



Healthier Together Oregon

PartnerSHIP Meeting

March 7, 1:00 – 3:00pm

Zoom:

<https://www.zoomgov.com/j/1609047098?pwd=UGd2aGcyNXBSblZRejc5ZktUNFpvUT09>

Meeting ID: 160 904 7098

Passcode: 806191

One tap mobile

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+16468287666,,1609047098# US (New York)

Meeting Objectives:

- Discuss OHA’s COVID-19 resilience plan
- HTO Policy Option Package development
- Accountability report: Behavioral health strategies

15 minutes **Welcome and team building time**

15 minutes **OHA’s COVID-19 resilience plan**

Cara Biddlecom, PHD Deputy Director

30 minutes **HTO Policy Option Package**

10 minutes **Break**

45 minutes **Accountability report out:** Provide culturally and linguistically responsive, trauma informed, multi-tiered behavioral health services and supports to all children and families.

*Jessie Eagan, OHA Child and Family Behavioral Health Manager, and
Grace Bullock, ODE Senior Mental Health Officer*

5 minutes

Wrap up and next steps

Next meeting is April 4th

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoken language interpreters
- Written materials in other language
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please contact Heather Owens at 971-291-2568 or heather.r.owens@dhsaha.state.or.us or 711 TTY.

Todos tienen derecho a conocer y utilizar los programas y servicios de la Autoridad de Salud de Oregon (OHA, por sus siglas en inglés). OHA proporciona ayuda gratuita. Algunos ejemplos de la ayuda gratuita que OHA puede brindar son:

- Intérpretes de lengua de señas y lengua hablada
- Materiales escritos en otros idiomas
- Braille
- Letra grande
- Audio y otros formatos

Si necesita ayuda o tiene preguntas, comuníquese con Heather Owens at 971-291-2568 or heather.r.owens@dhsaha.state.or.us or o 711 TTY.

March 7th PartnerSHIP meeting

- Closed captioning is available – select CC from your menu bar.
- Spanish interpretation is available. All attendees asked to select the Spanish or English channel following announcement.
- No formal public comment period will be held. Public invited to comment in the chat and/or email publichealth.policy@state.or.us.

PartnerSHIP Introductions

- PartnerSHIP members to introduce self by sharing name, pronouns, agency/communities you represent and any relevant updates from your agency/community
- Members of the public invited to introduce self in chat.

OHA's COVID-19 resilience plan

Cara Biddlecom, PHD Deputy Director

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HTO Policy Option Packages (POP) & Legislative Concepts (LCs)

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Legislative Concepts (LCs)

- Legislative concepts are used to create or change a state law, provide requirements for an agency, or establish a new program.
- Legislative concepts can be introduced by state agencies and/or legislators.
- LCs may or may not have a fiscal impact – or associated cost.
- OHA's Legislative Equity Team is considering your 7 prioritized strategies in creation of LCs to move forward in the 2023 legislative session.

Examples

HB4004 - Requires Oregon Health Authority to distribute grants to behavioral health treatment providers for staff compensation and workforce retention and recruitment.

SB4092- Modifies composition and duties of Oregon Broadband Advisory Council

SB1557 - Requires Housing and Community Services Department to administer affordable housing preservation rental assistance pilot program for tenants of housing being withdrawn from publicly supported housing.

Policy Option Packages (POPs)

- POPs are formal budget requests to the governor
- Only state agencies can submit a POP
- POPs ask for money for a two-year period.
- POPs typically resource staffing, grants and contracts, technology, training and partnership development.
- The PartnerSHIP has been invited to develop a POP to support HTO implementation.
- POPs may or may not be tied to specific legislation.

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POP Examples

Public Health Modernization – for local, tribal and state public health infrastructure

2017 – \$5 million

2019 – \$15 million

2021 - \$60 million

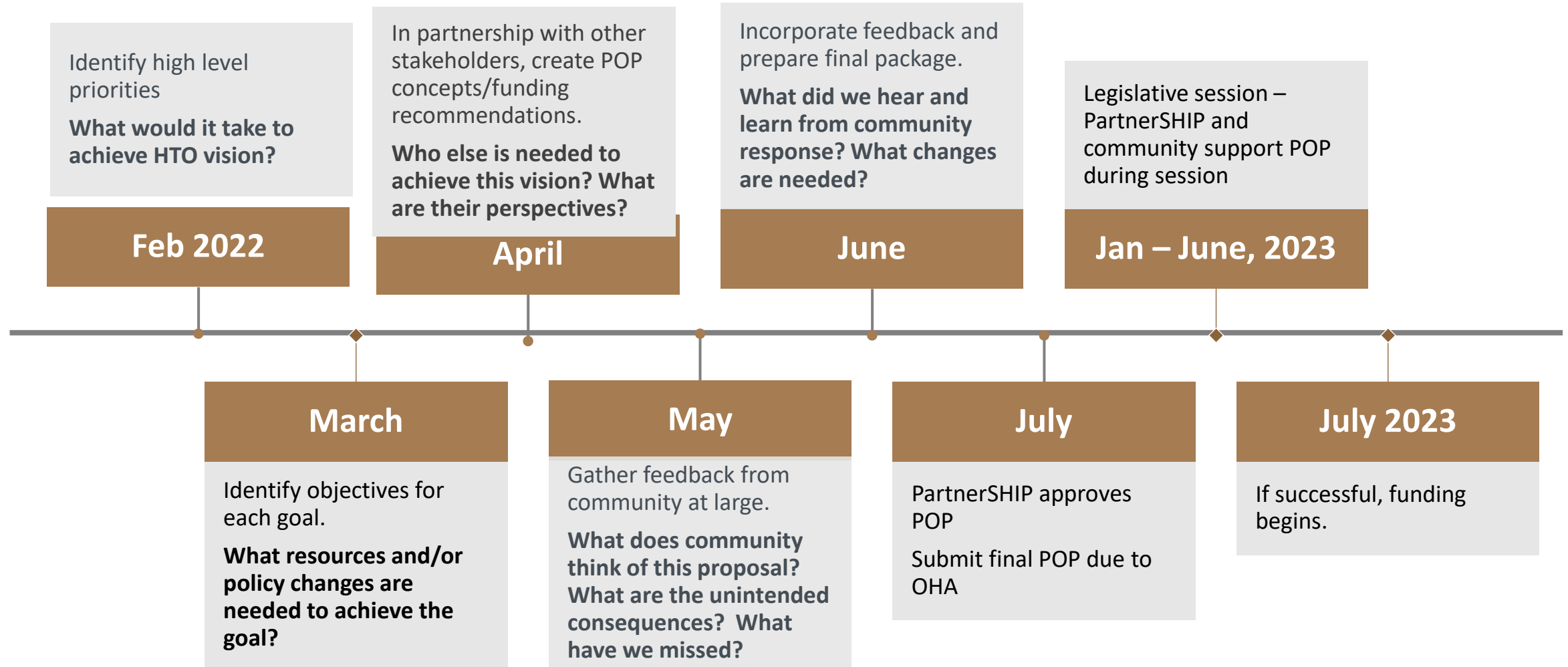
Family Connects – established universal home visiting program

2019 - \$4.6 million investment

2021 - \$7.8 million investments

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Policy Option Package Development and Engagement Timeline



HTO Policy Option Package

- State agency staffing
- Communications
- Contracts/grants for community health improvement plans
- Data and evaluation

HTO 2020 Dream Proposal

- **Staffing**

This proposal creates a new Social Determinants of Health Division within OHA. This could be a "shared service" with other state agencies, a new OHA Division, or a unit within External Relations. The divisions would be tasked with coordination of Social Determinants of Health (SDOH) strategies across OHA; relationship management and Memorandum Of Understanding development with other state agencies and cross sector partners; technical assistance to local partners; management of SDOH related contracting/grants. Utilize community input channels (eg. PHD Community Engagement Team, Regional Health Equity Coalitions, etc.) to inform policy changes within OHA and other agencies. Work would be specific to, but not limited to, HTO informed strategies. Staffing could be fully OHA sourced or shared with other state agencies such as ODHS, OHCS, ODE, Business Oregon, Department of Corrections, Oregon Cultural Trust/Oregon Arts Commission. Potential funding: CDC SDOH investments, state funding (OHA or other agencies)

- 1.0 PEM position for director
- 8.0 OPA4s to lead sector specific work:
 - Health and social services/safety net access
 - Health and education (including early childhood)
 - Health and housing
 - Health and economic development (higher education and workforce development, voc rehab, financial services/supports, business development, poverty reduction)
 - Health and criminal justice (carceral/law enforcement/courts)
 - Health and built environment (land use, transportation, parks and recreation, food systems)
 - Health and arts and culture (adding this in after feeling inspired by Summer of Soul doc)
 - Health and faith community
- 1.0 Public Affairs for communications support Would be responsible for developing communications resources at direction of PartnerSHIP and implementation staff; mass communication campaigns related to HTO, partners communications toolkit, monthly HTO update, website, social media, and more.
- 1.0 Research Analyst for data and evaluation
- 1.0 Legislative Affairs for HTO related legislation coordination
- 1.0 Fiscal Analyst to manage state and federal SDOH investments
- 1.0 Administrative Support position
- Move HTO implementation staff to this new unit.

- Move CHA/CHIP and HRS/SHARE/hospital community benefit that sits within Transformation Center. Provide technical assistance to all involved in CHA/CHIP work (not just through the CCO door as it is now). Would help to desilo the structure we currently have and tie "health improvement planning and investment" together.
- Move RHEC work here?
- Potential for additional staff to support community engagement and technical assistance as needed within the various cross-sector partnerships

- **Communication**

\$1M minimum annual budget for communications investments—this would include website maintenance, contractor costs for materials and graphics for HTO and campaigns, social media advertising, and costs related to implementing mass media campaigns that are outlined in HTO

- **Grants/contracts for implementation**

Funding for local implementation, technical assistance and capacity building. Must be equity focused. Funding would require alignment with CHIP and collaboration with cross-sector partners. Intended to gap-fill/incentive work already funded by CCOs, hospitals, and forthcoming health equity zones. Some potential ideas include:

- Investment for specific HTO strategy implementation based on PartnerSHIP priorities - contracts and grants to external organizations.
- Resources for convening local partners around specific strategies or set of strategies
- Public health system funding for LPHA CHA/CHIP coordination, implementation.
- Capacity building for population health surveillance and metrics (i.e. community-based participatory research, data analytics tools, GIS, data visualization.)
- Advocacy, coalition building and local policy work
- SDOH Accelerators (these could also be locally based staff funded by state – like an innovator agent but focused on cross-sector partnership development for CHIP implementation)– Based off of Colorado model. Community-based positions to convene sectors and support CHIP implementation.
- Communications – Funding local communities for communication support.
- Community of Health awards – similar to [RWJFs Culture of Health Awards](#)

- **PartnerSHIP support**

- Consider contracting out backbone role to external partner(s) – sustained and large five-year contract.

Break

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Accountability report out

Provide culturally and linguistically responsive, trauma informed, multi-tiered behavioral health services and supports to all children and families.

- *Grace Bullock, ODE Senior Mental Health Officer*
- *Jessie Eagan, OHA Child and Family Behavioral Health Manager*



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Strengthening Mental Health in Education 2.0 Initiative

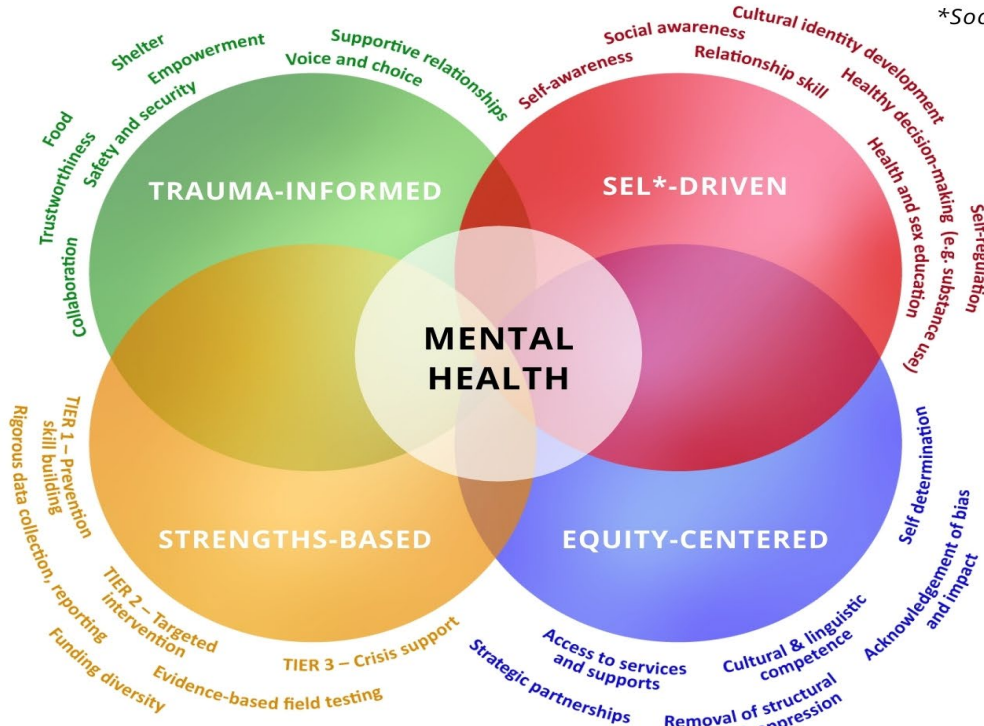
B Grace Bullock, PhD



Integrated Model of Mental Health

Mental health emphasizes strengths, resilience, and enhancing social-emotional abilities

**Social-emotional learning*



CONTINUUM OF CARE



Strengthening Mental Health in Education 2.0

*A multi-tiered, system-wide implementation of ODE's
Integrated Model of Mental Health*

Goal 1 ~ Mental health literacy

UNIVERSAL Foundational information on mental health/emotional support for students, families, staff, administrators, mental health professionals, community-based organizations and others that is strengths-based, equity-centered, and trauma- and SEL-informed.



Mental health/emotional support credentialing 1 & 2 ~

TARGETED Strengths-based, equity-centered, and trauma- and SEL*-informed mental health/emotional support training for school staff and administrators.

Goal 3 ~ Community Care Coordinator Pilot Project

SPECIALIZED Credentialed mental health/emotional support focused, strengths-based, culturally responsive, equity-centered, student/family system navigators.



Mental Health and Well-being

[Sign-up](#) to receive announcements and new resources!

Mental health refers to the emotional, social, cognitive, behavioral, physical and relational thriving of individuals and systems.

ODE believes that mental health is centered within a continuum of care that meets each person's needs for physical and emotional safety, security, social connection, identity, diversity and purpose.

ODE has a number of mental and behavioral health-focused initiatives that focus on the prevention, intervention and response to the mental health needs of school communities. These include:

- Mental Health Toolkit
- An Integrated Model for Mental and Emotional Health
- Mental Health Guidance & Resources
- Strengthening Mental Health in Education Initiatives
- Suicide Prevention (Adi's Act)
- School Safety & Prevention System (SSPS)
- Every Student Belongs



Healthier Together Oregon PartnerSHIP Meeting March 7, 2022

Jessie Eagan, Child & Family Behavioral Health Manager



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Child & Family Behavioral Health Unit

- Split into Subject Matter Expertise:
 - Mental Health
 - Substance Use Disorders
- Continuum of Care
- Infancy to Young Adulthood (0 – 25)
- Tribal Liaison
- Cross-Agency Partnerships:
 - Oregon Dept of Human Services
 - Oregon Dept of Education
 - Oregon Youth Authority
 - Public Health Division
 - OHSU

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Continuum of Care

- Prevention
 - Mental Health Prevention and Promotion
 - Substance Use Disorder Prevention
 - Suicide Prevention, Education, and Postvention
- Treatment
 - Early Childhood (infancy to school-age)
 - School-based Mental Health
 - Intensive In-home Behavioral Health Treatment
 - Day Treatment (Psychiatric and Substance Use programs)
 - Restorative Services; community and inpatient
 - Residential Treatment (Psychiatric and Substance Use programs)
 - State Hospital (Secure Children/Adolescent Inpatient)
 - Young Adults

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Investments In Progress

- Behavioral Health Workforce
- System of Care Advisory Council
- Interdisciplinary Assessment Teams
- Data and Metrics
 - HB 2086 (2021); additional analysts within OHA
 - Centralized access system updates
 - Emergency Department analysis and reporting
 - CFBH Data Dashboard

Investments In Progress

- Residential Treatment Capacity
 - Request for Proposals
 - Workforce study
 - Rate study
- Young Adults
 - Request for Proposals for additional Transitional Aged Youth homes
- Mobile Response and Stabilization Services
 - July 2022
 - 988 Implementation; January 2023
- Wraparound expansion

Challenges

- Centering communities of color – reaching out
- Workforce shortages
- Communication between Agencies
- Data
 - Inconsistent requirements and reporting
 - Administrative burden and COVID
- “Fail in” system
- Focus on adult system

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Get Involved!

- Children's System Advisory Council (CSAC)
- System of Care
- Office of Resilience and Recovery
- A Time for Families (Thursdays at noon via Zoom)
- Youth and Young Adult Engagement Advisory (YYEA)
- CFBH Newsletter

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Next Steps & Final Thoughts

Next meeting:

Monday, April 4th

Reminders:

- P'SHIP members eligible for compensation – invoice template is posted in Basecamp
- May 2nd meeting will be held in person in Portland. Persons travelling more than 70 miles are eligible for travel compensation, including mileage or airfare, hotel, parking, per diem for food and other misc. expenses.