Southern Oregon Early Learning Services
Agency Advisory Council

Date: 6/8/2018
Time: 10:00-12:00
Location: AllCare Health
1701 NE 7th Street, Grants Pass

Members in Attendance: Ann Ackels (Jackson County Public Health), Jessica Allen, (Advantage Dental), Peter Buckley (Southern Oregon Success), Susan Davis (Josephine County Library District), Cecilia Giron (LISTO), Anne Goff (Southern Oregon ESD EI/ECSE), Donna Lipparelli (Options for Southern Oregon), Darcy Larson (Southern Oregon ESD EI/ECSE), Adrienne Liufau (Kairos), Geoffrey Lowry (Oregon Child Development Coalition), Tami McGonagle (School District #6), Megan Pinder (Jackson County Library Services), Heidi Schultz (Douglas ESD EI/ECSE), Belle Shepherd (Primary Health of Josephine County/Jackson Care Connect), Pam Thompson-Arbogast (Southern Oregon ESD EI/ECSE), Shannon Young (Kid Time)

Via Zoom: Heather Olivier (Bridging Communities), Carrie Prechtel (211info), Kari Swoboda (All Care Health), and Mary Wolf (Child Care Resource Network)

Guests: Susan Abblitt (AllCare Health)

SOELS Staff Members Present: Rene Brandon, Teresa Slater, Chelsea Reinhart and Karen Johnson

CALL TO ORDER/WELCOME
René called the meeting to order at 10:07am.

ALLCARE MATERNAL CHILD HEALTH PROGRAM & BABE STORE
Susan Abblitt, Maternal Child Health Supervisor at AllCare Health, provided an overview of the outreach services they provide to pregnant women in the community. They work with pregnant women and children from birth through age four. The focus is on women who have not previously been in care coordination or are experiencing high-risk pregnancies. They see many mothers with substance use disorders, and work closely with Siskiyou Outreach Program to engage families. Siskiyou Outreach will do a “cold drop-in” and, if possible, Susan and her staff will complete an assessment, determine what the mother’s risk factors are and refer the family to the appropriate community resources. She and her staff of three also provide education on pregnancy and childbirth. Susan is a certified Lamaze childbirth educator, and another team member is a certified professional midwife. They also have staff who are trained in massage and lactation consultation.
They also offer incentives to AllCare members through the Babe Store, a program designed for pregnant women and children under three years old. The program rewards them by giving vouchers to purchase items such as baby monitors, baby wipes, clothing, sippy cups, etc. Vouchers are earned by going to see a doctor, or using community resources like WIC. All items in the store are brand new, purchased at Amazon.com or Walmart.com. Donations are not accepted, as AllCare is not a non-profit organization.

René advised that DHS Self-Sufficiency offers Pack n Plays to mothers who view a video on safe sleep. (Additional information provided by Danielle Ring, and noted in Program Updates section of minutes.)

COMMUNITY HEALTH ASSESSMENT
Belle Shepherd with Oregon Health Authority presented an update on community health assessment efforts in Jackson and Josephine Counties. She passed out copies of 2018 Community Health Assessment Community survey and flyer in English and Spanish.

➢ What is a Community Health Assessment (CHA)?
  ○ A way to collect data, both:
    ▪ Preexisting data from hospital claims, census data, and various surveys
    ▪ Information provided by community members and stakeholders
  ○ Takes a look at health indicators
  ○ Identifies strengths and needs
  ○ Prioritizes needs and leads to strategies for addressing those needs

➢ Plans and Processes Requiring Community Health Assessments:
  ○ Non-profit hospitals (who refer to Community Health Assessments as CHNA) are required by the IRS to complete CHNA every 3 years
  ○ CCOs are required by OHA every 5 years
  ○ County Public Health Departments seeking accreditation are required every 5 years
  ○ Federally Qualified Health Centers, Head Start/Early Learning are required every 2 years

➢ CHA Goals
  ○ Capture the current health status of a community
  ○ Identify the issues that need to be addressed
  ○ Collaborate with community partners to align priorities, programming and funding

➢ Key Indicators and Topics
  ○ Social, Economic, and Demographic
    ▪ Race and ethnicity
    ▪ Income, poverty and employment
  ○ Health Outcomes
  ○ Risk and protective lifestyle behaviors
  ○ Health care access and utilization

➢ Assessment Process
  ○ Engaged with firm in Boston called Health Resources in Action (HRiA), which has completed 80 assessments across the nation
  ○ January-April
    ▪ Compile existing data sources
  ○ May-June
• Gather information from focus groups and community forums, highlighting communities we would not normally hear from
  
  o What is coming up?
    • Online community survey open through July 3rd (printed copies passed out)
      https://www.surveymonkey.com/r/JRHACHA2018
    • July 12th will be a stakeholder meeting focused on forcers of change and local public health system
    • August 2nd will have meeting focused on prioritizing identified needs and strategizing
    • September through November will synthesis data and have draft report to share and gather feedback
    • Final public report will be available in December
  
  o Community Health Improvement Planning (CHIP)
    • CCOs and hospitals are required to have CHIPS that work to improve the community as a whole
    • CCO CHIPs are due June 2019
    • After CHA is complete, CHIP work, including alignment will begin

MENTAL HEALTH AWARENESS
SOELS has heard from stakeholders in the community that mental health is a critical issue and one of the primary challenges we are facing.

➢ May was Mental Health Awareness Month
➢ The Prevalence of Mental Illness in the United States (from National Alliance on Mental Illness)
  o 1 in 5 adults experiences mental illness in a given year
  o 1 in 5 youth will experience mental illness at some point in their life
  o 46% of homeless adults staying in shelters have mental health illness or substance abuse disorder
  o 20% of state prisoners and 21% of local jail prisoners have a recent history of a mental health condition
  o 70% of youth in juvenile justice systems have at least one mental health condition
  o 60% of all adults and almost 50% of all youth with a mental illness received mental health services in the previous year
  o African-Americans and Hispanic-Americans used mental health services at about half the rate of Caucasian-Americans in the past year and Asian-Americans at about 1/3 the rate
  o 50% of adults with mental illness report experiencing symptoms prior to age 14; 75% prior to age 24

➢ Consequences of Lack of Treatment
  o Mental illness costs America 193.2 billion in lost earnings each year
  o Adults with mental illness in the US die on average of 25 years earlier than others; largely due to treatable medical conditions
  o Over one-third (37%) of students age 14-21 and older with a mental health condition, who are served by special education, drop out – the highest dropout rate of any disability group
Suicide is the 10th leading cause of death in the US; 2nd leading cause in people aged 15-24
Each day, an estimated 18-22 veterans die by suicide
2 million people with mental illness are booked in jails each year; most without adequate treatment. They are released and most likely jailed again.

- **Local Resources**
  - Promoting awareness and resources on social media and partner meetings
  - CCO and Hub workgroup is working on:
    - A one-pager to help families and partners navigate mental health system
    - Coordinating 2 or 3 community presentations by mental health partners on available services each year
  - NAMI of Southern Oregon has a resource library at HHS, support groups for people living with mental illness, and support groups for families
  - Compass House in Medford is an internationally recognized clubhouse model for people living with mental illness; social isolation is a critical concern

- **How to Promote Mental Health Services Awareness & Access**
  - Reduce stigma of discussing mental illness
  - Share resources with every family you serve; many are struggling silently
  - Understand how families can access services so you can explain it to them
  - Know where to go for answers

**PROGRAM UPDATES**

- Legislative members of Joint Committee on Student Success came to Medford on June 5, 2018 and asked for suggestions to improve student outcomes in Oregon. They had roundtable discussions with local business and regional educational leaders, listening session with local students, toured regional education facilities, and held a public hearing.
  - Early Learning had three representatives at the roundtable, René Brandon, Susan Zottola with Grants Pass School District, who sits on SOELS Steering Committee, and T.J. Jessup, a parent representative who has provided great input to the Steering Committee
  - The most commonly shared concern was centered around behavior and mental health challenges
  - Susan Davis with Josephine Community Library advised that Kate Lasky was in attendance and advocated for the support of SOELS, emphasizing the effort that has been made to facilitate community partnerships

- About 70 people attended OHA’s public meeting in Medford regarding CCO 2.0 on May 11th – similar to the number who attended in Portland
- In an effort to coordinate efforts and reach desired outcomes, Southern Oregon Success will hold a Key Leaders event on June 28th at Inn at the Commons
- Every elementary school in Josephine County, and a couple in Central Point School District, is participating in a Summer Jumpstart program
- The HUB is recruiting new facilitators for Kaleidoscope Play and Learn Groups; an invite-only training offered on June 21st
Darcy Larson will be taking over for Heidi Schultz as EI/ECSE Coordinator for Douglas ESD
SOESD is recruiting for Program Supervisor – EI/ECSE, as Pam Thompson-Arbogast is retiring at end of June
Mary Wolf shared that staff and family gathered at Fichner Park on June 2, 2018 to celebrate the successful completion of the Preschool Promise year
CCRN’s migrant program will start in July and serve 35 children
Nurse-Family Partnership is working to address safe sleep, and is part of a coalition around the effort
Danielle Ring later provided additional information on the DHS Self-Sufficiency program that provides Pack n Play cribs for viewing a video on safe sleep. The program is for pregnant or new moms with children 12 months or younger. They must currently receive ERDS (childcare), SNAP (food), TANF (cash) or TA-DVS (Domestic Violence Survivor’s grant). After they view the video, a DHS worker submits a form and the mother is given a Pack n Play crib.

Meeting adjourned at 11:53 am
Submitted by K. Johnson