

Oregon System of Care 2026 – 2029 Strategic Plan

NOTE: this is a content only draft, the final strategic plan will include fun and engaging layout and colors.

SOCAC

System of Care Advisory Council

A Letter from the System of Care Advisory Council

Dear System of Care Community,

The System of Care Advisory Council (SOCAC) was established in 2019 by the Oregon legislature to provide oversight for Oregon's System of Care. Central to the formation of the Council was the creation of a vision and strategic plan to guide system improvements. Oregon's first System of Care Strategic Plan was released in 2021, and since then, the Council has continued to assess, refine, and strengthen its approach. In spring 2023, the legislature extended the Council's timeline for strategic planning, allowing us time to complete a comprehensive system assessment and engage deeply with youth, families, providers, and partners throughout the planning process.

The Council is proud to offer our newest plan, which outlines our strategic priorities for 2026 - 2029. This plan was co-created by, with, and for youth and families who shared their lived expertise and vision for a system that meets their needs. It is a doable and impactful plan—designed to take small but meaningful steps to set the foundation for transformational change. It acknowledges the urgent need to address systemic inequities created by the birth-to-prison pipeline that too often impacts Oregon's children and youth, particularly Black, brown, Tribal, LGBTQ+, and young people with disabilities.

The Council is continually humbled by the youth and families who bravely step into this work, advocating not only for themselves, but for future generations who will enter the system. We are equally grateful for the state agency partners, providers, and community advocates who continue to show up with commitment and vision. While SOCAC is a convener and holder of accountability, we know that real change requires collaboration across the entire state.

We invite you into this work. Here are some ways to engage:

- [Attend or listen to a Council or Committee meeting](#)—all are open to the public, and public comment is welcome.
- [Become a voting member of a committee](#). Youth and family members may be eligible for compensation for their participation.
- [Sign up for our listserv](#) to receive updates about the Council and system of care efforts.
- Connect with the [Regional System of Care](#) in your area to learn more and get involved locally.

This plan is a living document. While it is grounded in practical and achievable steps, it carries a vision of equity, healing, and transformation. We reaffirm our shared responsibility to create a system that honors and uplifts all youth and families.

With gratitude and determination,
Adam Rodakowski and Annette Majekodunmi
SOCAC Co-Chairs

Table of Contents

A LETTER FROM THE SYSTEM OF CARE ADVISORY COUNCIL.....	2
EXECUTIVE SUMMARY	4
BACKGROUND AND CONTEXT	7
THE PURPOSE	10
THE PROCESS	11
THE FRAMEWORK.....	15
THE STRATEGIC PLAN	18
GOAL I: IMPROVE ACCESS TO COORDINATED, INTEGRATED, AND COMMUNITY-BASED SYSTEMS OF CARE.....	18
GOAL II: PROMOTE THE CO-CREATION OF EQUITABLE POLICY AND SYSTEMS BY PROVIDERS AND THE YOUTH AND FAMILIES THEY SERVE.	20
GOAL III: CREATE SUSTAINABLE INFRASTRUCTURE THAT INCREASES THE SYSTEM OF CARE’S CAPACITY AND CREDIBILITY.	22
GOAL IV: TRANSFORM THE SYSTEMS THAT SERVE CHILDREN, YOUTH AND FAMILIES.	24
THE IMPLEMENTATION PLAN.....	26
YOUTH AND FAMILY PRIORITIES	27

Executive Summary

Per [ORS 418.979](#), “the primary duty of the SOCAC is to develop and maintain... a comprehensive, long-range plan for a coordinated state system of care.”

The System of Care philosophy requires that services and supports be family-driven and youth-guided, with the strengths and needs of the family determining the types and mix of services and supports available. This serves as the guiding principle for the 2026-2029 SOC Strategic Plan.

SOCAC worked closely with youth and families to co-create this plan, following a four-step process.

- *Gather*: SOCAC collected quantitative and qualitative data from youth, families, system partners, state agencies, and local systems of care. SOCAC reviewed past and current reports and documents, and related strategic plans.
- *Synthesize*: SOCAC used this information to identify themes and develop a draft strategic plan consisting of a vision, mission, goals, and strategies. Strategies are supported by a series of underlying activities in the complementary implementation plan, and indicators and process measures were identified to measure progress.
- *Verify*: SOCAC ensured the plan was both aligned with shared values and responsive to the expressed needs and ideas of youth and families. SOCAC sought additional feedback from system partners, state agencies, and local systems of care.
- *Finalize*: SOCAC incorporated feedback gathered during the public comment period and ratified the 2026-2029 SOC strategic plan December 2025.

Framework

Vision: An Oregon where all children, youth, and families—across all backgrounds—are safe, well, thriving in their homes and communities, and supported by responsive and affirming systems designed with and for them.

Mission: To drive and organize system change that centers youth and family lived-experience, advances community care, and eliminates barriers across systems through collaboration, accountability, equity, and advocacy.

Core Values: To ensure fidelity to the Systems of Care Philosophy, all elements of the strategic plan were filtered through these values:

- Center children, youth, and families
- Increase awareness and reduce stigma
- Promote sustainable change

- Prioritize community care
- Advance equity by improving accessibility, affordability, and quality

Strategic Indicators: The following indicators will serve as general benchmarks for the Oregon System of Care:

- Increase % of youth reporting they have a safe place or person they can go to outside of school
- Decrease % of youth with an unmet mental health care need
- Decrease % of youth with substance use disorder
- Increase # of youth receiving treatment and services at home and in community
- Decrease the % of youth boarded (stays longer than 24 hours) in an emergency department
- Increase % of system-involved youth who complete high school
- Reduce the rate of suicide attempts among youth
- Decrease involvement with child welfare and juvenile justice systems
- Increase % of families reporting a well-functioning system of care

Goals and Strategies

Goal I: Improve access to coordinated, integrated, and community-based systems of care

Strategy 1: Increase services that are respectful and responsive to all cultural beliefs and practices, disabilities, and preferred and necessary languages tailored to lived experience.

Strategy 2: Break down known barriers to better coordinate, integrate, and promote community-based care.

Strategy 3: Support youth and family engagement in their care through shared decision-making that emphasizes dignity, inclusion, and support.

Goal II: Promote the co-creation of equitable policy and systems by providers and the youth and families they serve

Strategy 1: Engage with youth and families in an affirming, honoring, and restorative manner.

Strategy 2: Write and implement policies, procedures, and accountability practices that are respectful and responsive to all cultural beliefs, practices, disabilities, and preferred and necessary languages with youth and families.

Strategy 3: Improve the integration, coordination, and efficiency of data-sharing that informs policy and practice across the system with regular reports to and feedback from youth and families.

Goal III: Create sustainable infrastructure that increases the System of Care's capacity and credibility

Strategy 1: Build SOC capacity and sustainability through policies, procedures, and Memoranda of Understanding (MOUs).

Strategy 2: Improve SOCAC and Local SOC coordination through increased partnership, support, and information sharing.

Strategy 3: Strengthen SOCAC membership through improved member support and member relations.

Strategy 4: Make SOCAC a trusted data resource by modernizing the SOC Data Dashboard.

Strategy 5: Increase SOCAC capacity through additional staff, technological improvements, and infrastructure.

Goal IV: Transform the systems that serve children, youth, and families

Strategy 1: Create a shared understanding of Oregon's current System of Care and why it needs to be transformed.

Strategy 2: Engage in strategic facilitated conversations with key partners, youth, families, and communities to create a shared vision for a transformed Oregon System of Care.

Strategy 3: Using this shared vision, create a transformative model for Oregon's System of Care.

Strategy 4: Access the support and resources necessary for this transformative model for Oregon's System of Care.

Strategy 5: Create a Cohort to pilot the implementation of the new transformative model and include mechanisms for youth and family feedback and quality improvement.

Implementation

Successful execution of this strategic plan requires coordinated action, vigilant monitoring, and continuous adaptation. SOCAC will provide annual reports to youth and families, the legislature, and the System of Care.

Background and Context

The Oregon System of Care (SOC) Philosophy

System of Care is a philosophy based on cross-system collaboration that supports youth and families who have complex and significant behavioral and mental health needs. Senate Bill 1 (2019) (codified at [Oregon Revised Statute 418.976](#)) defined system of care as

“a coordinated network of individualized services and supports to youth that:

- *Integrates care planning and management across multiple levels of care*
- *Recognizes disability as a natural and healthy part of the human experience*
- *Is culturally and linguistically competent*
- *Is designed to build meaningful partnerships with families and youth in the delivery and management of services and the development of policy*
- *Has a supportive policy and management infrastructure at the state and local levels, and*
- *Is community-based with relationships at the local level.”*

“System of Care” refers to Oregon’s governance structure, shared values and philosophy.

The **system of care** refers to the continuum of services and supports provided to youth and their families.

Under this approach, services and supports are family-driven and youth-guided, with the strengths and needs of the family determining the types of services and supports provided. A system of care is community-based, with services, supports, and system management housed within a supportive, adaptive infrastructure of processes and relationships at the community level. A system of care is culturally and linguistically responsive with agencies, programs, and services that reflect the cultural, racial, ethnic, linguistic, and unique differences of the populations they serve. The system of care should also address the unique strengths and needs of rural communities, as these areas present geographic challenges and cultural nuances not found in more populated areas of Oregon.

While a functioning system of care is dependent upon healthy and stable community supports like affordable housing, healthy food, access to transportation, and financial stability, Oregon’s SOC does not address universal or primary prevention strategies. Instead, this plan relies on partnerships with prevention-focused agencies and non-profits to lead that work.

System of Care Governance Structure

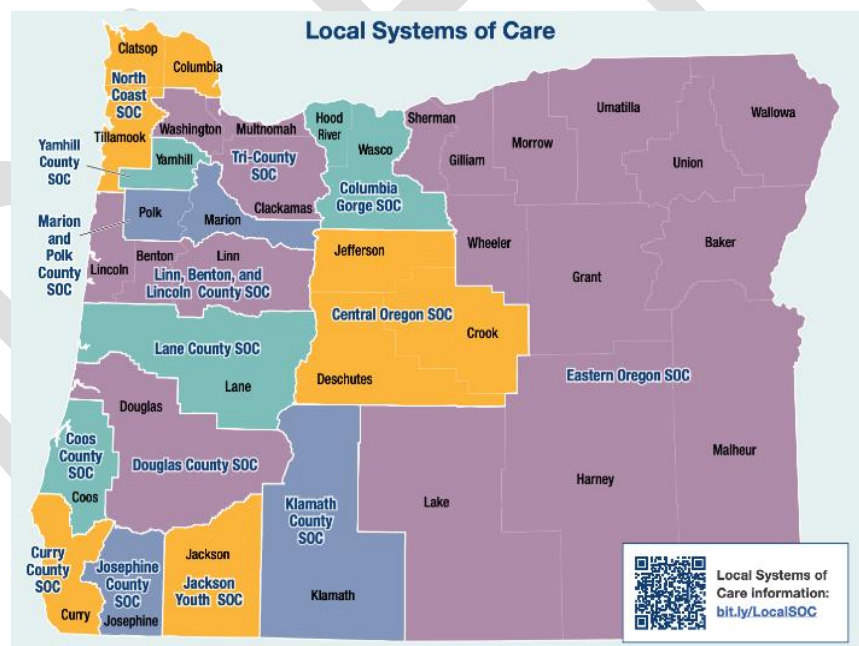
Oregon's System of Care is guided by two different types of governing bodies: the statewide System of Care Advisory Committee (SOCAC) and Local Systems of Care (L-SOCs). These entities must work in lockstep to strategically improve Oregon's system of care.

SOCAC

The SOCAC was established by [Senate Bill 1 \(2019\)](#) to improve the effectiveness and efficacy of the statewide system of care that provides services to youth from infancy through 25 years old. SOCAC is charged with providing a centralized and impartial forum for the development of statewide policy, planning, and funding recommendations. The primary duty of the Council is to develop and implement a comprehensive, long-range plan for a coordinated system of care encompassing all child-serving systems, (including public health, health systems, child welfare, education, juvenile justice, and services and supports for behavioral health and people with intellectual or developmental disabilities).

L-SOCs

Local Systems of Care are required via Coordinated Care Organizations contract and exist in all Oregon counties. L-SOCs convene youth, family members, and representatives of child-serving agencies to identify and resolve system barriers. Feedback about system barriers is regularly provided from the L-SOCs to the SOCAC. L-SOCs are critical partners in Oregon's System of Care.



Priority Populations

Per [ORS 418.979](#), the Council’s legislatively defined focus is to improve systems that serve children and youth, who have or are at increased risk for complex behavioral, emotional, physical, or developmental conditions, and who are under supervision by or engaged with multiple systems or are at risk for involvement in those systems, from infancy through age 25.

SOCAC acknowledges the harm and systemic oppression of historically marginalized groups at the hands of Oregon’s governmental institutions and system partners. These systems include education, child welfare, criminal justice, health and disability services, and other systems where an overrepresentation of marginalized populations exists. Of particular concern are Black and brown families of historically marginalized communities, LGBTQ+ youth, and Tribal children and families.

Because of inequity and systemic racism, these communities are less likely to be served by upstream systems and services like behavioral health and I/DD, and more likely to be involved or overrepresented downstream, in systems like child welfare and the juvenile legal system.

Achievement of equitable systems requires application of the birth to prison pipeline framework and redressing the cascading disadvantages that stem from racial and socioeconomic disparities. These factors include poverty, inadequate health care, educational inequity, school discipline policies, parental incarceration, and involvement with the juvenile legal system.

To center its value of equity and meet its legislative obligations, SOCAC turned to data to identify populations facing the most barriers and exhibiting the most concerning outcomes in Oregon’s Systems of Care.

SOCAC analyzed the [2025 SOC Data Assessment](#). Groups identified as over- or underrepresented in a manner indicating a disparity were tallied. The Strategic Planning Core Team identified five priority populations based on the frequency of identified disparities and historical context. Youth and family members of these priority populations were asked for ideas and actions to address the disparities their communities experience. Additional information about inequities experienced by these groups can be found in [Appendix X](#).

The priority populations for this plan are:

- Youth with intellectual and developmental disabilities
- Youth experiencing homelessness
- Rural youth and families
- Youth and families involved with the child welfare system
- Youth and families involved with the juvenile justice

The Purpose

Senate Bill 1 (2019) required SOCAC to develop an initial strategic plan by 2021, followed by biennial updates. Senate Bill 968 (2023) extended SOCAC’s strategic planning to a four-year cycle.

Per [ORS 418.979](#), the primary duty of SOCAC is to develop and maintain state policy and a comprehensive, long-range plan for a coordinated system of care that encompasses public health, health systems, child welfare, education, juvenile justice, and services and supports for mental and behavioral health and people with intellectual or developmental disabilities. See **Appendix X** for the legislatively defined requirements.

A strategic plan:

- Is a document that outlines an organization’s long-term goal and the strategies to achieve them.
- Serves as a roadmap, providing direction, alignment of efforts, and a guide for decision making.
- Answers the questions, “where do we want to go?” and “how will we get there?”

This strategic plan details a vision, mission, and guiding values for Oregon’s SOC. In doing so, it provides direction for:

- A new vision for Oregon’s SOC.
- Changes needed so Oregon’s system of care better supports, listens to, and serves all youth and families.
- Required resources to support the continued work of the SOCAC and the System of Care at large.

The Council sought to be data-driven as it developed this plan, relying on data from state agencies who must approve its use and analysis in accordance with federal HIPAA and FERPA privacy laws.

Most importantly, the Council strived to co-create this plan with youth and families, as well as the system providers and policymakers that serve them. Without a thoughtful and coordinated effort to incorporate the expertise of all system experts—system users, providers, and leaders—any plans to improve Oregon’s System of Care will fail.

Thus, this plan aligns with the values and principles of national best practices in systems of care. It incorporates foundational steps needed to establish a more coordinated, comprehensive

system for Oregon’s children, youth, and families. It is meant to be a living document that will evolve as tasks are accomplished, strategies are honed, and new needs arise.

The Process

There were four phases to the SOCAC strategic planning process: gather, synthesize, verify, and finalize.

Gather (January – June 2025)

The gathering phase focused on identifying and reviewing data from agencies and providers across the system of care. While the [2025 SOC Data Assessment](#) was a foundational data source, additional qualitative and quantitative data sources were reviewed, including related strategic plans from state and local agencies, historical policy and legislative reports, national System of Care resources, and barrier reports submitted by L-SOCs. A full list of source documents can be found in [Appendix XX](#).

Youth and Families

In addition to review of relevant documents, SOCAC engaged youth, family members, and community partners via Community Based Organizations (CBOs) and L-SOC-led efforts.

Data and Action Parties

A series of youth and family data and action parties were hosted by SOCAC. At these SOC Data Parties, participants reviewed key findings from the [2025 SOC Data Assessment](#). Attendees were then invited to youth- and family-specific Action Parties, where participants identified strategies and actions in response to the data. These ideas were then analyzed by youth and family members in partnership with SOCAC staff. Key themes from the feedback were included in strategic planning.

Family Engagement Plan

SOCAC’s Family Advisory Committee, in collaboration with contractors from Common Thread Consulting, created a [Family Engagement Plan for](#) the SOCAC. This plan aims to help SOCAC engage in co-creation and shared decision making with families about programs and services for their youth. This plan was drafted with feedback gathered from 46 family members across 11 focus groups (three of which were conducted in Spanish). The recommendations in this plan are intended to improve not only SOCAC’s work, but the broader youth-serving systems. This plan informed the direction of the strategic plan and specific actions have been incorporated into the implementation plan. The Family Engagement Plan is available for review in [Appendix](#).

Youth Engagement Plan

The [Youth Engagement Plan](#), co-created by SOCAC's Youth Council and the Oregon School-Based Health Alliance, provides recommendations to address identified barriers to youth engagement. The Youth Engagement Plan was informed by qualitative data and recommendations gathered from youth participants, SOCAC staff, and seven L-SOC coordinators. The plan includes improvement strategies to center youth voices within the SOC, ensure meaningful participation, address identified barriers, and foster sustainable, inclusive youth-adult partnership practices. Goals, objectives, and activities from the Youth Engagement Plan have been incorporated into this strategic plan. The Youth Engagement Plan is available for review in [Appendix](#).

Community Based Organizations

SOCAC invested in culturally and linguistically responsive Community Based Organizations (CBOs) to amplify the perspectives and ideas of priority populations. Mini grants were issued to the following CBOs:

- [FACT Oregon](#) to engage parents of youth with I/DD
- [Morrison Child and Family Services](#) to engage parents engaged in child welfare
- [The Pathfinder Network](#) to engage youth impacted by the juvenile legal system
- [Eastern Oregon CCO](#) to engage youth living in rural areas
- [HomePlate Youth Services](#) to engage youth experiencing homelessness

In total, 329 people were engaged via surveys, listening sessions, focus groups and art-led engagement. [See Appendix X for](#) the full reports from the CBO outreach efforts.

Local Systems of Care

SOCAC also invited engagement from L-SOCs. SOCAC staff convened strategic planning conversations with eight L-SOC's representing 26 counties (Yamhill, North Coast, Lane, Eastern Oregon, Tri County, Marion/Polk, Linn, Lincoln, Benton, and Coos). Participants included youth, family members, providers, and system partners.

Oregon Youth Addiction Alliance (OYAA) Collaboration and Coordination

Bill HB 4002 (2024) tasked collaboration between the Alcohol Drug and Policy Commission (ADPC) and SOCAC to develop policy recommendations specific to youth substance use. In response, the Oregon Youth Addiction Alliance (OYAA) was created. SOCAC members participated in both SOC Strategic Planning and OYAA to cross-pollinate data and ideas, and to align recommendations. Consultants to the ADPC and SOCAC met regularly to ensure

coordination. The SOC Strategic Plan is aligned with OYAA recommendations, as noted in the OYAA-driven activities embedded within the SOC implementation plan.

Synthesize (July – October 2025)

SOCAC contracted with subject matter experts for thought partnership, facilitation of a strategic planning retreat, and writing of the strategic plan. In partnership with a Strategic Planning Core Team, a preliminary framework was drafted with SOCAC. Visioning and art-based exercises were facilitated with SOCAC and used to develop draft goals and value screens. Data and inputs collected during the Gathering phase were then applied to this framework at a two-day, in-person strategic planning retreat. In addition to appointed members of SOCAC, other system representatives were invited to participate, including additional youth and family members, local System of Care coordinators, and state agency staff. [See Appendix](#) for a list of strategic planning participants.

The retreat created a dedicated space for SOCAC members and other key system partners to step away from their day-to-day work and focus on the future of the Oregon System of Care. Facilitators led participants through activities to determine the goals and values for the next four years, and then used this framework to draft mission and vision statements for the SOC.

Grounded in the new mission and vision statements, retreat participants then identified strategies to achieve each goal, with underlying action steps for each strategy. Finally, retreat participants developed outcome statements by reflecting on what the results of strategic plan implementation would look like. Paired with a series of key indicators and process measures identified by SOCAC's Data Committee, these outcome statements offer a holistic approach for monitoring progress in implementation. Breaks during the two-day retreat offered space for leadership development, team building, cross-system collaboration, and peer-to-peer engagement. Additionally, facilitators reserved time each day for youth and family feedback and centered youth and family voices to ensure true co-creation.

Following the retreat, SOCAC staff and contracted partners distilled strategies and actions into a draft strategic and implementation plan that was brought to the Family Committee, Youth Council and Strategic Planning Core Team to review. Finally, SOCAC staff and the DEI Committee reviewed the draft plan to identify potential impacts on racial equity utilizing [a tool inspired by the Governmental Alliance on Race and Equity](#). A brief equity analysis for each goal assumes that the goal is achieved. The goals are broad, and thus, the analysis matches the breadth of the goals. The following questions were answered for each goal:

- What are the racial equity impacts of this strategic plan?
- Who will benefit from or be burdened by this strategic plan?

- Are there strategies to mitigate unintended consequences?

Verify (November 2025)

Before finalization, the drafted strategic and implementation plan was shared for public comment. SOCAC sought feedback from CBOs engaged during the Gather phase, youth and family members, L-SOCs, and provider and system partners. In addition to inviting partners to provide public comment via email and video and at the November SOCAC meetings, an online survey was shared to solicit feedback. Feedback received and integrated can be reviewed in **Appendix X**.

Finalize (December 2025)

SOCAC staff and contracted partners reviewed and incorporated key feedback collected during the public comment period, and the Council formally approved the plan in December. Per legislative mandate, the plan was delivered to the Oregon legislature January 2, 2026.

Limitations

Although SOCAC strived for a robust and inclusive strategic planning process, the following limitations are noted.

- **Lack of Tribal engagement.** Attempts to engage the nine federally recognized Tribes in Oregon in strategic planning were unsuccessful. While Tribal youth and families are identified as a population of concern, we recognize and honor Tribal sovereignty. SOCAC is committed to building and maintaining partnership with each of the nine Tribes as they see fit to improve access to care and services for Tribal youth and families.
- **Federal uncertainty.** Significant changes at the Federal level are taking place under the Trump administration. Due to the federal budget reconciliation bill signed into law on July 4, 2025, Oregon is projected to lose \$15 billion in federal funding over the next decade, impacting services delivered by youth-serving systems. While the full impact of these policies and funding cuts is unknown, implementation of the plan will certainly be impacted by these changes.

The Framework

Vision Statement

An Oregon where all children, youth, and families—across all backgrounds—are safe, well, thriving in their homes and communities, and supported by responsive and affirming systems designed with and for them.

Mission Statement

To drive and organize system change that centers youth and family lived experience, advances community care, and eliminates barriers across systems through collaboration, accountability, equity, and advocacy.

Core Values

To ensure fidelity to the System of Care philosophy, these values provide the parameters through which all elements of the strategic plan have been filtered.

- Centering children, youth, and families
- Increasing awareness and reducing stigma
- Promoting sustainable change
- Prioritizing community care
- Advancing equity by improving accessibility, affordability, and quality

Strategic Goals

Oregon's System of Care, at state and local levels, will collectively strive towards the following goals over the next four years:

- I. Improve access to coordinated, integrated, and community-based systems of care
- II. Promote the co-creation of equitable policy and systems by providers and the youth and families they serve
- III. Create sustainable infrastructure that increases the System of Care's capacity and credibility
- IV. Transform the systems that serve children, youth, and families

Strategic Indicators

The following indicators serve as benchmarks for the Oregon System of Care. They communicate the types of long-term change SOCAC hopes to create as we work to achieve our vision. SOCAC recognizes its responsibility to coordinate systems, break down barriers, and hold partners accountable for improvement on these indicators. However, these measures represent complicated, multifaceted concerns that require shared commitment and responsibility from all parties. SOCAC will monitor and regularly report on these indicators. See [Appendix X](#) for more information about these data points, data sources and disaggregated data where available.

Indicator	Measure	Data Source	Baseline (year)
Safe place or person outside of school	Increase % of youth reporting they have a safe place or person they can go to outside of school	Student Health Survey	86% (2024)
Unmet mental health care need	Increase % of youth reporting they have a safe place or person they can go to outside of school	Student Health Survey	18% (2024)
SUD prevalence	Decrease % of youth aged 18- 25 with reported substance use that met criteria for substance use disorder in the past year	National Survey on Drug Use and Health	33.9 % (2022-23)
Specialized home and community-based services	Increase # of youth receiving specialized home and community-based treatment and services.	<ul style="list-style-type: none"> Intensive In-home Behavioral Health Treatment (IIBHT): 275 youth (Oregon Health Authority, 2024) Behavioral Health Treatment Foster Care: 53 youth (Oregon Department of Human Services, 2024) Mobile response and stabilization services (MRSS): 4,699 mobile dispatches, 1,064 referred to stabilization services, 398 enrolled in stabilization services (Oregon Health Authority, 2024) Fidelity Wraparound: 1,242 (Oregon Health Authority, 2024) 	

		<ul style="list-style-type: none"> Youth receiving services per an Individual Service Plan: 10,577 (Oregon Department of Human Services, 2023) 	
Emergency department (ED) boarding	Decrease the % of youth behavioral health ED visits that result in boarding (stay longer than 24 hours)	OHA Hospital Discharge Data	11.3% (2022)
High school completion rates	Increase % of system-involved youth who complete high school within five years	Oregon Department of Education	74% of system involved youth (currently or formally incarcerated, foster care, and students with disabilities) completed high school (2023-24)
Suicide attempt	Reduce the rate of suicide attempts among youth	<p>3.4% of students reported a suicide attempt in the past year (Student Health Survey, 2024)</p> <p>3,829 youth were admitted to the emergency department or hospital for suicide attempts, suicidal thoughts, or self-harm. (OHA Hospital Discharge Data, 2023).</p>	
Downstream system involvement	Decrease involvement with child welfare and juvenile justice systems among youth 0-25	SOC Data Dashboard	<ul style="list-style-type: none"> 9,827 youth were involved in child welfare 7,522 youth were involved in juvenile justice. 660 youth were involved in three or more systems (2024)
Family experience	Increase % of families reporting a well-functioning system of care	National Survey on Children's Health ,	19.8% (2023)

The Strategic Plan

Goal I: Improve access to coordinated, integrated, and community-based systems of care.

Outcomes: Over the next four years, access to needed services will improve across the Oregon system of care for all children, youth, and families. Known barriers to care and the financing of care will be broken down so that youth and families can better access services—especially community-based services, peer support services, and services for youth with acute needs. Youth and families will feel empowered and be treated like equal partners when accessing services. State agencies and providers will take shared ownership and responsibility for improving the Oregon system of care.

Strategy 1: Increase services that are respectful and responsive to all cultural beliefs and practices, disabilities, preferred and necessary languages, and tailored to lived experience.

Action steps ensure that services are aligned with national [Culturally and Linguistically Appropriate Services \(CLAS\) standards](#), foster the creation of a diverse workforce, and provide expanded access to peer supports, mentorship, and holistic services.

Strategy 2: Break down known barriers to better coordinate, integrate, and promote community-based care.

Action steps focus on improving access to early identification and intervention, delivering school-based services, and decreasing barriers in accessing respite, wraparound care coordination, and intensive services.

Strategy 3: Support youth and family engagement in their care through shared decision-making that emphasizes dignity, inclusion, and support.

Action steps focus on providing information, education, and resources for youth and their families.

Process Measures

Measure	Data Source	Baseline (year)
Proportion of visits with spoken and sign language interpreter needs that were provided with OHA qualified or certified interpreter services	OHA; CCO Incentive Metrics	10% (2023)
Number of registered and employed peer supports	OHA: Traditional Health Worker Registry and CCO Traditional Health Worker Reports	570 registered (2024) 195 employed by a CCO (2023)
Percentage of school districts billing Medicaid for school delivered services	OHA Medicaid Division	35% (2025)
Number of youth accessing respite or relief care	SOC Data Dashboard , ODHS	Behavioral Health: 223 (2024) Child welfare: TBA I/DD: TBA
School mental health professional to student ratio	Oregon Department of Education	Counselors: 1:461 (1:250 recommended) School Psychologist: 1:3,393 (1:500 recommended) Social Workers: 1:8,831 (1:250 recommended)
Measure related to early childhood	TBD	TBD
Percentage of family members who partnered with providers in decision making	National Survey of Children's Health	85% (2022-23)

Equity analysis

What are the racial equity impacts of this goal?

The racial equity impacts of this goal would progress the state towards equity. If every youth who needs services receives services in a culturally responsive way, systems will have radically transformed from their current state.

Who will benefit from or be burdened by the goal?

Specific demographics that are currently underserved by in-home or community-based services would benefit from increased access to locally available services.

Are there strategies to mitigate the unintended consequences?

Openness to ongoing feedback as actions are taken, incorporating youth and family voices in developing and monitoring the implementation of strategies, and frequent progress updates will help to mitigate unintended consequences.

Goal II: Promote the co-creation of equitable policy and systems by providers and the youth and families they serve.

Outcomes: In the next four years, SOCAC, system partners, and providers across the system of care will engage differently and more meaningfully with youth and families. The system of care will take a restorative approach in its policy and system work, and youth and families will report that the power imbalance has decreased. Writing of relevant policies and procedures will be coordinated across agencies, and youth and families will be given appropriate notice and be adequately supported in the process. Youth and families will feel more confident and comfortable working with system partners.

Strategy 1: Engage with youth and families in an affirming, honoring, and restorative manner.

Action steps include implementing youth and family engagement plans, restorative practices, and transparent information sharing.

Strategy 2: Write and implement policies, procedures and accountability practices that are respectful and responsive to all cultural beliefs and practices, disabilities, and preferred and necessary languages with youth and families.

Action steps utilize state and agency policy levers to advance system change, ensuring implementation of CLAS policy and standards.

Strategy 3: Improve the integration, coordination, and efficiency of data-sharing that informs policy and practice across the system with regular reports to and feedback from youth and families.

Action steps emphasize the importance of collection and use of demographic data, the creation of integrated data systems, and increased capacity for data-driven decision making.

Process Measures

Measure	Data Source	Baseline (year)
Percentage of SOCs extensively implementing a family driven approach	<u>SOC Infrastructure Survey</u>	To be determined
Percentage of SOCs extensively implementing a youth driven approach	<u>SOC Infrastructure Survey</u>	To be determined
Percentage of SOCs extensively implementing a culturally and linguistically responsive approach	<u>SOC Infrastructure Survey</u>	To be determined
Percentage of SOCs extensively utilizing data in decision making	<u>SOC Infrastructure Survey</u>	To be determined

Equity Analysis

What are the racial equity impacts of this goal?

Historically, systems have caused significant harm to youth and family members; some of this harm is ongoing. Transformation of the system of harm to a system of balance, partnership, and restoration will improve the equity and power dynamics of the council and its partners.

Who will benefit from or be burdened by this goal?

Youth and families that have been negatively impacted by systems will benefit from a restored relationship between themselves, SOCAC, system partners, and providers: specifically, youth within the five priority populations described on page 9. Similarly, a culture of trust and restoration will also benefit SOCAC, system partners, and providers. Systems which have developed to protect power and resources that support dominant culture priorities will be burdened by these changes, as they will need to reform or re-invent the ways in which they interact with non-dominant cultural values and practices.

Are there strategies to mitigate the unintended consequences?

When reaching out to those with lived experience, there is always the possibility of causing additional harm. Those conducting outreach will follow best practice harm-reduction strategies, and, if harm does occur, steps will be taken to remedy the situation. Processes must be created to identify and record harm, to ensure mitigation strategies can be used when needed. Mitigation strategies are currently in development with the Family Advisory Committee and Youth Advisory Council.

Goal III: Create sustainable infrastructure that increases the System of Care's capacity and credibility.

Outcomes: In the next four years, SOCAC will become a more reputable system change agency and accountability partner. SOCAC will have the resources it needs to effectively support and expand its work and build the skills and capacity of its members. SOCAC and L-SOCs will have a more coordinated strategy so that both local and statewide work feeds into and supports the other.

Strategy 1: Build SOC capacity and sustainability through policies, procedures, and MOUs.

Action steps modernize SOCAC's committee structure, leverage state agency partnerships, and ensure effective and maintained bylaws.

Strategy 2: Improve SOCAC and L-SOC coordination through increased partnership, support, and information sharing.

Action steps resource LSOCs through technical assistance, capacity building and improved communication.

Strategy 3: Strengthen SOCAC membership through improved member support and member relations.

Action steps aim to diversify SOCAC membership, implement a youth-adult partnership model, and honor member contributions.

Strategy 4: Make SOCAC a trusted data resource by modernizing the SOC Data Dashboard.

Actions steps improve the SOC Data Dashboard through inclusion of demographic data, education data, and visualized data for smaller counties.

Strategy 5: Increase SOCAC capacity through additional staff, technological improvements, and infrastructure.

Action steps improve SOCAC's accessibility, fiscal sustainability, and capacity for communication and evaluation.

Process Measures

Measure	Data Source	Baseline (year)
Percentage of SOC's with extensive commitment from child serving systems, policy and decision makers, providers and managed care organizations	SOC Infrastructure Survey	To be determined
Number of formal agreements between SOCAC and system partners	SOCAC Documents	1 with OHA (2025)
Number of L-SOCs represented as voting members in SOCAC committees	Meeting minutes	8 (2025)
Percentage of SOCAC members who rate efforts as highly effective	SOCAC Membership survey	To be determined
Race, ethnicity, language, disability (REAL-D) and education data are visualized in the dashboard	SOC Data Dashboard	Race/ethnicity data is available (2025)
Percentage of infrastructure components substantially or extensively implemented by SOCAC	SOC Infrastructure Survey	To be determined

Equity Analysis

What are the racial equity impacts of this goal?

Improvement to the functionality of SOCAC and L-SOCs will benefit all those served by SOCAC and L-SOCs. There is no clear equity impact, as this change will impact all youth that are system-involved.

Who will benefit from or be burdened by the goal?

Most of the burden will fall on current SOCAC members, but SOCAC will heavily benefit from the work conducted if the anticipated benefits are achieved.

Are there strategies to mitigate the unintended consequences?

One potential unintended consequence of this goal is an over-broadened scope of SOCAC work. It is possible that SOCAC takes on work that is out of scope or better suited to single-system, existing groups. All SOCAC members and staff should remain mindful of scope of work to mitigate this potential unintended consequence.

Goal IV: Transform the systems that serve children, youth and families.

Outcomes: Over the next four years, SOCAC will have a feasible plan for a reimagined and fully financed System of Care where youth and families have access to a full continuum of care in or close to their community with no wrong door, where youth are not placed in foster care, detention, or a correctional facility because of their mental health needs, and where youth and families are treated as the experts in their own well-being. This plan will be designed with and for youth, families, and communities. This plan will integrate care providers and collaborate across state agencies to center the services around youth needs (not system needs). This plan will provide services that are respectful and responsive to all cultural beliefs and practices, disabilities, and languages, and tailored to lived experience.

Strategy 1: Create a shared understanding of Oregon's current System of Care, and why it needs to be transformed.

Action steps utilize communication campaigns to build shared awareness and understanding.

Strategy 2: Engage in strategic facilitated conversations with key partners, youth and families, and communities to create a shared vision for a transformed Oregon System of Care.

Action steps engage communities across the state through in-person visioning about system transformation.

Strategy 3: Using this shared vision, create a transformative model for Oregon's system of care.

Action steps develop a model that is grounded in community wisdom and seek buy-in and support from agencies and funders.

Strategy 4: Access the support and resources necessary for this transformative model for Oregon's system of care.

Action steps assess the current fiscal structure and identify alternative and new funding streams to support the model.

Strategy 5: Create a cohort to pilot the implementation of the new transformative model and include mechanisms for youth and family feedback and quality improvement.

Action steps pilot the transformed system in three regions with partnership from youth and families to inform evaluation and development of recommendations for expansion.

Process Measures:

Measure	Data Source	Baseline (year)
Number of in person visioning conversations	Meeting minutes	Not applicable
Number of youth and family involved in development of transformative model	Meeting minutes	Not applicable
Number of state agencies voicing support for the model	Meeting minutes	Not applicable
Proposed model and funding request is shared with the legislature and other partners	SOCAC webpage	Not applicable
Number of L-SOCs completing fiscal assessment	SOCAC webpage	Not applicable
Number of regions implementing pilot program	Contracts and Procurement	Not applicable
Number of youth and family members providing oversight to new model	Meeting minutes	Not applicable

Equity Analysis:

What are the racial equity impacts of this goal?

Changing from a system built on white supremacy to a system explicitly built with equity and intersectional considerations in mind will, if effectively implemented, improve the equity of the system and outcomes for all who receive care.

Who will benefit from or be burdened by the goal?

Multisystem involved youth, particularly if they are Black, brown and Indigenous youth, would benefit most from this change due to their current interactions with white supremacist systems. By transforming these systems into equitable services of the state, we can limit future inequity and promote inclusive care.

Are there strategies to mitigate the unintended consequences?

It is possible, though unlikely, that system transformation results in a system that is less equitable than its current state. Data will be monitored to ensure that our most vulnerable youth and families are receiving appropriate care during transition periods. The pilot program is an effective means to test the impacts of change while minimizing risk.

The Implementation Plan

The successful execution of this strategic plan requires coordinated action, vigilant monitoring, and continuous adaptation. To hold the Council and its partners accountable, the planners have created a corresponding detailed implementation plan, the initial draft is available in [Appendix X](#).

Key elements include:

- **Action steps.** Approximately 75 action steps were identified to accomplish the strategies and goals of this plan. The following elements are identified to facilitate the timely completion of each action step. Further information about the action steps can be found in the [implementation plan \(hyperlink\)](#).
 - SOCAC Staff Lead
 - SOCAC Champion
 - Key Partner(s) (when partnership is required to complete the action step)
 - Start date/Due date
 - A progress indicator (Not Started, In Progress, Complete)
 - Implementation & Resource Notes
- **Youth and family priorities.** Eighteen action steps were prioritized by youth and families as the most pressing actions SOCAC can immediately take to improve how youth and families experience the current system of care. These action steps will be tracked as top priority throughout implementation.
- **The “parking lot.”** This list of additional action steps captures Action Steps that came to light through conversations that occurred during the strategic planning process. Although these action steps have not been prioritized in the initial implementation plan, this work should not be lost or forgotten. These action steps should be regularly revisited and, as appropriate, added to the implementation plan. See [Appendix XX](#).
- **Elements of a transformed system.** Strategic planning participants identified a list of desired elements for a transformed system. These elements will be utilized in development and creation of regional pilots (Goal 4, Strategies 2 - 5). See [appendix](#) for additional information.
- **Progress Reporting.** The [implementation plan](#) is a living document that tracks the implementation progress of this strategic plan. The implementation plan will be

reviewed quarterly by the Council, and progress will be reported annually to the legislature and Oregon's System of Care at large.

Youth and Family Priorities

The Family Advisory Committee and Youth Council identified 18 action steps as priorities for the 2026-2029 plan. Youth and family members that support both SOCAC and OYAA identified an additional two actions for a total of 20 prioritized actions. These action steps will have the greatest impact on the Council's ability to meet the goals of this strategic plan and fulfill its mission.

Goal 1: Improve access to coordinated, integrated, and community-based systems of care.	
Strategy 1: Increase services that are respectful and responsive to all cultural beliefs and practices, disabilities, preferred and necessary languages, and tailored to lived experience.	
Youth	Increase quality youth drop-in centers/third spaces with peer-led culturally relevant and fun activities
Shared	Create programs and funding that support peer support providers
Strategy 2: Break down known barriers to better coordinate, integrate, and promote community-based care.	
Family	Tackle barriers related to entry level services
Family	Implement more school-based supports and services
Youth	Decrease barriers to respite
Youth	Decrease barriers to wraparound
Shared (OYAA)	Pilot expansion of In-home treatment & Recovery services, including Treatment Foster Care or In-Home Addiction Treatment models: co-occurring treatment, team-based support, connection to family-based support, and use of peer delivered services - ensuring smooth communication between multi-agency communication.
Shared (OYAA)	Develop a support program for county juvenile departments to provide diversion programs (support instead of lock-up) and direct SUD and co-occurring supports (in-house or through partnerships)
Strategy 3: Support youth and family engagement in their care through shared decision-making that emphasizes dignity, inclusion and support.	
Youth	Coordinate training & information exchange between providers and PWLE so providers are better equipped to partner with youth and families in their care
Family	Explore opportunities for youth and families to participate in trainings that providers receive and to be trained in the services their children are receiving
Family	Find and offer best practices/programs that empower youth & family members to be their own advocates

Youth	Implement collaborative problem solving across systems (in a coordinated manner)
Goal II: Promote the co-creation of equitable policy and systems by providers and the youth and families they serve.	
Strategy 1 Engage with youth and families in an affirming, honoring, and restorative manner.	
Family	Review, assess feasibility, and strategize for implementation of the family engagement plan
Family	Monitor and report on youth and family experience at policy making tables in partner systems across the state
Youth	Review, assess feasibility, and strategize for implementation of the youth engagement plan
Youth	Track and report where and when youth and family voice has impacted system change
Strategy 2: Write and implement policies, procedures and accountability practices that are respectful and responsive to all cultural beliefs and practices, disabilities, and preferred and necessary languages with youth and families.	
Family	Create a SOCAC legislation review and feedback process that is youth and family led
Goal III: Create sustainable infrastructure that increases the System of Care's capacity and credibility.	
Strategy 3: Strengthen SOCAC Membership through improved member support and member relations.	
Youth	Expand youth and family peer support and technical assistance
Goal IV: Transform the systems that serve children, youth and families.	
Strategy 2: Engage in strategic facilitated conversations with key partners; youth and families; and communities to create a shared vision for a transformed Oregon System of Care.	
Family	Invest in relationship-based interactions with PWLE to Identify key groups, partners, and communities to work with
Strategy 3: Using this shared vision create a transformative model for Oregon's System of Care.	
Shared	Use a bottom-up design and shared decision making to take information gathered (including qualitative interviews) during facilitated conversations to draft a transformative model that is led by youth and family need but takes into consideration system elements and funding.