Foundations of Maternal, Child Priorities: Social determinants of h			tress trauma	ACEs and resilience	• Culturally and	linguistically respo	onsive services (CLAS)
State Performance measures (SPMs		equity, Toxies	incos, nauna		, culturally and	inguistically respe	
- Social determinants of health and equ	•						
A) The percentage of children in low-income households with a high housing cost burden							
B) The percentage of children living in a household that received food or cash assistance							
C) The percentage of household							
- Toxic stress, trauma, ACEs and resilien			C C	·			
A) Percentage of new mothers B) Percentage of mothers of 2-y - Culturally and linguistically responsive	year-olds who have			ing pregnancy			
A) Percentage of children age 0		e a healthcare pr	ovider who is s	ensitive to their family'	s values and cust	oms	
B) Percentage of new mothers		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
State leads: See individual strategies			Ū.				
Foundations of MCAH: Policy a	and Systems						
Goal: Policy, systems, resources and fur	-	am drivers of m	aternal, child a	nd adolescent health, f	oundations of life	elong health, and fam	nily protective factors
Foundations of MCAH – Policy	and Systems St	rategy #1: St	trengthen eco	nomic supports for fa	milies through	policy developmen	t, implementation, and promotion (e.g. EITC,
child tax credit, subsidized childcare	-		U		0	. , .	
Strategy lead: Allison Potter	, 0	,					
		Priorities impac	ted by work on	this strategy:			
		⊠SDOH-E		\Box Well woman care	Breastfeedir	ng	
		⊠Toxic stress/t	rauma/ACEs	□Child Injury	□Bullying	⊠CLAS	
Local Level Activities	Local measures		Resources				
1. Assess, develop and implement	a. Needs assess	nent	Family Forwa	rd Oregon: https://fami	lyforwardoregon	.org/resources/	
family friendly policies for LPHA and	completed (Ye	s/No)	•	u of Labor and Industri			
tribal employees (e.g., paid family	b. Number of far		-	work: https://www.ore			
leave, flexible scheduling, etc.).	policies develo	ped	Oregon Famil	y Leave Act (OFLA): <u>htt</u> r	os://www.oregor	n.gov/boli/workers/Pa	ages/oregon-family-leave.aspx

	-	Number of family fits all	
	с.		Pregnancy accommodations at work: <u>https://www.oregon.gov/boli/workers/Pages/pregnancy-and-nursing-</u>
		policies implemented	accommodations.aspx
			Predictive scheduling: <u>https://www.oregon.gov/boli/workers/Pages/predictive-scheduling.aspx</u>
			Breaks to express breast milk: <u>https://www.oregon.gov/boli/workers/Pages/breaks-to-express-breast-milk.aspx</u>
			Paid Leave Oregon: <u>https://paidleave.oregon.gov</u>
			Family Values at Work – Resources: https://familyvaluesatwork.org/your-rights/resources/
			Colorado Family-Friendly Workplace Toolkit:
			https://www.healthlinkscertified.org/uploads/files/2017_11_28_16_25_46_FF Toolkit_Final 2017.pdf
			AARP – Supporting Caregivers in the Workplace Toolkit:
			https://www.aarp.org/content/dam/aarp/work/job-search/2019/02/NEBGH-caregiving-practical-guide.pdf
			Creating a Culture of Inclusion in the Workplace:
			http://www.hireimmigrantsottawa.ca/creating-culture-inclusion-workplace/
			National Women's Law Center – Workplace Justice: https://nwlc.org/issue/workplace-justice/
2. Promote and support family		a. Number of community	Family Forward Oregon: https://familyforwardoregon.org/resources/
friendly policies among community		organizations and	Oregon Bureau of Labor and Industries:
organizations and businesses (e.g.,		businesses supported or	Your rights at work: https://www.oregon.gov/boli/workers/Pages/your-rights-at-work.aspx
paid family leave, flexible scheduling,		outreached to	Oregon Family Leave Act (OFLA): https://www.oregon.gov/boli/workers/Pages/oregon-family-leave.aspx
etc.).		b. Number of policies	Pregnancy accommodations at work: https://www.oregon.gov/boli/workers/Pages/pregnancy-and-nursing-
		promoted	accommodations.aspx
			Predictive scheduling: https://www.oregon.gov/boli/workers/Pages/predictive-scheduling.aspx
			Breaks to express breast milk: https://www.oregon.gov/boli/workers/Pages/breaks-to-express-breast-milk.aspx
			Paid Leave Oregon: https://paidleave.oregon.gov
			Family Values at Work – Resources: https://familyvaluesatwork.org/your-rights/resources/
			Colorado Family-Friendly Workplace Toolkit:
			https://www.healthlinkscertified.org/uploads/files/2017 11 28 16 25 46 FF Toolkit Final 2017.pdf
			AARP – Supporting Caregivers in the Workplace Toolkit:
			https://www.aarp.org/content/dam/aarp/work/job-search/2019/02/NEBGH-caregiving-practical-guide.pdf
			Creating a Culture of Inclusion in the Workplace:
			http://www.hireimmigrantsottawa.ca/creating-culture-inclusion-workplace/
			National Women's Law Center – Workplace Justice: https://nwlc.org/issue/workplace-justice/
3. Partner with community and tribal	a.	Number of community or	ODHS childcare assistance programs: https://www.oregon.gov/dhs/ASSISTANCE/CHILD-CARE/Pages/index.aspx
agencies to increase educational		tribal agencies partnered	Find Child Care Oregon: http://triwou.org/projects/fcco
opportunities for women and young		with	Oregon Opportunity Grant: https://oregonstudentaid.gov/oregon-opportunity-grant.aspx
parents (e.g., community colleges,			OSU scholarships and grants for student parents:
	1		

ODHS, Head Start, community	b.	Number of increased	https://familyresources.oregonstate.edu/scholarships-and-grants-student-parents
organizations, etc.).		educational opportunities	ODE Teen Parent Success Program: <u>https://www.oregon.gov/ode/students-and-family/Pages/teenparentprogram.aspx</u>
4. Partner with Early Learning Hub to	a.	Number of meetings	Oregon Early Learning Hubs: https://oregonearlylearning.com/administration/what-are-hubs/
ensure equitable access to culturally		attended or initiated with	ELD – Early Head Start: https://oregonearlylearning.com/early-head-start
supportive early childhood learning		Early Learning Hubs to	ELD – Head Start: <u>https://oregonearlylearning.com/head-start-opk</u>
opportunities for children of color		support learning	ELD – Relief Nurseries: https://oregonearlylearning.com/relief-nurseries
(e.g., Head Start, Early Head Start, and		opportunities for children of	ELD – Early Childhood Equity Fund: https://oregonearlylearning.com/student-success-act#equityfund
Oregon pre-K).		color	ELD – Early Care and Education Sector Plan:
	b.	Number of formal	https://oregonearlylearning.com/wp-content/uploads/2019/10/ECESectorPlanPhaseIToolkit.FINALa.pdf
		partnerships established	PSU – Building the Case for Culturally Specific P-3 Strategies in Oregon:
		with Early Learning Hubs to	https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1010&context=childfamily_earlychild
		support learning	Raise Up Oregon plan:
		opportunities for children of	https://oregonearlylearning.com/wp-content/uploads/2019/01/Raise-Up-Oregon-Web-corrected.pdf
		color	NWLC – Child care: https://nwlc.org/issue/child-care/
			NWLC – Child care workforce: https://nwlc.org/issue/child-care-workforce/
5. Implement policies and partner	a.	Number of policies	Oregon GEAR UP financial literacy resources: https://oregongearup.org/key-topics/financial-literacy
with programs that improve financial		implemented to generate	Financial Beginnings Oregon: <u>https://finbegor.org/</u>
literacy and generate savings and		savings and wealth among	The Arc Oregon Financial Literacy Education: <u>https://thearcoregon.org/projects/financial-literacy/</u>
wealth among youth and families of		youth and families of color	Bienestar Housing Counseling Program: https://bienestar-or.org/housing-counseling/
color (e.g., Children's Savings	с.	Number of programs	IRS – Earned Income Tax Credit: <u>https://www.irs.gov/credits-deductions/individuals/earned-income-tax-credit</u>
Accounts, Earned Income Tax Credit,		partnered with to generate	IRS – EITC partner toolkit: https://www.eitc.irs.gov/partner-toolkit/welcome-to-the-partner-toolkit
child tax credit, etc.).		savings and wealth among	BOLI EITC info: https://www.oregon.gov/boli/workers/Pages/eitc.aspx
		youth and families of color	OCPP EITC policy brief: https://www.ocpp.org/2020/01/29/low-eitc-participation-costs-oregon-dearly/

Strategy lead: Robin Stanton	⊠ SDOH-	s impacted by work on this strategy: -E ⊠Well woman care ⊠Breastfeeding stress/trauma/ACEs □Child Injury □Bullying ⊠CLAS
Local Level Activities 1. Partner with community organizations (e.g. CCOs, SNAP-Ed Extension, anti-hunger groups) to promote policies and programs that strengthen food sovereignty and local food systems (i.e. food security strategies in CHIPs)	 Local measures a. Number of community organizations partnered b. Number of policies or programs promoted 	Resources d with Community Health Assessment and Group Evaluation (CHANGE) Action Guide Familias en Acción Nutrition and Food Equity Feeding America Food Equity, Johns Hopkins Center for a Livable Future Healthy Food Policy Project Oregon Community Food System Network Oregon Food Bank Community Engagement USDA Indigenous Food Sovereignty Initiative World Food Policy Center, Duke University. Many resources on food systems and inequity
2. Convene / participate in cross- sector coalitions such as food policy councils or other community partnerships to address food access barriers.	 a. Coalition convened (Yes b. Number of coalitions participated in c. Number of coalition meetings attended 	s/No) Community Engagement, Tamarack Institute Community Health Assessment and Group Evaluation (CHANGE) Action Guide Familias en Acción Nutrition and Food Equity Food Policy Networks_ Johns Hopkins Center for a Livable Future Oregon Community Food System Network

3. Implement a validated food	a.	Percent of clients screened	Evidence:
insecurity screening tool and	b.	Percent of clients referred	Promoting Food Security for All Children, American Academy of Pediatrics
provide referrals for food		among those who screen	Position of the Academy of Nutrition and Dietetics: Food Insecurity in the United States
assistance		positive for food insecurity	Food and Nutrition Security Primer
			Household Food Security in the US
			Resources:
			Hunger Vital Sign validated 2-question food insecurity screening
			Hunger Vital Sign Translation English to Spanish
			Screen and Intervene: A Toolkit for Pediatricians to Address Food Insecurity

Foundations of MCAH – Poli needed services for the MCAH po			ategy #3: Foster cross-system coordination and integration to ensure screening and referral for SDOH, and equitable access to				
Strategy Lead: Allison Potter			Priorities impacted by work on this strategy:				
			SDOH-E DWell woman care DBreastfeeding				
			⊠Toxic stress/trauma/ACEs □Child Injury □Bullying ⊠CLAS				
Local Level Activities	Local n	neasures	Resources				
 Develop culturally and linguistically competent systems to screen for trauma and SDOH needs in clinical and community settings. 	and com dev b. Per scre and det	mber of culturally I linguistically npetent systems veloped cent of clients eened for trauma d social eerminants of alth needs	AAFP SDOH needs assessment resources: <u>https://www.aafp.org/family-physician/patient-care/the-everyone-project/toolkit/assessment.html#screen</u> OPCA social needs tools and resources: <u>https://www.orpca.org/initiatives/social-determinants-of-health/251-sdoh-tools-resources</u>				
 Deepen relationships with local partners to build a strong, culturally competent and trauma-informed local referral network. 	loca dev dee b. Nur com trau	mber of ationships with al partners veloped or epened mber of culturally npetent and uma informed erral sources	OHA Addressing SDOH-E through Health-Related Services: https://www.oregon.gov/oha/HPA/dsi-tc/Documents/Health-Related-Services-SDOH-E-Guide.pdf OHA HRS guides: https://www.oregon.gov/oha/HPA/dsi-tc/Pages/Health-Related-Services.aspx OPCA social needs tools and resources: https://www.orpca.org/initiatives/social-determinants-of-health/251-sdoh-tools-resources Iv Central Oregon Resource Directory: https://centraloregonresources.org/ ACEs Aware Trauma-Informed Network of Care Roadmap (Sections 3 & 4): https://www.acesaware.org/wp-content/uploads/2020/12/Draft-Network-of-Care-Roadmap-Final-12-14-20-For-Public-Comment.pdf				
3. Partner with CCOs and other community partners to integrate local LPHA and tribal MCAH	pro	mber of MCAH grams resented in	Unite Us- Connect Oregon: <u>https://oregon.uniteus.com/</u> Find Help Oregon (Formerly Aunt Bertha): <u>https://www.findhelp.org/</u> Healthy Klamath Connect: <u>https://healthyklamathconnect.com/</u>				

community	OHA Community Information Exchange Workgroup: https://www.oregon.gov/oha/HPA/OHIT-HITOC/Pages/CIEworkgroup.aspx
information	211info: https://www.211info.org/
exchange networks	Help Me Grow Oregon: https://www.helpmegroworegon.org/
-	
	information

institutions, and services. Strategy Lead: Wendy Morgan		Priorities impacted by work on this strategy:
		☑SDOH-E □Well woman care □ Breastfeeding
		□ Toxic stress/trauma/ACEs □ Child Injury □ Bullying □ CLAS
Local Level Activities	Local measures	Resources
 Develop organizational readiness for anti-racist and trauma informed practices Build foundational knowledge Solidify agency readiness (funding and capacity) Create agency infrastructure to support work 	completed to develop organizational readiness	 Local Color: OPB Film on racism in Oregon: https://www.pbs.org/black-culture/shows/list/local-color/ Why Aren't There More Black People in Oregon? Ted Talk/Walidah Imarisha: https://www.youtube.com/watch?v=FTZINEZ3NEw Broken Treaties, An Oregon Experience (PBS film): https://www.pbs.org/video/oregon-experience-broken-treaties-oregon-experience/ Organizational level activities: Me and White Supremacy (book/journal with individual daily activities for a deeper understanding of white supremacy): http://laylafsaad.com/meandwhitesupremacy Roadmap to Trauma-Informed Care (Trauma Informed Oregon): https://traumainformedoregon.org/roadmap-trauma-informed-car Client-centered activities to improve agency outreach SAMHSA Trauma Informed Approaches Toolkit: https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf NEAR@Home Toolkit, 3rd Edition
 Conduct organizational screening for anti-racist and trauma informed practices Needs assessment Gather data 	 Number of organizational screening activiti completed 	 Tool for Organizational Assessment for Racial Equity BARHII Local Health Department Self-Assessment Toolkit Oregon WIC Program ACEs online course Casey Family Foundation: Advancing the Mission: Tools for Equity, Diversity and Inclusion

3. Modernize internal policies to reflect anti-racist and trauma informed practices.	a.	Number of internal policies modernized	Oregon State Health Improvement Plan SAMHSA Trauma Informed Approaches Toolkit
 4. Develop and implement antiracist and trauma informed action plan a. Build equity and trauma-informed action plan b. Review/monitor agency changes c. Adopt/institutionalize policy and practice 	a. b. c.	changes documented	Roadmap to Trauma-Informed Care (Trauma Informed Oregon) Colorado MCH Action Plans SAMHSA Trauma Informed Approaches Toolkit IHR Developing Trauma Informed Organizations Toolkit NEAR@Home Toolkit, 3 rd Edition Michelle Harvey, LCSW – Reflective Supervision/Consultation for Service Providers & Early Childhood Professionals • Focus on trauma-informed practice, NEAR science • Recommended by MIECHV program (former trainer)
5. Engage culturally specific organizations and their constituents to ensure Title V MCAH policies, practices and services advance equity and racial justice and meet the needs of communities of color.	a.	Number of organizations engaged Number of policies, practices, or services amended based on constituent input	Trauma-Informed Oregon organizational resources: https://traumainformedoregon.org/resources/trauma-informed-care-resource-library/ Prevention Institute tools and resources: https://www.preventioninstitute.org/tools Healing Centered Engagement (Shawn Ginwright): https://medium.com/@ginwright/the-future-of-healing-shifting-from-trauma-informed-care-to-healing-centered-engagement- 634f557ce69c Share Power with Communities resource: https://healthequityguide.org/strategic-practices/share-power-with-communities/ Multnomah County Equity & Empowerment lens: https://multco.us/diversity-equity/equity-and-empowerment-lens Supporting Health Care and Community-Based Organization Partnerships to Address Social Determinants of Health: https://www.gih.org/views-from-the-field/supporting-health-care-and-community-based-organization-partnerships-to-address-social-determinants-of-health/

MCAH population. Strategy Lead: Nurit Fischler	Priorit	s impacted by work or				
	⊠sdo	-E	□Well woman care	Breastfeedin	g	
	⊠Toxi	stress/trauma/ACEs	Child Injury	□Bullying	⊠CLAS	
Local Level Activities	Local measures	Resources				
1. Partner with local housing agencies/health systems/social services to facilitate access to affordable housing and/or coordinate or co-locate services for the MCAH population. (e.g. housing vouchers for families accessing MCH services; housing guidance as part of home visiting; community health workers co-located in shelters or supported housing settings; access to OHP social need/housing services)	 a. Number of partnership established b. Number of initiatives established 	tc/Pages/SHAF	RE.aspx		vww.oregon.gov/oha/HPA/dsi- t.org/hipprojects/housing4all/	
 Develop medical/legal partnerships to provide legal services to MCH clients with unsafe/unstable housing or at risk for eviction. Partner with local shelter system to address child/family safety and other needs in the shelter system (e.g. safe sleep for infants) 	 a. Medical/legal partners initiated (Yes/No) b. Medical/legal services implemented (Yes/No) a. Number of child/famil safety practices integrate into local shelter system 		er for Medical-Legal Partı	nership initiative		

4. Partner to develop/ensure access to Healthy Homes or similar program to assess and address home safety and remediation concerns for the MCH community.	a. System to ensure access to healthy homes program/guidance established (Yes/No)	Oregon Healthy Homes Initiative
5. Develop and implement system to screen MCH clients for housing needs, refer to community housing supports, and track identified needs.	 a. Screening, referral and tracking system developed (Yes/No) b. Screening, referral and tracking system implemented (Yes/No) c. Percent of MCH clients screened for housing needs d. Percent referred for housing supports among those screened and in need 	Oregon Primary Care Association – https://orpca.org/social-needs-tools-resources/
6. Educate and advocate with community partners regarding the essential link between housing and health, and housing-related needs of the MCAH population.	 a. Number of community partners engaged in education and advocacy b. Number of education/communications materials developed c. Number of community members reached through education/outreach events 	Housing is the best Medicine: <u>https://health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment</u> <u>The Connection between Housing, Health, and Racial Equity – Housing Matters, Urban Institute Initiative</u>
7. Convene or participate in a community consortium to develop policy/systems to address the	a. Number of community partners participating in consortium	Healthy Homes coalition in Mult Co. : <u>https://www.multifamilynw.org/multnomah-county-healthy-homes-coalition</u> Coaliton empowers constituents and member organization to maintain and provide healthy, stable homes.

housing and health needs of the	Number of consortium	
MCH population.	convenings held or	
	attended	
	Policy or systems changes	
	implemented by the	
	consortium	

Foundations of MCAH: Workforce capacity & effectiveness Goal: Support a cross-sector workforce that serves women, children, youth and families, and delivers and links to culturally and linguistically responsive and trauma informed maternal and child health services.									
Foundations of MCAH - Work responsive services.	for	ce Strategy #	1: Advance the	e skills and abi	lities of the workforce	e to deliver equi	itable, trauma inform	ed, and culturally and linguistically	
Strategy Lead: Wendy Morgan			Priorities impact	ted by work on t	his strategy:				
			⊠SDOH-E		□Well woman care	Breastfeedin	g		
			⊠Toxic stress/tr	auma/ACEs	□Child Injury	Bullying	⊠CLAS		
Local Level Activities	Lo	cal measures		Resources					
1. Participate in TA opportunities to improve knowledge and skills in equity, trauma/ACEs, and CLAS (including home visiting staff)	a. b.	technical assista	ance inical	Trauma Inform Oregon WIC P	Health: <u>https://thinkcu</u> ned Oregon: <u>https://tra</u> rogram ACEs online cou <u>oregon.gov/oha/PH/HE</u>	aumainformedore urse:		dules.aspx	
2. Provide training and education for perinatal providers and community partners including anti-racism trainings and other SDOH areas	a. b. c.	Number of train educational opp provided to staf and partners Number of staff Number of prov partners trained	oortunities ff, providers f trained viders and	https://hunge Racial Equity L Oregon Food L https://www.a Food Hero: ht Familias en Ac Human Impac https://human Oregon WIC P	randhealth.feedingame earning Modules: http Bank (education progra oregonfoodbank.org/or tp://foodhero.org/ cción Nutrition and Foo t Partners: Health Equin himpact.org/hipproject rogram ACEs online con	erica.org/resource s://www.racialeq ums have shifted o ur-work/program d Equity: <u>https://</u> ty Guide Webinars <u>s/hegwebinars20</u> urse:	e/illuminating-intersect juitytools.org/curricula/ due to Covid-19): is/education/ www.familiasenaccion.	.org/nutrition-food-equity/	

Foundations of MCAH - Workforce Strategy #2: Implement standards for workforce development that address bias and improve delivery of equitable, trauma-informed, and								
culturally and linguistically respons Strategy Lead: Wendy Morgan	sive services.	Priorities impac	ed by work on this s					
		SDOH-E		□Well woman care	l woman care 🛛 Breastfeeding			
		⊠Toxic stress/t	auma/ACEs 🗌	Child Injury	□Bullying	⊠CLAS		
Local Level Activities	Local measures		Resources					
 Assess standards currently in place, determine best practices and develop action plan for equitable workforce development and trauma informed, and culturally responsive services Adopt policies, standards and monitoring systems to track progress on implementing trauma and equity standards 	 a. Assessment constandardized to standardized to b. Action plan dev (Yes/No) a. Number of poli implemented b. Monitoring systimplemented (' c. Percent of staff policies and staff 	ool (Yes/No) veloped cies, standards tem Yes/No) adhering to indards	c. <u>BARHII Local</u> d. <u>Oregon WIC F</u> e. <u>Casey Family</u> Government Allia	ance on Racial Equity	Self-Assessment 1 course ing the Mission: 1 : https://www.ra			
 Develop and implement a hiring and retention plan using trauma informed principles and an equity lens 	 a. Hiring and rete developed (Yes b. Number of bes included in hiri c. Percent of new processes adhe 	/No) t practices ng plan hiring	• •			015/02/Public-Sector-J	obs-Final1.pdf	

Foundations of MCAH - Workforce Strategy #3: Support efforts to expand capacity and improve diversity in the workforce.							
Strategy Lead: Wendy Morgan		Priorities impacte	ed by work on th				
		⊠SDOH-E		□Well woman care □ Breas			
		⊠Toxic stress/tra	iuma/ACEs	Child Injury	Bullying	⊠CLAS	
Local Level Activities	Local measures		Resources				
Establish community partnerships to	a. Number of comm	nunity	Colorado Equ	ity Alliance Tools:			
develop programs to reach young	partnerships develo	ped [please					
people about the importance of	include the impact	statement and					
public health and career options	role(s) of partner(s)	in the narrative					
that impact MCH populations	section of your plan and report]						
Support CHWs, hygienists, and other	This will be a state	evel activity					
mid-level providers to increase							
access to care in underserved							
communities.							
Support CHWs and doulas working	a. Number of CHWs	and doulas					
with the MCH population in	certified as OHA TH	Ws					
becoming an OHA certified							
Traditional Health Workers.							
Support training for CHWs to be	a. Number of comm	nunity health	Evidence-base	e:			
certified as a certified lactation	workers participati	ng in certified	https://www.	mchevidence.org/tools	/strategies/4-5.p	<u>hp</u>	
counselor (CLC).	lactation counselor	s training	Training cours	ses:			
			https://cente	rforbreastfeeding.org/l	actation-counseld	or-training-course/clc-c	ertification/
			https://thebla	ackcourse.com/			

Foundations of MCAH: Community, Individual & Family Capacity										
Goal: Communities, individuals and families have access to resources, services and built environments that promote family health, safety, protective factors, resilience and equity										
Foundations of MCAH – Community, Individual & Family Capacity Strategy #1: Support/fund programs - such as home visiting - that engage families and build parent										
capabilities, resilience, supportive/nurturing relationships, and children's social-emotional competence.										
Strategy Lead: Anna Stiefvater										
		Priorities impacted by work on t	his strategy:							
		⊠SDOH-E	⊠Well woman care							
		⊠Toxic stress/trauma/ACEs	Child Injury DBullying CLAS							
Local Level Activities	Local meas	ures	Resources							
1. Convene or participate in	a. Number	of community advisory board	Resources:							
community advisory boards to	meeting	s attended	Tribal Home Visiting Success Story							
support home visiting programs.	b. Number	of partners participating in	https://www.acf.hhs.gov/ecd/success-story/partnering-parents-improve-program-success							
	commur	nity advisory board								
2. Build or participate in a	a. Number	of home visiting programs	Resources:							
coordinated home visiting	partnere	ed with	NHVMA, Lessons on Central Intake: <u>https://generocity.org/philly/wp-</u>							
referral system.	b. Number	of referral system meetings	content/uploads/sites/2/2018/10/Strader_WhitePaper-home-visiting.pdf							
	attended									
	c. Number	of referrals received	Examples:							
			Family Core (Yamhill): <u>http://midvalleyparenting.org/resources/display/familycore-yamhill_county</u>							
			Home Visit Connections (Hood River, North Central): <u>https://www.columbiagorgenews.com/news/family-support-</u>							
			starts-at-birth-with-home-visiting-connection/article_0d8d3d3a-a3f4-5284-a2ac-41ecb5f489d0.html							
3. Implement an equity initiative		of equity goals developed	https://nhvrc.org/product/equity-initiatives-in-home-visiting/							
within a home visiting program.		f clients reached								
4. Enhance access to parenting		of parents served/provided	Resources:							
education and support.	with edu	acation or support	Oregon Parenting Education Collaborative: <u>https://health.oregonstate.edu/opec/families</u>							
			Parents Anonymous: <u>https://parentsanonymous.org/</u>							
			Parenting Café:							
			https://www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/BABIES/Documents/LAUNCHParentCafeissuebrief.pdf							

Foundations of MCAH – Comm	nunity, Individua	al & Family	Capacity Stra	tegy #2: Build com	munity capacity for	or improved health, res	ilience, social/cultural connection and equity.
Strategy Lead: Nurit Fischler	Priorities imp	pacted by work on this strategy:					
		⊠SDOH-E		⊠Well woman care	🛛 Breastfeeding	3	
		⊠Toxic stres	s/trauma/ACEs	⊠Child Injury	Bullying	⊠CLAS	
Local Level Activities	Local measures		Resources				
 Convene or participate in coalitions, inter-agency collaborations, and cross-systems initiatives to prevent/address trauma and promote resilience and/or address the social determinants of health and equity. 	 a. Number of mee b. Number of coal created c. Number of part engaged 	itions	Southern Oregon Creating Sanctua Healing Centered trauma-informed Trauma-Informed Prevention Instit Growing Resilier https://www.acc OHA Social Resilier https://www.ore Share Power wit https://healtheo	d Engagement (Shawn C d-care-to-healing-cente ed Oregon organizationa tute tools and resources nt Communities: <u>esconnection.com/colle</u> ience Project: <u>egon.gov/oha/PH/HEAL</u> th Communities resourc <u>uityguide.org/strategic</u>	.soesd.k12.or.us/ ttps://www.aceso Ginwright): <u>https:</u> red-engagement- I resources: <u>https</u> :: <u>https://www.pr</u> ction/growing-re THYENVIRONMEN e: -practices/share-	connection.com/blog/c //medium.com/@ginw 634f557ce69c c://traumainformedore eventioninstitute.org/t silient-communities-2-1 NTS/CLIMATECHANGE/I	<u>-blog-posts</u> Pages/social-resilience.aspx
2. Develop partnerships to support culturally and linguistically responsive, community-based mentoring and peer delivered services.	 a. Number of part developed to sum mentoring and delivered service b. Amount of Title allocated to me peer delivered 	upport peer- ces V funding entoring or	Oregon Peer Del Momentum Allia HOLLA: <u>https://h</u> Wisdom of the E Institute for You	Voice: https://www.ore livered Services resource ance: https://www.mag hollamentors.org/ Elders: https://wisdomo th Success: https://educ ory Action Research: htt	es: <u>https://www.</u> odx.org/ ftheelders.org/his cationnorthwest.org	story-and-projects/ prg/institute-for-youth-	

		Healing Centered Engagement (Shawn Ginwright): <u>https://medium.com/@ginwright/the-future-of-healing-shifting-from-trauma-informed-care-to-healing-centered-engagement-634f557ce69c</u> Multnomah County Equity & Empowerment lens: <u>https://multco.us/diversity-equity/equity-and-empowerment-lens</u>
3. Work with partners to create opportunities and spaces for connection to community, spirituality and culture.	 a. Number of partners engaged b. Number of cultural or spiritual community events held 	Oregon Cultural Trust - Find a Nonprofit: <u>https://culturaltrust.org/get-involved/nonprofits/</u> OCT County/Tribal Cultural Coalitions: <u>https://culturaltrust.org/about-us/coalitions/</u> Wisdom of the Elders: <u>https://wisdomoftheelders.org/history-and-projects/</u> Arts + Public Health Response: <u>https://www.artplaceamerica.org/blog/creating-healthy-communities-arts-public-health- america</u> Creating Healthy Communities Through Cross-Sector Collaboration: <u>https://arts.ufl.edu/site/assets/files/174533/uf_chc_whitepaper_2019.pdf</u> Healing Centered Engagement (Shawn Ginwright): <u>https://medium.com/@ginwright/the-future-of-healing-shifting-from- trauma-informed-care-to-healing-centered-engagement-634f557ce69c</u> Share Power with Communities resource: <u>https://healthequityguide.org/strategic-practices/share-power-with-communities/</u> Multnomah County Equity & Empowerment lens: <u>https://multco.us/diversity-equity/equity-and-empowerment-lens</u>

Foundations of MCAH: Assessment & Evaluation										
Goal: Data on social determinants of health, trauma, and equity are monitored and shared to inform and drive policy and program decisions.										
Foundations of MCAH – Assessment & Evaluation Strategy #1: Ensure all Title V performance measurement and evaluation includes a health equity focus which leads with										
race and ethnicity to identify and ac Strategy Lead: Maria Ness	dress disparities.	Priorities impacted by work on th	nis strategy:							
		⊠SDOH-E	⊠Well woman care	🛛 Breastfeeding	5					
		⊠Toxic stress/trauma/ACEs	Child Injury	⊠Bullying	⊠CLAS					
Local Level Activities	Local measures	Resources								
 Conduct local level evaluation of Title V efforts that engages end users, (e.g. consumer satisfaction surveys) particularly among marginalized communities such as BIPOC, LGBTQ+, homeless families, etc. 	 a. Number of local level evaluation projects completed b. Number of clients engaged in local level evaluation (surveyed, participated in focus groups, etc.) 	Resources CDC Program Evaluation Guide: https://www.cdc.gov/eval/guide/introduction/index.htm Racial equity in evaluation: https://www.racialequitytools.org/resources/evaluate https://publicpolicy.com/wp-content/uploads/2017/04/PPA-Culturally-Responsive-Lens.pdf https://www.ywboston.org/2019/05/your-evaluations-are-likely-biased-heres-what-you-can-do-about-it/								
 Revise local programmatic data collection forms and systems to implement Oregon Health Authority REAL D protocols. 	a. Number of data collection systems revised to adhere to REAL D protocols	REAL D guidance: https://www.oregon.gov/oh	a/OEI/Pages/REALD.as	<u>px</u>						

CLAS, and Trauma/ACES) knowledge						r analysis to add to th	ne Foundations of MCAH (SDOH, Equity,	
Strategy Lead: Maria Ness		Priorities impacted b	y work on t	his strategy:				
		⊠SDOH-E		⊠Well woman care	Breastfeeding	5		
		⊠Toxic stress/trauma	ACEs	⊠Child Injury	⊠Bullying	⊠CLAS		
Local Level Activities	Local measures		Resourc	es				
 Engage communities to ensure that needs assessment results and/or other MCH data is accessible and useful to them. 	 a. Number of co engaged b. Number of pa agencies enga 	•	https://n	by convening toolkit: csi.wested.org/resourc tb.ku.edu/en/table-of-	lusion			
2. Conduct community based participatory research with underrepresented or marginalized communities	a. Number of co participants b. CBPR project o	mmunity member completed (Yes/No)	CBPR principles and training: <u>https://guides.library.oregonstate.edu/CBPR</u> CDC guidance on CBPR: <u>https://www.cdc.gov/pcd/issues/2011/may/10_0045.HTM</u>					
		tion Strategy #3	Assess lo	ocal needs and condu	ct quality impro	vement to ensure alig	gnment of Title V efforts to the needs of	
diverse MCAH communities in Orego Strategy Lead: Maria Ness	on.	Priorities impacted b	Priorities impacted by work on this strategy:					
		⊠SDOH-E		⊠Well woman care	🛛 Breastfeeding	5		
		⊠Toxic stress/trauma	ACEs	⊠Child Injury	⊠Bullying	⊠CLAS		
Local Level Activities	Local measures		Resourc	es				
 Conduct local level community needs assessment with a focus on identifying disparities by 	 a. Number of ne activities com b. Number of pa needs assessn 	pleted rtners engaged in	Data equity training: <u>https://weallcount.com/workshop-landing-page/</u> Assessing community needs:					

race/ethnicity, disability, geography, etc.	C.	Number of community members engaged in needs assessment activities	https://ctb.ku.edu/en/assessing-community-needs-and-resources https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources
 Conduct local level quality improvement activities (e.g. PDSA cycles) focused on improving equitable and trauma informed services. 	a.	Number of continuous quality improvement activities completed	CDC Quality Improvement Guidance for Public Health: <u>https://www.cdc.gov/publichealthgateway/performance/index.html</u> <u>http://www.phf.org/focusareas/qualityimprovement/Pages/Quality_Improvement.aspx</u>

Foundations of MCAH – Assessment & Evaluation Strategy #4: Engage families and communities in all phases of MCAH assessment, surveillance, and epidemiology,								
including interpretation and dissemi Strategy Lead: Maria Ness	nation of findings.	Priorities impact	ted by work on t	his strategy:				
		⊠SDOH-E		⊠Well woman care	⊠ Breastfeeding			
		⊠Toxic stress/tr	rauma/ACEs	⊠Child Injury	Bullying	⊠CLAS		
Local Level Activities	Local measures		Resources					
 Develop partnerships with culturally specific and/or responsive organizations and their constituents to engage them in all phases of MCAH research, assessment, and planning activities. 	 a. Number of partner developed b. Number of partner convened or attended 	ship meetings	-	ouilding with diverse con .edu/en/table-of-conte		-injustice-and-inclusion		
 Fund impacted communities to participate in research and assessment activities. 	a. Number of commu funded				ming the racial	bias_in_philanthropic_f	funding	
 Include communities or individuals involved in research activities as equal partners in decision making (including resource allocation) based on the research outcomes. 	 a. Number of commu or agencies meanir in decision making 	ngfully engaged	https://ncsi.w	nvening toolkit: ested.org/resources/le .edu/en/table-of-conte		ng/ -injustice-and-inclusion		