The Safe Families for Children (SFFC) program provides crisis services and respite, builds connections, promotes family reunification and strengthens safe families, and has the goal of diverting youth from state child welfare services. To date, more than 170 youth and families have been served by the SFFC program and have been provided 16,841 nights of shelter.

This program partners with other community organizations including Maslow Project, ACCESS and UCAN, as well as faith communities, school districts, DHS and law enforcement. It is continuing to grow with continued education and success stories around the state. HWAM provides case management and assessment for youth and their families on arrival, throughout a youth's stay and six months following exit. Via pre/post surveys, they capture and measure housing stability over time, and they provide resources and services to all who need them.

Rent Relief-St. Vincent de Paul: AllCare supported St. Vincent de Paul in providing rent relief through a community fund that was used to cover deposits in order to secure housing. If funds became available from the initial deposit they were then distributed back into the community fund for future tenants.

Fire Survivor Unmet Needs Table- United Way: AllCare funded the United Way of Jackson County to continue providing case management support for the still 360 open cases.

The Equity Project of Josephine County: AllCare supported a traveling panel of housing advocates and experts to present throughout Josephine County in order to deepen understanding of the housing crisis to Josephine County residents, through shared stories and lived experience in order to combat "Not in my Backyard" sentiment from community members.

Stakeholder Feedback

Rebuilding Together Rogue Valley helps make safety evaluations and improvements that allow people to stay in their homes:

"We paired these funds with funds from OCF and AllCare. Doing so allowed us to do more than just DME installation for a couple people. One of those clients was a veteran whose trailer was incredibly unsafe because there were holes in the floor that he could easily fall through. Additionally, his carpets were rotten and molded from the water coming in underneath. We were able to repair his floors and replace his carpet. So many people hear stories like that and think, "Why not just move?" The answer to that is complex but many people either aren't financially/physically able to move or, more often, they don't want to, because no matter how many issues they may have with their living space, it is all they know as home. Our job with these funds was not to tell any of our clients what a home looks like but to keep them safe in theirs for as long as possible."

Rebuilding Together Rogue Valley

Challenges and Barriers

Wildfires: Effects from the wildfires in 2020 are still felt and serve as a constant reminder, for community members and housing advocates alike, of the devastation and loss that occurred. In total, Jackson County lost approximately 2,600 housing units from the 2020 Almeda and Obenchain wildfires. Many of these were considered affordable housing and many residents remain displaced to this day. The loss of these units exacerbated an existing housing crisis, raised housing prices and placed additional burdens on local services agencies and CBOs. While significant efforts have been taken to address this issue and rehome displaced persons, many people remain displaced nearly three years later. Many of these people have been living in temporary housing situations all this time, as they attempt to overcome barriers to finding permanent housing. While the challenges have been great, the community need has led to a greater understanding of existing barriers in the health/service sector and has led, positively, to the development of new networks focused both on addressing current crises and preparing for future disasters, promoting community resilience.

Significant effort has been taken to address this issue and rehome displaced persons, and there is notable progress to report. Currently, there are 20 new housing projects underway, which will go towards increasing 2000+ units of housing in the Rogue Valley. Of those, half will go towards creating permanent housing. The remaining 50% of units will be divided between 30% for transitional housing and 20% for temporary housing respectively.

Jurisdiction	Total Residential Unites Destroyed	Building Permits Issued	Certificates of Occupancy Issues
Jackson County Almeda Fire	1,130	35%	18%
Jackson County South Obenchain Fire	47	51%	45%
Phoenix	553	58%	42%
Talent	840	50%	28%
Total	2,570	45%	27%

Capacity: Housing CHIP Networking Participants have shared collectively that the capacity to support housing efforts in southern Oregon is a significant challenge. Specific capacity needs are unique to each participant, however some of the most prominent challenges and barriers shared included:

- Limited multilingual/multicultural materials available
- Lack of transition support for those transitioning to safe housing
- Limited support for transportation to community services and events
- Need for more new developments to adopt accessible building techniques (this is compounded by current housing lacking features that support aging in place)

CHIP Networking participants also shares a lack of support for modifications and universal designs for building adaptable homes at the policy level.

60 Modular Homes Found to be Uninhabitable: In early June of 2023, about 60 modular homes of the 120 ordered for wildfire victims have been found to be uninhabitable. Replacing these homes could cost upwards of \$20-\$25 million dollars. Approximately 118 families have been told that their move-in date will be postponed indefinitely.

On the Horizon

Salvation Army in Jackson & Josephine County Transitional Housing: AllCare supported both Salvation Army locations in both Jackson & Josephine to provide transitional housing to 150 community members and families. Additionally, risk factor reducing services will be offered to nearly 5,000 additional community members through onsite navigation resources in order to keep individuals stably housed.

Age+ Circles of Care: AllCare supported Age+ with their Circles of Care volunteer program which will provide housing supports for older adults through matching them with a community liaison that will support them with various volunteer activities they would not otherwise be able to complete, thus allowing them to Age in place and maintain their current housing. Additionally, Age+ broke ground in Talent on May 5th 2023, for their new Housing and Services Initiative, which will deliver approximately 30 housing affordable housing units at 50-60% AMI for older adults.

Innovative housing designs and codes: Housing advocates and community members in southern Oregon have been involved in creating more universally designed and ADA-accessible homes. Partners including Habitat for Humanity and Rebuilding Together Rogue Valley have worked tirelessly to renovate and repair homes for residents in Jackson and Josephine counties. There has been a larger bottleneck in the construction of new, affordable housing in part to the expense and time it takes to build conventional, single-family homes. Innovative ideas such as manufactured housing (3D printing), along with developing new legislation from HB2001, will be key in informing decisions about new projects.

ARPA Funds: This funding represents an opportunity for property acquisition or infrastructure improvement related to housing and economic development.

AllCare Health Housing Summits: In May of 2023, AllCare held two housing summits. One summit invited Community Based Organizations that focus their efforts on housing and the other summit invited Behavioral Health providers throughout AllCare's service area to participate and strategize, plan about the Health Related Service Needs housing benefit that will occur with the 1115 waiver in 2024.

PRIORITY AREA 2: Behavioral Health

[Jackson & Josephine Community Health Assessment - pp. 17-25](#)

[Jackson & Josephine Community Health Improvement Plan 2019 - pp. 15-21](#)



Priority Area Overview

Informing Data: Youth have relatively high rates of alcohol and marijuana use, and adults have relatively high rates of smoking; substance use-related hospitalization rates are high for all substances; suicide rates and alcohol-induced mortality are high; a high percentage of youth have indicators of poor mental health such as signs of depression, consideration of suicide, and frequent mental distress; and there are high numbers of youth who report living with someone who is depressed or mentally ill, someone who is a problem drinker, or someone who uses street drugs.

Community Priorities: Mental health and substance use are among the top health-related concerns for community members; there is a high prevalence of depression and anxiety across the age spectrum, with concerns about ability to access mental health care services, limited availability of mental health providers, and stigma associated with seeking care; older adults, people experiencing homelessness, veterans, low-income families and individuals, and middle- and high-school aged youth are populations for whom mental health is of particular concern; and substance use issues of importance to the community include opioid use, methamphetamine use, and youth drug use, particularly the widespread use of marijuana among youth.

Key Concerns and Context: The key concerns include: the complex nature of the behavioral health care system and the need for system navigation and coordination; access and care continuity issues due to insurance gaps, particularly for Medicare, private insurance, and incarcerated/justice-involved populations; lack of parity with physical health in terms of investments and reimbursement; impact of public stigma and recurring trauma on people with behavioral health conditions; substance use disorder treatment system capacity and behavioral health conditions as a root cause of other regional community health issues such as communicable disease issues, homelessness, and childhood trauma.

SHIP Alignment: This regional Priority Area aligns with the Healthier Together Oregon 2020- 2024 SHIP priority area of Behavioral Health and has the potential to positively impact issues related to mental health and substance use.

Behavioral Health Priority Area - Strategic Goals

Goal 1: Mitigate the effects of trauma.

Goal 2: Decrease social isolation and loneliness in youth and older adults.

Goal 3: Equip our community with the knowledge, tools, and resources to empathetically accept and help individuals in need of behavioral health support.

Goal 4: Prevent use and misuse of substances.

Goal 5: Reduce harm associated with mental health and substance use through use of communitywide approaches.

Goal 6: Ensure access and coordination of care for people impacted by mental health and substance use disorders. Increase education about poverty and programs related to reducing poverty and its effects.

Key Data Point	Baseline Data	2021 CHIP Report Data	Current Data
Accidental Overdose Mortality Rate	2012-2016 Jackson County: 7.5% Josephine County: 6.0%	2016-2018 Jackson County: 17.22% Josephine County: 21.54%	2020 Jackson County: 23.7% Josephine County: 16.6%
Drug Overdose Hospitalization rate for All Drugs	2010-2014 Jackson County: 14.5% Josephine County: 12.8%	2018 Jackson County: 11.2% Josephine County: 13.6%	No current data
Percent 8th and 11th Graders contemplating Suicide	2016 Jackson County: 16.9% Josephine County: 21.9%	2019 (worse) Jackson County: 22% Josephine County: 23%	No current data
Percent 8th and 11th Graders attempting Suicide	2016 Jackson County: 9.6% Josephine County: 7.5%	2018 Jackson County: 9% Josephine County: 11.5%	No current data*
Suicide Rate per 100,000	2015-2017 Jackson County: 22.4% Josephine County: 29.5%	2018 Jackson County: 26.52% Josephine County: 40.39%	2020 Jackson County: 31.4% Josephine County: 31.2%

SOURCE: Mortality - Oregon Health Authority, Center for Health Statistics, Public Health Division, Death Certificates as cited by Opioid Dashboard, 2002-2006, 2007-2011, and 2012-2016 and 2019; Hospitalization - Oregon Health Authority, Center for Health Statistics, Public Health Division, Oregon Hospital Discharge Data as cited by Opioid Data Dashboard, 2010-2014 and 2018; Considering & Attempting - Oregon Health Authority, Student Wellness Survey, 2012, 2014, and 2016, and Oregon Health Teens Survey 2020; Suicide - Oregon Public Health Assessment Tool, Oregon Health Authority, Center for Health, and Oregon Death Certificates, 2015-2017 and Center for Disease Control.

*The Oregon Healthy Teens Survey has shifted to the Oregon Student Health Survey and does not include 11th graders for oral health data. The 2023 CHA will have a new baseline using available data.

Changes in Community

Our communities are experiencing increased behavioral health challenges as a result of an ongoing pandemic and prolonged wildfire devastation. Unfortunately, the behavioral health needs we identified in our Community Health Assessment have become even greater and we have not yet seen the full effects of these crises. The Improvement Plan priority areas and strategies have remained relevant yet most of our community workforce, manpower, resources, and time are still needing to be dedicated to the pandemic and recovery efforts. Our regional behavioral health agencies and providers have continued to struggle during these prolonged crises as well. Behavioral Health provider burnout, exhaustion and turnover has continued to worsen since the beginning of the pandemic. Behavioral Health agencies are finding it very difficult to manage workforce shortages, staff stress, scarcity of resources and the continued increases in administrative burden. While agency and provider resources are stretching too thin, there is an increasing demand from individuals, families, and communities on our Behavioral Health agencies to respond to the rising rates of substance abuse, overdose, crisis, youth depression and other behavioral issues sparked by the extended pandemic.

Contributing Community Partners

A list of community partners that have contributed to progress of our CHIP is included at the end of the report. Additionally, in Spring 2023, a partner report survey was administered, and partners shared updates with all in for Health on projects aligning with each of the priority areas. Those updates are provided throughout this report.

Efforts and Progress Made

Youth System of Care (SOC): The Jackson Youth System of Care's (JYSOC) intent is to help build "a spectrum of accessible, effective, community-based services and supports for youth health and well-being that are organized into a coordinated network; build meaningful partnerships with families and youth; and address their cultural and linguistic needs in order to help them thrive at home, in school, in the community and throughout life." In support of this work, JYSOC formed four critical shift work groups, and met regularly to work toward common goals. See more info on those groups in the parenting/family support section.

Jackson County Resource Network (JCRN): JCC partners with AllCare Health to ensure the successful launch of and facilitate the Jackson County Recovery Network (or the local Behavioral Health Resource Network). Jackson County was allocated just under \$17.5 million in funding to go to supportive employment programs, peer support mentoring and low-barrier substance use treatment. Eighteen organizations received funding for the JCRN awarded under Ballot Measure 110. Together the JCRN participants form a network of coordinated substance use treatment care that is accessible and supports our community. Many of the partners who received JCRN/BHRN funding provide updates below.

Behavioral health team hosts school summit: Jackson Care Connect and AllCare partnered on a behavioral health summit for Jackson County school districts on February 10, 2023. The event included keynote speakers on behavioral health in schools and special areas of concern, including the growing and alarming trend of substance use. This was a critical opportunity for schools to learn more about addressing the behavioral health needs of their students. It's also a chance for school leaders and provider representatives to network, collaborate and increase referral pathways.

This summit was a collaboration involving Oregon Health Authority, Oregon Department of Education, Jackson County Health and Human Services, Southern Oregon ESD, local behavioral health providers and Jackson County schools.

FNC provides mental health assessments for young children: Family Nurturing Center's (FNC) goal is to advance the standard of care for very young, traumatized children and their families by offering a range of evidence-based and evidence-supported interventions that allow them to respond to the diverse needs of the children of the Rogue Valley. At FNC, we are currently able to offer a range of evidence-based interventions for 0-5-year-olds who have experienced traumatic stress. We offer Child-Parent Psychotherapy (CPP), Attachment and Bio-behavioral Catch-up (ABC), and Parent-Child Interaction Therapy (PCIT), all of which are evidence-based interventions for the treatment of infants and young children who have experienced traumatic stress. Child-Parent Psychotherapy is an evidence-based trauma-specific treatment for children ages 0-5 who have experienced trauma, and their caregivers. Attachment and Biobehavioral Catch-Up is an evidence-based treatment for infants 6 months to 2 years old who have experienced early adversity, and their caregivers. FNC achieved:

- Percentage of MH assessments completed for children ages 0-5 that included screening for trauma: 100%.
- Percentage of MH assessments completed utilizing the developmentally appropriate DC:0-5™: Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood: 100%.
- Percentage of cases treated with Evidence-Based Practices specific to the treatment needs of Infancy and Early Childhood: 100%.

Options provides evidence-based trainings: Options of Southern Oregon partnered with Jackson County Mental Health to provide evidence-based trainings to partnering agencies and community members, to help them understand mental health challenges, and to equip them with skills to help a person experiencing a mental health challenge or crisis. In the past year, they hosted:

- Six Youth Mental Health First Aid (YMHFA) trainings.
- Six Adult Mental Health First Aid (AMHFA) trainings.

Six Applied Suicide Intervention Skills Training (ASIST) workshops. **OnTrack Rogue Valley/Oasis**

Pregnant & Parenting Women Program (PPW): OnTrack and Oasis received a grant from SAMHSA to help them launch the Pregnant & Parenting Women (PPW) program, with the goals to reduce substance use and increase health of PPW, partners and adult family members;

support sustained recovery; increase health of children; reduce adverse effects of substance use disorder on children; and to support reunification and preserve families. This is a four-year grant that involves collaboration between OnTrack, OASIS and Portland State University. They have enrolled the first five PPW in the program. The program offers services including emergency housing, addiction treatment, transitional housing, job counseling, life skills, parenting skills, and medical care for PPW, their children and adult family members.

Over the course of the five-year grant, the metrics are: the HOME Program will serve

- 30 PPW annually in residential treatment (to be included in Portland State Univ. evaluation)
- 45 minor children
- 10 Adult Family Members
- 30 additional PPW with outreach, outpatient treatment and harm reduction support

This will total 575 over 5 years. The program provides effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs. It offers language assistance to individuals who have limited English proficiency (LEP) and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

Set Free Services outreach programs: Set Free Services (SFS) provides food, meals, clothing, showers and laundry services to the homeless and working poor. SFS is an outreach program, and they refer people to appropriate resources to help them become self-sufficient. The food pantry serves 100–150 families each week, or 250–350 individuals. These individuals also receive services as needed.

Options for Southern Oregon’s drop-in services: Options continues to provide drop-in services for mental health and substance use disorder, with the goal for community members to be able to get behavioral health help when they need it and not have to wait. They have adopted the best practice of responding to an individual when there is an opportunity of readiness, and the provision of immediate access to services breaks down some barriers of entry into care. Same-day assessments and treatment planning are included in drop-in services.

VA Southern Oregon Rehabilitation Center & Clinics (SORCC): The Serious Mental Illness (SMI) Re-Engage program is designed to facilitate return to care for veterans living with serious mental illness who are experiencing an extended gap in receiving health care from the Veterans Health Administration (VHA). SMI Re-Engage identifies veterans with schizophrenia or bipolar disorders who received care from the VHA but have not received services for at least 12 months. Efforts are made to contact Veterans, assess their current status and needs, and invite them to return to VHA care or support their efforts to receive care in the community or in the community of their choice. The goal of this program is to act quickly to re-engage veterans in VHA medical or mental health care, with the hope that re-engagement in VHA health care will reduce the likelihood of poor outcomes, such as inpatient hospitalizations,

and will improve the health of Veterans through continued engagement in health care. The primary causes of death among people with serious mental illness are physical health issues, such as cardiovascular disease. SMI Re-Engage aims to ensure veterans with serious mental illness are receiving primary care as well as mental health care. National-based research findings demonstrate SMI Re-Engage contact is effective in returning veterans to care and suggests that SMI Re-Engage contact may be effective at reducing inpatient or emergency department care. Average re-engagement rate from outreach efforts over the past 3 quarters was 25% for VA SORCC.

Youth 71Five Ministries vocational training: 71Five is expanding its vocational training services, known as VoTech, to meet growing demand and to provide additional training tracks. To meet this demand, 71Five is opening additional vocational training space in Medford that can accommodate more students. 71Five has also begun construction on the additional vocational training center. Students that have graduated into the 71Five VoTech Pre-Apprenticeship cohort have had the opportunity for supervised hands-on training with construction at the new training center. These youth are receiving on-site experience while seeing their accomplishments as the building progresses. 71Five has goals to enroll 75 priority youth (age 16-24) into the VoTech Pre-Apprenticeship training, conduct 9 Pre-Apprenticeship cohort sessions, and provide case management and/ or mentoring for 75 marginalized youth through the grant year of 2023, and they are on track to achieving those goals. They have held 6 Pre-Apprenticeship cohorts, have had 31 priority youth enrolled, and case management and/or mentoring has been provided for 31 marginalized youth.

Since January 1, 2023, VoTech reported the following:

- 71Five VoTech conducted 6 Pre-Apprenticeship cohort sessions
- 31 priority youth have enrolled in 71Five vocational training
- A total of 12 students completed pre-apprenticeship training
- 4 students have moved into a paid apprenticeship position upon their VoTech graduation
- 93% of VoTech students said they had more hope for their future (2023 point-in-time (PIT))
- 67% of VoTech students said they were happier (2023 PIT)
- 87% of VoTech students said they had more people they could trust (2023 PIT)
- 60% of VoTech students said they were more interested in their education (2023 PIT)
- 79% of VoTech students said they try to make better choices (2023 PIT)

Drop-out prevention with Project Youth+: Through healthy, caring and stable mentoring, this program aims to find youth who are on the verge of dropping out of school and help them re-engage, gain skills, set goals and build a pathway for a healthy future. They use a variety of youth development strategies including mentorship relationships, coaching, social-emotional learning skills, community engagement, workforce preparation and family education. In our progress toward achieving their goal has been great, they have provided:

- **Check-in:** mentoring, coaching and social emotional learning is supported in these meetings with students. This included 427 freshman, 682 sophomores, 975 juniors and 1,153 seniors

- **Credit retrieval:** advisors provided 170 days of credit retrieval after school and school breaks sessions
- **Tours and conferences:** A total of 60 students participated in programs including college and industry tours at Crater Lake Electrical, OIT Tech Trek, Chemistry Science Day at Southern Oregon University, veterinarian tech program at Rogue Valley Humane Society, and the Cesar Chavez Leadership Conference at Southern Oregon University

The following metrics are measured by our caseload number:

- On track with credits
 - Freshman: 30%; sophomores: 80%; juniors: 30%; seniors: 90%
- Attendance improvements
 - Freshman: 100%; sophomores: 97%; juniors: 100%; seniors: 79%
- Behavioral related referrals:
 - 20% freshman with 10 referrals; 10% freshman with 20+ referrals, sophomores 21% with 10+ referrals, 10% juniors with 10+ referrals, 20% juniors expelled, 51% with 10+ referrals.

Recovery group serves emotional needs of fire survivors: The Jackson County Community Long Term Recovery Group (JCC LTRG) emotional and spiritual care (ESC) committee pools community resources to develop short-, medium-, and long-term strategies to help meet the needs of fire-impacted individuals, families and communities in recovery. The ESC prioritizes equity, culturally appropriate supports and trauma stewardship in order to build community resilience. The short-term supports ESC provides include the following:

- Emotional & spiritual care providers at in-person recovery events (anniversary, wildfire recovery fairs), with emphasis on bilingual supports at every event
- Direct care ESC support to survivors (care cards, rituals, support circles, house blessings, etc.)

Mid-Term ESC projects and priorities include:

- Spanish language-led Mental Health First Aid training
- Faith leader network trauma-informed disaster ESC trainings
- Survivor-facing workforce training/resourcing in trauma stewardship, motivational interviewing, mental health first aid and spirituality in disaster

Long-Term ESC Projects & Priorities:

- Collaborate with partners to expand local workforce pipeline specifically to increase number of culturally/linguistically appropriate mental health care providers for Latino/a/x survivors
- Policy work to fast-track bilingual providers certified/licensed in other states or countries. By linking local partners to state training, the number of bicultural/bilingual local facilitators trained to offer Spanish language Mental Health First Aid by 300%.

We also just received news that \$77,000 in funding has been granted to invest in clinical mental health services by and for the Latino/a/x community; 13 local wildfire survivor facing workforce participated in a one-day care and resiliency retreat.

Community Engagement Community completes report on listening sessions: The Crisis Response Network (CRN) was created in order to establish a project table with both professional service providers and at least 51% participation by lived experience representing populations from the following demographics: behavioral health diagnosis and/or experience with behavioral health services, poverty, LGBTQIA2+, people of color. The Community Engagement Committee (CEC), a subcommittee of the CRN, is dedicated to centering lived experience with using the crisis system. In 2022, the CEC conducted a series of listening sessions and 1-on-1 interviews to gather real-life experiences from people with lived experience in using crisis response. The full report is available on the website www.cecforjc.org, and community members are invited to share their feedback or get involved with the CEC. JCC helped the CEC produce a one-page summary of the report for distribution to the public and at events. The one pager provided highlights from the full report and shared information about the pilot project between Jackson County Mental Health and Mercy Flights on a new mobile crisis response program.

Compass House: Compass House is a clubhouse model of peer support that serves over 400 JCC members with severe and persistent mental illness (SPMI) per year. JCC provides funding for this low-barrier opportunity for members to access support as often as daily, with integrated educational and employment services, transportation, skill building and social support. Compass House recently completed the addition of a full-size industrial kitchen, which allows their members to learn and practice valuable skills to help them prepare for culinary careers.

Connect Oregon: AllCare and Jackson Care Connect have made large investments, both financial and ongoing staff time, in launching Connect Oregon, our Community Information Exchange (CIE), throughout the Rogue Valley. Behavioral health is a necessary partner in this work and continues to need technical assistance and support from CCOs and Connect Oregon to be able to fully participate. Like all initiatives and goals that need BH resources, staffing and other resource deficits continue to pose challenges for BH agencies. CIE especially requires BH staff to create a more robust referrals process, and to add staff to track/respond to these referrals when they have already spent resources and time building services that are immediately accessible to community members without referrals. Behavioral health providers are committed to working through these barriers and being accessible to community members and partners in this way.

Reclaiming Lives- Recovery Café & El Camino Seguro: Peer Support Specialists provide resource navigation, harm reduction, recovery planning and accountability in all stages in recovery. Recovery Café and its culturally specific Latinx serving program El Camino Seguro provides recovery circles, meals, social interaction, and opportunities to give back, as well as recovery and personal development classes, counseling, relapse prevention plans and training for leadership roles and career/education goal setting.

Stakeholder Feedback

Project Youth+ identifies students who are on the verge of dropping out of school and works with them to re-engage in classes and set goals.

“One of our seniors has had a very challenging year. He has been dealing with mental health issues that made passing classes and retrieving credits a challenge for him. He was passing all 5 of his classes right up to the end of the summer and then lost motivation due to the amount of makeup work needed in credit retrieval while letting a couple classes slip, which at the end he only passed 3 out of 5 classes. The student started off the second semester essentially non-existent at the school. The student was not attending at all, but he would maintain regular communication with his PY+ advisor. They expressed to the advisor that they were mentally sick and that school was the cause. The student intended to check himself into a mental rehab facility if their insurance would approve it. A couple of weeks went by as they waited for insurance approval, and during this time both PY+ advisor and school counselor explored the possibility of changing the diploma to a modified diploma. They set up a meeting with the student and his parents. The meeting was a success. He was approved for a modified diploma and agreed to come back to school! Since then, he has been in our office every day, and has been working on assignments and a 1 credit retrieval class. He has shared with us how relieved he is at the modifications to his graduation plan, and he is happy to know he can accomplish a graduation now. We are looking forward to getting him to graduation together and continuing to support him through the rest of the school year.

Project Youth+

Youth 71Five Ministries works with students to provide vocational training for in-demand jobs, and helps students connect with mentors and apprenticeships.

Kacey recently shared her experience with VoTech. She grew up with a high ACEs (Adverse Childhood Experiences) score, and circumstances led her to be a single teen parent residing in a group shelter with her baby girl. She had an interest in mechanics but didn't have the means to afford both training and childcare. She was introduced to 71Five VoTech, where she was able to receive hands-on training. The VoTech training hours allowed Kacey to consistently attend, with a limited need for childcare. After graduating from the program, she had interviews set up with business partners. She chose to pursue continued on-the-job training with a local auto shop. Kacey has been working there for over a year now, has received a rate increase, has her own apartment, and is now self-sufficient with no dependency on state assistance.

Youth 71Five Ministries

Challenges and Barriers

Many of the same challenges we faced throughout the pandemic and post fires remain. Our consistent behavioral health workforce shortages persist and have worsened in the prolonged pandemic era. Behavioral Health staff that have stayed in their jobs are asked to take on more duties to cover for unfilled positions. Staff burnout, sickness, family sickness, change/loss of family income, relocation, inability to work from home/remotely and lack of child care have remained common reasons for workforce reductions. Some coordinated efforts have begun to address historical BH workforce barriers like low pay, high demand, turnover, administrative burden, lack of access to education/training/higher education, difficulty recruiting clinicians to rural communities, and lack of housing. These will need to be long-term and coordinated efforts across OHA, CCOs, higher education institutions, funders, and BH providers to see a sustainable impact in these areas.

In addition, alarming and ongoing rise of substance-related overdose and death remain an area of high concern. Our partners in recovery, peer support, community service and health care advocates are tapping into limited resources and networks that are stretched thin to combat this evolving challenge.

On the Horizon

Comagine Health: AllCare supported Jackson and Josephine & Douglas Counties in incentivizing people who use stimulants to engage in harm reduction treatment services and reduce overdoses.

Grants Pass Sobering Center: AllCare Supported the Grants Pass Sobering Center which offers a safe sheltered space for those under the influence to avoid criminal detention, unnecessary emergency department visits and provides treatment referrals and transfers

PRIORITY AREA 3: Parenting and Life Skills

[Jackson & Josephine Community Health Assessment - pp. 49-53](#)

[Jackson & Josephine Community Health Improvement Plan 2019 - pp. 24-28](#)



Priority Area Overview

What we saw in the Community Health Assessment (CHA) data: Rates of child abuse and neglect are high; large numbers of youth and low-income adults report trauma and adverse experiences; a substantial proportion of households experience food insecurity; there are relatively high proportions of children living in poverty and school-age children experiencing homelessness; the percentage of three- to four-year olds enrolled in preschool is low; and median center-based child care costs are high relative to median income.

What we heard from the community during the CHA process: Cost of living is among the top issues that impacts community members; families feel a high degree of conflict between the demands of parenting and the demands of supporting their family financially; there is a lack of child care providers generally and affordable child care specifically. Concern about the cost of child care is especially felt among women and non-White members of the community; and parents feel that they have limited knowledge and skill for parenting, stigma around asking for help, and a lack of community connection for support.

Additional concerns and context from CHIP workgroup and stakeholder discussions: Families report living in unstable homes and neighborhoods, have limited access to nutrition and exercise, lack knowledge of available help, struggle to find and afford child care, and may feel unwelcome in their communities; many children lack a caring adult in their lives; and families are overburdened by requirements from each supporting agency and the lack of coordination among those agencies to be client-centered.

It is clear that families are struggling and resources are stretched incredibly thin in our area. One story during the CHIP development process detailed a home visitor noticing a calendar with multiple names marked on it for the month. When asked what all those names were, the client said those are the home visit appointments she had during the month. She couldn't remember what agencies they all were, but knew she had to be home for them. In an ideal world, every member of our community would be aware of what is happening to our most vulnerable neighbors, what role they can play to lend a hand, whether they are a business owner, student, or retiree, and how they can mobilize to improve the health and well-being of our community because families matter.

This regional Priority Area aligns with the Healthier Together Oregon 2020-2024 SHIP priority area of (1) Adversity, trauma, and toxic stress, and (2) Economic drivers of health and has the potential to positively impact issues related to abuse and neglect, living in poverty, incarceration, family separation, exposure to racism and discrimination, and food security.

High level strategies developed by the community to impact this Priority Area included:

Parenting & Life Skills Priority Area Goals

Goal 1: Families are nurtured and strengthened through the building of family protective factors.

Goal 2: Families have access to safe, affordable, and appropriate child care.

Goal 3: Families have ample healthy and affordable food.

Goal 4: Community-based organizations create a coordinated and collaborative service-delivery system.

Key Data Point	Baseline Data	2021 CHIP Progress Report Data	Current Data
Child abuse/neglect victim rate per 1,000 population (under 18)	2017 Jackson County: 19% Josephine County: 15.6%	2019 Jackson County: 15.9% Josephine County: 18.6%	2020 Jackson County: 15.7% Josephine County: 24.4%
Percent of 8th and 11th graders who report ever feeling they had no one to protect them	2016 Jackson County: 12.4% Josephine County: 18.7%	2018 Jackson County: 17.3% Josephine County: 18.6%	2020 Jackson County: 27.5% Josephine County: 24.5%
Percent students eligible for free and reduced lunch	2017 Jackson County: 16.9% Josephine County: 21.9%	2018-2019 (better) Jackson County: 51.4% Josephine County: 61.2%	2021 Jackson County: 58% (worse) Josephine County: 71% (worse)

SOURCE: Oregon Department of Human Services, Child Abuse and Neglect Data, Child Welfare Data Book, 2017 and 2019; Oregon Health Authority, Student Wellness Survey 2016, 2018, 2020; Kids Count Data Center, Oregon Department of Education.

Changes in Community

The effects of the COVID-19 pandemic and wildfires continue to significantly impact community members in the Rogue Valley and the needs outlined in the Parenting Support and Life Skills CHIP priority area.

Almeda Fire: It is estimated that 40% of the families in the Phoenix-Talent School District lost their homes and were displaced by the Almeda fire. 80% of students attending Phoenix Elementary School were left homeless. According to a survey of fire survivors conducted in early 2021 by SO Health-E, our Regional Health Equity Coalition, 35.8% of fire survivors are still in need of affordable housing, 23.9% are in need of financial support for continued recovery from COVID-19, and 17.4% were in need of basic supplies, such as food, water, clothing, hygiene supplies and household goods. In the wake of the fires, The Jackson County Community Long

Term Recovery Group stood up, providing support and resources to fire survivors. Fortify Holdings and Rogue Community Health, in partnership with ODHS, OHCS, and ACCESS, are focused on providing affordable housing units in Jackson County, prioritizing fire survivors. There are a total of four properties that will gradually be converted into apartments, providing residents with affordable housing and support services, critical to getting fire survivors into permanent housing. Stable housing is a foundation for children and families health and wellbeing.

Child care and early learning crisis in southern Oregon: Lack of child care continues to be a barrier for community members in accessing employment; it's a contributing factor in the labor shortage that was exacerbated by COVID and the fires. Child care costs for preschool-aged children increased and wait lists were long, with centers operating at full capacity. High-quality child care has been inaccessible for low-income families, leading to decreased economic stability and an increase in food insecurity. Child care remained an area of focus in 2022, along with free lunches and weekend food programs at selected elementary schools. In early 2023, Southern Oregon Early Learning Services conducted a survey to help understand the child care needs in our community. The goal of the survey is to collect data and share it with community support organizations, legislators and other community leaders to understand the current state of child care in our community, what is needed, what will it take to get there and what are the consequences for failing to address the crisis. Here were the results:

Current State of Child Care

Counties are considered child care deserts if fewer than 33% of children have access to a slot

Reach Rate (child pop 0-5 compared to available slots):

Ages 0-2: 12% for Jackson Co / 17% for Josephine Co

Ages 3-5: 31% for Jackson Co / 28% for Josephine Co

Ages 0-5: 23% for Jackson Co / 24% for Josephine Co

Reach Rate for families below 200% FPL:

Age 0-2: 4% for Jackson Co / 7% for Josephine Co

Age 3-5: 27% for Jackson Co / 22% for Josephine Co

Age 0-5: 18% for Jackson Co / 16% for Josephine Co

Food security: While addressing food insecurity was a small part of the final 2019 CHIP, there has not been an assessment conducted across the food system since 2013 to inform community-wide efforts. Jackson County continues to experience fallout as a direct result of the Covid-19 pandemic and the Almeda and Obenchain fires, and thousands of low-income residents were and continue to be disproportionately impacted. Part of this remains a lack of equitable access to healthy foods, critical to positive health outcomes, highlighting a need for an updated food assessment to inform the upcoming CHIP.

Contributing Community Partners

A list of community partners that have contributed to progress of our CHIP is included at the end of the report. Additionally, in Spring 2023, a partner report survey was administered, and partners shared updates with all in for Health on projects aligning with each of the priority areas. Those updates are provided throughout this report.

Efforts and Progress Made

Southern Oregon Success Innovation Network: The Southern Oregon Success Innovation Network was established in October of 2019. A design team of leaders from all levels of education and health care was recruited, a draft goal for regional collaboration was developed and 44 interviews with community members from all walks of life were held to get feedback on the draft goal. This feedback was then brought to our full network of over 68 partner organizations, schools and agencies. The network revised the draft goal and committed to it: by 2025, all parents and caregivers in Jackson County will have the knowledge, skills, connections and support needed for all of their children to enter kindergarten ready to thrive. The network then worked on and agreed on the critical shifts necessary, and from the four critical shifts, four new work groups were established to focus on the shifts, with strategies informed by the CHIP and the Strengthening Families framework.

As part of the critical shifts needed to achieve that goal, each work group set specific goals and each work group has made progress towards those goals. The preschool/K12 alignment work group has held two successful preschool/K12 summits focusing on Social/Emotional Learning and the transition from early childhood to kindergarten. The Early Childhood Supports work group is organizing a pilot project with UpTogether (formally the Family Independence Initiative) with 110 families in Jackson and Josephine counties. The Human-Centered Equitable Services work group helped to expand school-based health centers in Central Point and Rogue River School Districts. The Family Capacity for Resilience work group developed the Southern Oregon Family Advisory Council and is now working to distribute a reader-friendly parenting guide, "Help That Helps," developed by South Coast Together, our partner collaboration in Coos and Curry counties. Southern Oregon Success funded the Spanish translation of "Help That Helps" and worked with the Family Connection and Connect Oregon to place a QR code on the booklets to be distributed in our region. The QR code will take families to the Family Connection website with info and a link to Connect Oregon. The Family Advisory Council vetted "Help That Helps," leading to changes in the text, and did a three-month study of issues surrounding families accessing resources in our region. The council's findings and recommendations are being communicated to our southern Oregon legislators, our network design team and the state Early Learning Council. A new work group, a partnership with SOELS, CCRN and Rogue Workforce Partnership on the Early Childhood Workforce, organized a campaign to increase affordable health care coverage for ECE workers. Another new partnership, our Behavioral Health Workforce group, helped develop the micro-credential program in behavioral health with SOU/SOESD.

Rogue Valley Food Systems Network: In late 2022, Rogue Valley Food Systems Network partnered with Kitchen Table Consulting to begin the process of conducting a food assessment in the Rogue Valley to identify and develop a plan to address gaps across the food system. In early 2023, the Community Food Assessment Steering Committee, in partnership with Kitchen Table Consulting, hosted a Food Solutions Summit with approximately 100 attendees from across the food system. The summit held 9 breakout sessions focused on the following topics: Ag Inputs (Soil, Water, Industry Resources), Food Systems Infrastructure (Manufacturing, processing, storage and distribution), Production (farming, ranching, fisherfolk), Consumer Demand and Marketing (includes Agritourism),

Nutrition (Education and Access), Food Access and Food Insecurity, Emergency Food Resources and Resiliency, Advocacy, Outreach and Education, Labor and Employment, and Food Waste Management.

Healthy Start Block Party connects families to healthy resources: Getting kids ready for a new school year can be a daunting process, as there is a lot to take care of in a short amount of time. Knowing many local families have struggled with COVID, financial pressures, remote learning and more over the past few years, Jackson Care Connect partnered with the Medford School District (MSD), and together we designed a new event to help families. The Healthy Start Block Party included health screenings, free haircuts, school supplies, community resources and tasty food from local food trucks. The event was attended by more than 1200 people, and 40 community partners tabled or took part.

Family Nurturing Center opens the Growing Together Family Community Center: The Growing Together Family Community Center (GTCC) officially opened to the public at the end of 2022. Regular offerings include kaleidoscope play and learn groups, infant massage, GED, the diaper closet and connections to community resources and supports. Several partner agencies and allies also utilize this space for meetings. Help me Grow Josephine County Liaison is also located at this space, which increases access to more providers through referrals to Connect Oregon/Unite Us. Since opening the diaper closet, we have experienced consistent growth every month. Parents are also beginning to be referred to GTCC through other local agencies. The overarching goal is to steadily increase accessibility to free parent education and support. One way that FNC is hoping to achieve this is to continue to build awareness around the Unite Us platform and increase utilization of that system. The breadth of classes and resources offered at GTCC is often difficult to track. However, the Diaper closet has served 97 families to date.

Grandmas to Go rebuilds after pandemic: After almost three years of being unable to support families due to the pandemic, Grandmas2Go is focusing on rebuilding their base of volunteers through their "The Grandmas Are Back" promotion. G2G partners with Healthy Families, DHS and Southern Oregon Pediatrics. In April, as they are rebuild our program, the following metrics: we connected 14 families with a G2G Volunteer; we had 11 families on our waiting list; we had 4 families 'on hold'; we 'graduated' 3 families to our 'extended family' status; and we closed 5 referrals before intake. We expect these numbers to grow as we re-establish our presence in the community.

Grandmas2Go Family Coaches is disrupting the loneliness and isolation often experienced by senior women and by new mothers/families. The orientation our volunteers receive is based on evidence-based practices and best practices in infant and toddler care. Our volunteers are compassionate listeners and bring their wisdom and experience to mentor families. When we work with struggling families, we are finding their strengths and supporting their ability to grow and thrive as a family.

Doulas & Company expands offerings: Doulas & Company (formerly Rogue Valley Doulas) opened a new community center in July, with space for classes and private meeting space. Doulas & Company serves Jackson and Josephine counties and beyond.

The Family Connection provides parenting classes: The Family Connection trains parenting educators in evidence-based curricula (English/Spanish, culturally appropriate) to deliver parenting programs and workshops in Jackson and Josephine counties. Services are free to

families and funded by Oregon Parenting Education Collaborative. In the last year, The Family Connection provided:

- 18 multi-session evidence-based parenting programs including Active Parenting, Conscious Discipline, and Strengthening Families.
- 20 parenting workshops (in-person and virtual) for parents of children ages 0-5, 5-11, and 11-18.

Each program has a registration list of 40-50 parents, and 15-20 parents "graduate" the program by attending 70% or more of the program. Their online programs have proven highly popular, and they have a higher engagement rate than in-person classes. The Family Connection offers 4-5 programs and workshops each quarter, serving over 1,000 families. They also partner with Growing Together (in Grants Pass) and Doulas & Company (in Medford) to offer in-person programs.

CASAs of Jackson County provide consistent support: Court appointed special advocates (CASAs) act as the spoke of the wheel to bring needed and consistent services together for children involved in the child welfare system as a result of abuse and neglect. They bring the child's needs, history and current situation to the attention of the court, while making regular visits with each child in their placements, no matter where they are or how many times they change. As they advocate for youth from birth to 21, in some cases they also provide one-on-one mentoring to older youth, to ensure they are prepared to enter adulthood. CASAs seek ACEs evaluations for children and then follow through on implementing helpful therapy and other services. CASAs advocate for each child on an individual basis, considering their culture, sexual or gender identification, and abilities. CASAs help break through barriers to equitable medical, educational and safety needs of each child. As each child has already experienced a level of trauma, they focus on trauma informed advocacy. We also work closely with parent/s who are in recovery to ensure they feel supported and know their children are safe, while in care. When a child has a CASA, they have less than 1% chance of experiencing re-abuse, versus a 13% re-abuse rate without a CASA.

In 2022, 241 CASAs advocated for 641 children in Jackson County, giving 16,780 hours of time. We continued to recruit and train new CASAs, adding 40 to our corps, to help replace CASAs who resigned during COVID. CASAs receive extension core training, lasting 35 hours plus court observation; they must also complete an additional 12 hours annually of in-service training.

Familia Unida Bike Builders serves at-risk youth: Familia Unida Bike Builder's goal is to keep kids off the streets, out of gangs and off of drugs. They have more than 60 active youth participants in their program. Many of the participants have started getting good grades in school and have achieved goals in their personal lives. Since 2019 we have helped over 200 youth stay in school, keep up their grades, learn trades and be active good members of society, with 60 youth currently being served.

Southern Oregon Early Learning Services (SOELS): SOELS continues to serve as a system builder, bringing together community leaders from early childhood education, health care, K-12 education, social services, private sector business, and parents to build strong partnerships to create effective and aligned programs that promote school readiness and family stability. In the last year, SOELS worked on the following initiatives:

- Development of a parent advisory council for parents and caregivers with the following goals in mind: Meet and connect every month with other parents that have young children, work together to decide what families in our community need, provide trainings to help learn and improve leadership skills, learn how to ask local leaders and government officials to make changes, work together on projects to help families in our community, and work with the Early Learning Hub to improve support for families

Preschool Promise: SOELS continues to support preschool promise programs to create an inclusive, welcoming environment for all children and families, regardless of ability, family composition, culture or language and to support parents as partners in their child's learning and development.

Social Emotional Health: JCC and AllCare Health partnered across Jackson and Josephine Counties on the CCO Social Emotional Health metric to ensure that children from birth to age 5, and their families, have equitable access to services that support their social-emotional health and are the best match for their needs. This coordinated effort involved reviewing data, creating an asset map of social-emotional health services and capacity, engaging with community partners, and creating an action plan. Both CCOs collaboratively engaged with partners to gain their perspective and expertise around relationships with families with young children to inform how we support and improve social-emotional health services for children in our community. Southern Oregon Success, Southern Oregon Early Learning Services and LISTO were critical partners throughout the collaboration to ensure successful community engagement outcomes. We connected with cross sector partners including physical and behavioral health providers, community partners are families with young children. Additionally, we leveraged existing spaces such as the Southern Oregon Success Early Childhood Supports Workgroup, Early Learning Hub Governance meetings, Perinatal Task Force meetings, and other one on one and group calls. These meetings informed CCO action plans for 2023, and will provide an excellent foundation as we move through this glidepath metric.

Food Security Initiatives

Grants Pass and Rogue Valley Growers Market: Protein Bucks: In 2022, AllCare Health continues to support the Growers Markets in both Jackson and Josephine Counties in providing the widely successful Double Up Food Bucks Program. This allows individuals to use their SNAP funds at the Farmer's Market and receive a match in tokens with local vendors in order to double the amount of local, healthy foods they are able to purchase. Supporting both local businesses and creating more access to food.

Josephine County Food Bank: In 2022, AllCare continues to support the Josephine County Food Bank. This has been especially important this year as the emergency SNAP benefit allotment has ended and we are seeing many more requests for food.

Raptor Creek Farm-Planting Seeds: In 2022, AllCare supported a local farm in Josephine County which increases community understanding of food systems, promotes healthy lifestyles, increases access to healthy foods and creates strong and more resilient communities for low-income families, youth, and adults in Josephine County by providing a free summer garden club, healthy recipe food demonstrations at food pantries and monthly garden and healthy lifestyle workshops.

Stakeholder Feedback

The work at **CASA** supports children involved in the child welfare system and supports goals in the priority areas of Parenting Support & Life Skills, Behavioral Health and Equity.

'Chrissy' was adopted as an infant. She had a very difficult relationship with her adoptive parents and found herself in and out of residential reform schools throughout most of her younger years. Her grades were terrible, and she got into several fights. When she was 16, her adoptive parents decided they "had enough" of her, called the police, and asked the officers to "take 'Chrissy' away. It was soon determined that 'Chrissy' was being neglected and she was subsequently removed from the home and placed in foster care. As a CASA, I've had the opportunity to work with 'Chrissy' and help her grow. When we were getting to know each other, she said she liked to read. I started a routine with her in which I would buy each of us a copy of a book she chose; we would then read and discuss it. My hope was that reading would help prepare her for college, should she choose to go. We talked about her dreams and goals. She shared she wanted to go to college and study to be a high school counselor. As a retired university professor, I set up a meeting for her with some professors with whom I worked. 'Chrissy' was so excited to tour a college campus and talk about the classes she would take. I am thrilled to say that 'Chrissy' will start college in fall of 2022. Further, 'Chrissy' earned a 4.0 grade point average her final year of high school. On paper, and in practice, the role of a CASA is to advocate for a youth's best interest in the judicial system. And we do. It is important work. Foster parents have told me that CASAs are the one constant in a foster child's life. However, most CASAs do more. We take an active interest in the "whole child" and work to make their lives better, not just within the court, but also in their everyday existence. I am proud and humbled to have played a small role in helping 'Chrissy' construct a better future for herself – a future that she deserves.

-CASA Sarah, Names have been changed to protect confidentiality.

The Family Nurturing Center's Grandma's to Go program helps young people and older adults feel less alone.

"The following is a quote from one of our volunteers and another from one of our family's: One G2G volunteer who had resigned for health reasons reunited with her G2G family – a single mom and a toddler. The following is the text the volunteer shared with me regarding her reunion with her G2G mom and toddler: "Good morning G2Go: Savanna Hughes and I reconnected for her daughter's 2nd birthday Saturday, at the party - held at the Family Fun Center - where we couldn't stop talking to one another. She texted me at around midnight last night and we spent over 3 hrs. reconnecting. I am Savanna's "adopted mother" officially, and Ascillia's "Grandma2Go." I don't mean to be ultra-dramatic, but Savanna and I both agree that our relationship is as real as if I had actually given birth to her 23 years ago. We are closer to one another than I am to my own daughter Julie who turned 50 in October. I believe in God, but do not practice my faith publicly by attending any organized church activities - having said that, I honestly feel the reason I was born some 80+ years ago was to be Savanna's adopted mother, and Ascillia's "grandma2go." Thank you ladies for connecting us. I thought you needed to know." The following text is from a mom who is expecting her second child any day now: Hi Linda! I wanted to share some thoughts on our grandma2go Lynne. We just absolutely love her! She is endlessly positive and says nothing but kind and sweet things to Ever. Ever and both of us parents instantly felt comfortable letting them go out to play without any supervision. And honestly, we don't even do that with his own grandparents 😊😊😊 They are also wonderful people but they just do or say some things we aren't comfortable with. But Lynne is so fantastic and such a blessing and she has so much energy! She has a way of jumping right into the family and making herself at home while also having everyone so happy and comfortable that she's here. Ever never wants her to leave and when he wakes up from nap and she has left he is so mad ☐ He was already hugging her by the second day and he's usually more of a slow to warm type. We are so grateful to have her. And baby girl has not made her emergence yet, but hopefully soon. The My NeighbOR initiative was created as a response to COVID, and utilized as well as a response to the wildfires. The platform gave resource families and kinship families direct access to Every Child, streamlining the process of requesting support, tangible needs, and emergency assistance."

-The Family Nurturing Center

Unete Food Pantry: In 2022, AllCare supported Unete, a local seasonal farm worker and Latinx advocacy Community Based Organization support their culturally appropriate food pantry, as well as purchase a refrigerator, so that perishable food items could also be delivered to community members.

Maslow Project: In 2022, AllCare supported the Maslow Project and their food pantry, which offers case management services and resources to houseless youth.

Challenges and Barriers

School Completion: Southern Oregon has one of the highest school dropout rates in the country. According to Southern Oregon Early Learning Services (SOELS), Oregon ranks 46th in providing early learning services to 3-5 year olds and 48th in high school graduation. In our region, only 31% of children have early learning opportunities prior to kindergarten entry. Children living in households experiencing the stressors listed above tend to have language acquisition gaps compared to their peers experiencing fewer stressors. If a child does not have access to as much language and has not had a reading-rich environment, they may already be two grades behind by third grade. Third grade reading levels predict high school graduation rates. In grades kindergarten through third grade, students are focused on learning to read. Beginning in grade four, the focus shifts to reading to learn. A child who is already behind is less likely to catch up, more likely to feel they are not good at school, and more likely to drop out. Without the coordinated support of our system partners, that cycle is likely to repeat itself for generations.

A child's experiences during their early years shape the developing nature of the brain's architecture. Preschool experiences help children develop a wide range of skills in language, literacy, mathematics, as well as emotional and social competencies, all of which contribute to future success later in school. Strong evidence supports the value of one or two years of developmentally appropriate, high quality preschool education.

As mentioned above in changes in the community, Southern Oregon is experiencing a child care and early learning crisis. Below outlines what is needed to address the crisis, and consequences identified if we fail to address it. Funding remains a challenge, and it will take a coordinated effort across multiple sectors with committed stakeholders implementing solutions.

What is Needed?

- 19,035 children 0-5 in region
- 53% are below 200% FPL and cannot afford care
- 6,226 additional slots needed to provide access to 70% of 0-5 pop
- 4,669 of those slots would need to be subsidized for equitable access to child care

What Will it Take to Get There?

Using the Preschool Promise cost per child of \$13,650: **\$63,731,850 per year is needed for 4,669 subsidized slots**

What Are the Consequences for Failing to Address the Crisis?

Continued workforce shortages across all sectors. The overall workforce is comprised of families who need child care to work. 53% of families with children 0-5 are in poverty and could be staffing local businesses except they cannot afford child care due to the gap between entry level wages and the cost of providing child care. Businesses will continue to struggle to recruit and retain staff without financial support for child care.

Continued Decline and Destabilization of Child Care workforce. We have 18% fewer child care programs than we had pre-Covid. Many of those programs have empty classrooms because cannot find qualified teachers willing to work for low wages and also due to families being unable to pay for child care without assistance.

Child care is called out as a key stabilizer for education, health and economic prosperity of our state:

- Oregon Business Council Strategic Plan includes “make child care and early learning more accessible”.
- Our workforce board and ODHS self sufficiency partners have identified that soft skills – those directly tied to early social-emotional development - as the key ingredients needed for a successful employee. Employees can be trained to do the function of a job, but an employer cannot teach self-regulation and pro-social skills on the job.
- Southern Oregon’s Community Health Assessment has identified families having access to child care as a Community Health Improvement Plan Goal.

Investment in the next generation. Our K-12 research/science has identified high quality early learning prior to kindergarten as an indicator of SE regulation and subsequent academic success. **Cost SAVINGS over time.** 7-10% return on investment over the lifetime of children who experience high quality preschool.

On the Horizon

Southern Oregon Early Childhood Support Network helps families reach goals:

Southern Oregon Success's goal for the Southern Oregon Early Childhood Support Network and Southern Oregon Social/Emotional Wellness Network is to work with 70 families over the next several months on the development and implementation of Family Success Plans. They use best practices from the Strengthening Families framework, along with the proven effectiveness of navigators in helping families connect with resources. Southern Oregon Success is addressing health equity by prioritizing community partners who work with families that are disadvantaged. They will use the learnings from this process to expand the program to additional families going forward. **Youth System of Care (SOC) to launch pilot projects and feedback loops:** The Jackson Youth System of Care's (JYSOC) four critical shift work groups are examining the current state in our community for each area and work toward a desired future state. Following are goals and future work for each group:

- **Acute mental health and drug/alcohol services and supports.** This group partners with the Jackson County Recovery Network. Following feedback from youth and peer support specialists, the group created a plan to share the summary with providers and ask them to commit to actions that respond to the feedback. They will also provide an update of the survey and feedback to the youth council.
- **Whole-family approach, starting with early intervention and prevention.** This work group continues to research the Triple P—positive parenting program.
- **System coordination and knowledge.** The system coordination group has started testing their prototype of the JYSOC – What the Help! website. The website is organized like a decision tree to help users find what they need fast.

· **Support for schools.** This group will launch the behavioral health education support tiers (BEST) pilot project in September 2023 at Talent Middle School. BEST is a multi-tiered approach pilot project that uses existing supports to integrate schools into our region's system of care.

Community Food Assessment: The Rogue Valley Food Systems Network steering committee will be drafting a survey for producers, consumers and grocers as part of the food assessment data collection process. Additionally, they will be planning listening sessions and one on one interviews as part of the qualitative data collection. In fall 2023, RVFSN will release a request for proposal to identify a contractor to work with them from September 2023 through March 2024 to help summarize and aggregate all the data that has recently been collected, along with new opportunities for engagement to help inform the food assessment.

Social/Emotional Metric Work: CCOs, in partnership with CBOs and providers, will continue to collaborate on the state System-Level Social/Emotional Health Metric to develop a cross-sector collective impact approach with the goal of system and policy change and improved front-line services. Work around current and future action plans will inform and guide this system level change as we wait for efforts and data to be analyzed to measure the success of these efforts. This work will be done keeping stakeholders and community members at the forefront to ensure no undue burden with participating or sharing information. The work will be broadly shared upon completion recognizing the value of the lived experiences and data shared by the community.

PRIORITY AREA 4: Equity

[Jackson & Josephine Community Health Assessment - pp. 2-3](#)



Priority Area Overview

The CHIP was always intended to be a living document that is responsive to the needs of our communities as we learn more about the diverse range of needs and barriers faced by our residents and able to adapt as those needs change over time.

While the CHIP was developed with the understanding that all three priority areas would be viewed through an equity lens, the impacts of COVID and the wildfires on our communities have elevated the need for greater intentionality around equity in our work.

Based on community feedback since the CHIP was finalized and the strategic work of our leadership team over the past year, we recognize the immediate need for developing equity and addressing the lack of adequacy in our current systems. As of March 2022, the community has decided that Health Equity should become a new priority area for the CHIP.

Health Equity Strategic Goals

Goal 1: Remove barriers to accessing services and supports in our communities - especially those services intended to help our most vulnerable residents.

Goal 2: Address systemic racism and institutional bias within our region, be that current, historical, or developing policy.

What we saw in the Community Health Assessment (CHA) data

Based on 2012-2016 American Community Survey 5-year estimates, 60.2% of Hispanics in Josephine County had a high school degree or less compared to Jackson County (62.4%) and Oregon (62.8%). This is in contrast to the population overall of which 43.8% of the population in Josephine County, 39.6% in Jackson County, and 36.4% in Oregon overall had a high school degree or less.

Jackson County saw the largest percent increase in Hispanic or Latino population (18.7%) between 2007-2011 and 2012-2016 compared to Oregon (13.1%) and Josephine County (13.1%).

Access to and navigation of the health care system was identified as a concern among most focus group and interview participants. Participants spoke of the cost of care, in addition to finding culturally and linguistically appropriate care. Additional challenges discussed connecting all the different services needed by pregnant women, seniors, and those with multiple chronic conditions. Access issues were especially noted among rural communities.

Related to disabilities, 23.6% of respondents reported “availability of services for developmental disabilities” to be of high concern and 20.5% of respondents reported “accessibility of public transportation for residents with disabilities” to be of high concern.

This regional Priority Area aligns with the Healthier Together Oregon 2020-2024 SHIP's health equity framework by addressing (1) systematic racism and institutional bias within our community and (2) removing barriers to accessing services and supports in our community for our vulnerable residents, including BIPOC, Latino/a/x, LGBTQIA2S+, and those who live in the rural community.

High level strategies developed by the community to impact this Priority Area included:

Health Equity Priority Area Strategies

Goal 1: Remove barriers to accessing services and supports in our communities - especially those services intended to help our most vulnerable residents.

Strategies

1. Collect current data from affected populations and key leaders to assess needs and opportunities.
2. Identify organizations and groups currently addressing these issues and invite them to be part of the next CHA and CHIP planning processes, to develop goals and strategies that will be most effective in meeting these needs.
3. Implement policies and projects that positively impact these issues for marginalized populations. Projects may be related to the following or other issues:
 - a. Built environment
 - b. Educational outcomes and services
 - c. Employment
 - d. Legal needs and services
 - e. Health, oral health, and behavioral health access
 - f. Housing and homelessness

Goal 2: Address systemic racism and institutional bias within our region, be that current, historical, or developing policy.

Strategies

1. Collect current data from affected populations and key leaders to assess needs and opportunities.
2. Identify organizations and groups currently addressing these issues and invite them to be part of the next CHA and CHIP planning processes, to develop goals and strategies that will be most effective in meeting these needs.
3. Implement policies and projects that positively impact these issues for marginalized populations. Projects may be related to the following or other issues:
 - a. Address current bias
 - b. Address historical bias
 - c. Support developing policy that creates equitable opportunities for all Rogue Valley residents to thrive

Key Data Point	Baseline Data
Number of certified qualified internal staff interpreters in Southern Oregon on the OHA Health Care Interpreter Registry	5/31/2022 124
Percentage of LGBTQ+ individuals who feel unwelcome or provided misinformation in healthcare settings	10/20/21 57%

SOURCE: Rogue Action Center, LGBTQ+ Listening Project 2021; OHA Health Care Interpreter Registry.

Wildfires: So Health-E released a Jackson County report in 2021 that highlights the impact the Alameda Fire had on vulnerable populations around securing sustainable and affordable housing. According to the report, the majority of respondents of the survey self-identified as Hispanic or Latino/a/x; and at least 62.1% of Spanish speaking respondents said that financial barriers were one of their top concerns for finding affordable housing, compared to 44.2% English speaking respondents. 33% of the total impacted population said that they did not apply for FEMA assistance and 42% said that one of the reasons was because of the difficulty of navigating the FEMA paperwork.

LGBTQ+ Listening Project: In 2021, Rogue Action center released one of the first LGBTQ+ community surveys for both Jackson and Josephine County. This data highlights the disparities within this population, including information around their experiences in healthcare settings. According to the Listening Project, at least 67% of transgender people reported being made to feel ashamed or provided information in healthcare settings, compared to 57% of all LGBTQ+ who experienced the same thing. 91% of transgender folks reported feeling they need to hide/change their sexuality/gender/appearance to avoid harassment or discrimination. For youth, at least 86% of LGBTQ+ youth feel that they need to relocate to have a good life or have their needs met.

Covid-19: Covid-19 disproportionately impacted people of color in Jackson County. According to the Jackson County Health & Human Services in 2021, Hispanic or Latino had some of the highest percentages of cases. Of the total Covid-19 cases, Hispanic or Latino represented 26% compared to 13% of the total population. American Indian/Alaska Native, Black, and Pacific Islander, also saw higher than average numbers for covid-19 cases.

Contributing Community Partners

A list of community partners that have contributed to progress of our CHIP is included at the end of the report. Additionally, in Spring 2023, a partner report survey was administered, and partners shared updates with all in for Health on projects aligning with each of the priority areas. Those updates are provided throughout this report.

Progress and Efforts Made

Gender Affirming Care Trainings for Internal Staff and External Community Partners: In June 2023, AllCare provided trainings for internal staff as well as external community partners around the best practices for providing gender affirming care. The goals of the training was to: broadly define gender affirming care, discussed the societal context and considerations when working with transgender and non-binary clients, overview of OHP coverage and requirements for prior authorization, and how to write and address the requirements for surgery endorsement letters including diagnosing gender dysphoria and assessing readiness for surgical intervention. More training will be held in the future to support health clinicians.

Medford and Grants Pass Pride Parade: This year, Medford and Grants Pass will hosted their first Pride Parade to support the LGBTQ+ population. This event had activities and booths for community members to engage with and get information from. Some booths included information around gender-affirming community resources from local organizations.

SO Health-E: SO Health-E's Equity, Diversity and Inclusion workgroup designed and launched an additional survey to hear from local partners on what types of equity tools are most needed/wanted in Jackson + Josephine Counties. Respondents included organizations at every level of equity learning, planning, and implementation. It was identified that tools will be needed from the 101 level to resources for evaluation and support for those already deep in equity work. The topics that received the most interest include how to create targeted strategies to improve outcomes for marginalized communities/individuals, the role of data in equity work, and listening to and acting with community. The top modes of delivery include in-person workshops and trainings (28 votes) and activity toolkits (24 votes), followed by remote trainings/workshops (21 votes). The results of this survey will help inform SO Health-E's work, supporting organizations as they aim to develop policies and processes that positively impact issues for marginalized populations.



Consumer Credit Counseling Service: More than 80% of Consumer Credit's clients come from a low-income household, and the organization helps them restore their credit and learn financial management skills. Jackson Care Connect supported Consumer Credit's Financially Fit Women program, which offers low-income women free credit counseling and financial education services. This program is designed to serve people who are suffering a lack of stable housing, lack of affordable child care, food insecurity and overall family stress, due to the stressors of the pandemic.

Project Youth+ (formerly College Dreams) serves underrepresented youth with multiple risk factors for academic achievement gaps, high school dropout, and workforce barriers. Jackson Care Connect supported the Project Youth+ Whatever It Takes program, which specializes in catching youth on the verge of dropping out of school, to help them re-engage, gain skills, set goals and build a pathway for a health future. They connect students with a one-on-one professional mentor and a Project Youth+ advisor. Their work specifically targets marginalized or underserved youth, including LGBTQ+ youth, people of color, youth with disabilities, and youth in rural areas with high rates of generational poverty.

Rogue Valley Council of Governments (RVCOG): In the summer of 2022 RVCOG launched their expanding Service Equity Project to expand access to all their services. Staff have attended extensive training and they document in-roads into reaching LGBTQIA2S+, Latinx and rural clients. Their DEI work is integrated into everything they do, including collecting demographic data like number of clients serviced in each program, the number of service units per client/program participants, etc. Additionally, they take their Behavioral Health Programs into the participant's home to remove barriers to access (transportation, mobility, etc.). They are currently partnering with La Clinica to offer health promotion classes in Spanish, while RVCOG staff delivers those programs in English. To support language accessibility, they utilize a simultaneous translation service to communicate in the client's language of choice. Additionally, to address technology needs, they loan tablets and laptops for those who need them to participate in classes.

Rogue Food Unites first formed after the 2020 Alameda Fire, and the organization has been committed to supporting fire survivors with fresh, healthy food. Their new program, Neighbors Unite, provides no-cost farmers markets in four locations in Jackson County each week. The markets are strategically located to help reach fire survivors and others who have trouble accessing or affording fresh food items. Jackson Care Connect supported the expansion of this program

Language Access: AllCare continues to host and offer trainings for community partners throughout Southern Oregon to become qualified medical interpreters at zero cost. We also offer translation services to community partners for that need culturally appropriate materials for internal documents and external documents such as flyers.

Multicultural Fair: AllCare participated in Jackson County's 2022' Multicultural fair. Over 40 organizations were there to celebrate the diversity of Southern Oregon as well as offer resources.

Know your Member Benefits 101: In April of 2023, AllCare presented at SO HealthE in Spanish and explained to AllCare members how to make the most of their OHP benefits.

Stakeholder Feedback

SO Health-E helps highlight how social determinants of health intersect with an individuals' quality of healthcare.

“There are many barriers to health equity, we need to consider the social determinants of health. It's not just about access. It's about education, employment, etc. Ultimately, we want them to have a more fulfilling life (health is just part of that).”

SO Health-E

Challenges and Barriers

Health Equity Definition: There is no standard community-wide health equity definition that provides a foundation on how we address health inequities. Without a definition, it can be difficult to bridge divides between organizations and foster collaboration ideas on how to best support our most vulnerable communities, as each agency may have a different understanding around what health equity means. In March 2022, the community did take the first step in creating health equity as a priority area with preliminary goals and strategies. As we move into the 2023 CHA, we will have greater opportunities in creating common language and definitions that will enable us to partner together to address systematic racism, institutional bias, and the barriers that our most vulnerable population faces.

Health Equity Data: Health Equity data helps us identify where health disparities exist and what strategies should be used to support those populations. Having access to accurate, complete, and high-quality health equity data continues to be a challenge for many organizations, as they often rely on self-reporting from their members, or data being shared from other community partners. Many individuals in vulnerable populations may feel unsafe or uncomfortable because of historical trauma, experience with system racism and institutional bias. Many participants in previous attempts at health equity data identified as primarily white, which creates a significant gap of data from vulnerable populations and can skew and

hide health disparities in these populations. As such, the community is addressing ways of increasing the availability of high-quality, accurate, and complete, in order to better support the community.

On the Horizon

Sexual Orientation and Gender Identity Data: We are looking forward to the release of sexual orientation and gender identity (SOGI) data from the Oregon Health Authority. Currently there is limited available data for this given population and that has resulted in challenges on how we can be responsive to their needs. Right now, the community relies on internal data or data from community organizations such as Rogue Action Center's listening project.

2023 CHA: In addition to the efforts already defined in this report, we recognize there are additional agencies and stakeholders who support marginalized communities and address systemic racism and institutional bias that could be invited to share input around community needs. We are strengthening our relationships with those stakeholders, and will capture their efforts in the next CHA report. With additional input and guidance, we will be able to solidify the health equity strategies in our 2024 CHIP.

AllCare Community Health Improvement Plan Addendum

The AllCare Jackson and Josephine/So. Douglas Community Advisory Councils requested that two additional priority areas be included as an addendum to the Jackson & Josephine Community Health Improvement Plan 2019: Oral Health and Health Equity. The Progress Report on those two priority areas are included below.

PRIORITY AREA 5: Oral Health

[Jackson & Josephine Community Health Assessment - pp. 97-98](#)

[Jackson & Josephine Community Health Improvement Plan 2019 Addendum - pp. 4-5](#)



Priority Area Overview

What we saw in the Community Health Assessment (CHA) data: While Oregon only has a 20.7% coverage rate of fluoridated drinking water, Jackson and Josephine/So. Douglas Counties each have a 0% coverage rate; Jackson and Josephine/So. Douglas Counties had

significantly lower rates (62.8% and 62.3%, respectively) of dental visits in the past year, compared to Oregon at 66.8%; and while both counties reported higher rates of adults with one or more permanent teeth removed due to disease or decay, this was especially prevalent in Josephine/So. Douglas County (14.7% higher than Oregon).

Additional key concerns and context from stakeholder discussions: Oral health is an important piece of the CHIP work going forward. While not specifically called out in the collaborative CHIP, the AllCare Community Advisory Councils felt it needed to be included for our organizational CHIP.

This regional Priority Area aligns with the Healthier Together Oregon 2020-2024 SHIP priority area of Access to Equitable Preventive Healthcare and has the potential to positively impact issues related to provider shortages, transportation barriers, or health care costs.

High level strategies developed by the community to impact this Priority Area included:

Oral Health Priority Area Goals

Goal 1: Integrate Oral Health services into the medical, behavioral health, and residential treatment facilities.

Goal 2: Increase community awareness of the importance of oral health as a factor in overall health and wellness.

Key Data Point	Baseline Data	2021 Progress Report Data	Current Data
11th Grade students visiting a dentist in the past year	2017 Jackson County: 73.4%	2019 Jackson County: 80%	2020 Jackson County: 76%
	Josephine County: 68.5%	Josephine County: 76%	Josephine County: 84%

SOURCE: Oregon Health Authority, Oregon Healthy Teens Survey, 2017, 2019, and 2020.

Changes in Community

Many partners contributed to the focus on increasing access to Oral Health care in Jackson and Josephine Counties during the reporting period. While the COVID-19 pandemic continued to stifle the efforts of the dental partners attempting to identify kids that needed dental services since many of them only receive them in the school setting, the workforce shortages that we are experiencing in 2022-2023 only exacerbated the problem. We are making strides the school systems to do oral health screenings, fluoride varnishes and referrals to treatment.

Contributing Community Partners

Our community remains very committed to the importance of oral health as a part of overall health and now that the Pandemic seems to have taken a rest, dental offices are still trying to catch up and still continue to see longer wait times due to the staffing shortages. Coordinating and collaborating with the partners to see patients at the physical and behavioral health facilities is still very important so we can “meet people where they are.” Contributing partners are listed at the end of this report.

Progress and Efforts Made

Integration of Oral Health Services: One of our goals was to “Integrate oral health services into the medical, behavioral health, and residential treatment facilities.” We have integrated an Expanded Practice Dental Hygienist (EPDH) into Options for Southern Oregon in Jackson and Josephine County where physical health and behavioral health are both present. The hygienist has a schedule of patients and also is able to take warm handoffs from the Family Nurse Practitioner as well as the Mental Health Therapists. She has truly been integrated as one of “the team” at Options. She continues to have many success stories of how she has helped people with their oral health needs and we try to ensure a closed loop referral system is in place. Many times the patients don’t follow up so we do phone calls to engage the members to come to their appointments. In 2023 we also began introducing the Connect Oregon/Unite Us platform to the dental partners in hopes they can utilize the benefits of that referral system if needed.

Increasing Community Awareness: The second goal was to “Increase community awareness of the importance of oral health as a factor in overall health and wellness.” In 2023, this goal was a little bit more challenging due to the exiting workforce and staffing shortages, however, the hygienist at Options for Southern Oregon and Grants Pass clinic continues to educate her patients on every aspect of oral health and especially the importance of follow up visits to the dental home. The dental offices, community partners and CCO’s have been instrumental in supporting the communities through HB 4127 which will implement an oral health curriculum in every school and ensure that instruction of the importance of oral health will be just as important as physical education. There are sub committees that are working to start developing the curriculum and hope to have this in place by 2025. There is also the continued work in the schools and Head Start programs to ensure everyone recognizes the importance of oral health to overall health.

Stakeholder Feedback

Oral/Behavioral Health Integration works to bring oral health services into medical, behavioral health, and residential treatment facilities.

"I am thankful I can help this underserved population in mental and behavioral health. There are so many stories to share as each person comes through the door. We just never know when one of our family members or people we know could be in this situation with needs for Dental and Mental Health! I communicate to all my patients I am here to help them, not judge them. They are usually embarrassed of the condition of their mouth, but we move past the mouth and to the person as a whole!"

— Kelli Beaumont, RDH, EPDH, Capitol Dental Care

"Being able to serve members in a behavioral health setting, where folks are used to coming for counseling, makes them feel more at ease and comfortable seeing the Expanded Practice Dental Hygienist (EPDH). It is in these settings that they are able to be heard and get their dental concerns taken care of. Folks suffering from mental health issues tend to have more oral health issues. Providing integrated care can help these members restore their oral health as well as their confidence and overall health."

— Linda Mann, RDH, EPDH, Director of Community Outreach, Capitol Dental Care

Challenges and Barriers

Hygienist Integration: In 2022/2023 we have continued to integrate a hygienist into Options for Southern Oregon in Jackson and Josephine County, but have had to scale back on her days at the clinic due to workforce shortages. We continue to work on ways to collaborate with the schools, HeadStart programs, physical health, and behavioral health, and residential programs as we know the need for oral health services is high. For some people, this is the only setting where they receive dental services.

On the Horizon

We continue to be hopeful that operations will return to normal in the oral health world and we can once again begin to look at furthering our integration efforts. We have already completed a bit of that work by placing the hygienist into Options for Southern Oregon in Jackson and Josephine Counties. We also are working on implementing an integration of a hygienist into the AllCare Medical Clinic in Glendale to serve the Southern Douglas County residents.

Community Partners working on initiatives for the Jackson & Josephine Collaborative
Community Health Improvement Plan 2019

Pink boxes means that organization participated in activities for that Priority Area.

All in For Health Priority Areas: Housing, Behavioral Health, Parenting & Life Skills

All Care Only: Oral Health, Health Equity

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
ACCESS					
Addictions Recovery Center					
Aging and People with Disabilities					
AllCare Community Advisory Council					
AllCare Community Foundation					
AllCare Health					
Asante					
Bridging Communities					
Capitol Dental Care					
Care Oregon/JCC					
Cave Junction City Council					
CCO CACs					
Center for Nonprofit Legal Services					
Children's Advocacy Center					

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
Choices Counseling Center					
City of Ashland					
City of Grants Pass					
City of Medford					
College Dreams/Project Youth Plus					
Columbia Care					
Common Connections					
Community members including medicaid members and impacted persons with lived experience					
Community Mental Health Programs					
Community Works					
DHS					
Every Child Josephine Co.					
Family Nurturing Center					
Foster Grandparent Program					
Four Way Community Foundation					
Federally Qualified Health Centers					
Grants Pass Chamber of Commerce					

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
Grants Pass Housing Advisory Committee					
Gordon Elwood Foundation					
Governor's Regional Solutions Team					
Health Care Coalition of Southern Oregon					
Hearts with a Mission					
HIV Alliance					
Housing Authority of Jackson County					
Jackson Care Connect					
Jackson County CASA					
Jackson County Continuum of Care					
Jackson County Mental Health					
Jackson County Public Health					
Jackson County Public Health Syringe Exchange Program					
Jackson County SART					
Jackson County Sheriff's Department					
Jackson County Suicide Prevention Coalition					
Jackson County WIC					
Jefferson Funders Forum					

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
Jefferson Regional Health Alliance					
Josephine Community Libraries					
Josephine County					
Josephine County and Collaborative Josephine County Suicide Prevention Task Force					
Josephine County Continuum of Care					
Josephine County Healthy Start					
Josephine County Housing Development Committee					
Josephine County Public Health					
Josephine county WIC					
K-12 systems					
Kairos					
La Clinica Health Center					
LCDC					
Local Mental Health Authorities					
Maslow Project					
Max's Mission					
Medford Police Department					
Mercy Flights					

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
NeighborWorks Umpqua					
Oregon Health Authority					
OnTrack					
Options for Southern Oregon					
Oregon Child Development Center					
Oregon Health Insurance Marketplace					
Oregon State University and Extension					
Phoenix Counseling					
Providence					
Public Health Departments					
Public Safety					
Regional Solutions					
Rogue Action Center					
Rogue Community College					
Rogue Community Health					
Rogue Retreat					
Rogue Valley Council of Governments					
Rogue Valley Fellowship					
Rogue Valley Food Systems Network					

Organization	Housing	Behavioral Health	Parenting & Life Skills	Oral Health	Equity
Rogue Valley Mentoring					
Rogue Valley YMCA					
School-Based Health Centers					
Siskiyou Community Health					
SO Health-E (Health Equity Coalition)					
Southern Oregon Early Learning Hub					
Southern Oregon Education Service District					
Southern Oregon Head Start					
Southern Oregon Pediatrics					
Southern Oregon Success, Regional Collective Impact Agency					
Southern Oregon University					
Substance Use Disorder providers					
The Arc					
The Family Connection					
UCAN					
Veterans Administration					
Worksource Rogue Valley					



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