



**Coast to Cascades Community Wellness Network
STEERING COMMITTEE**

December 11, 2024

2:00 pm

Virtual - Microsoft Teams Meeting

Agenda

Topic	Disposition	Lead
Welcome Safety/Reliability Moment		Marty Cahill
Meeting Summary October 9, 2024	Approve	Marty Cahill
Federal/State Grants Reports (Consent) Oral Health Co-Location - (Ends April 30, 2025) Supporting Women & Youth - (Ends February 28, 2025) Helping Impact Women & Youth - (Ends August 31, 2025) Addressing Violence In Rural Oregon - (June 30, 2027) Communities	Approve	Linda Mann/Shelagh Baird Michelle Means Jolynn Meza Wynkoop Sommer McLeish
Partnership for Community Health	Information	Amy Young Lincoln County Public Health
Community Health Improvement Plan Process Update	Information	Sara Hartstein Taylor Gilmour
New Notice of Funding Opportunity (NOFO) HRSA Outreach Program	Information	Shelagh Baird
Coalition Updates Partners For Health Mental Health/SUD Regional Oral Health	Information	Dr. Jeannie Davis Jennifer Beckner Shelagh Baird
Behavioral Health Resource Networks Lincoln County - (Ends June 30, 2025) Linn County - (Ends June 30, 2025) Benton County - (Ends June 30, 2025)	Information	Jennifer Beckner Michelle Means Sara Hartstein
Next Meeting – February 12, 2025	Information	All
Gratitude Moment/Adjourn:	Information	All

Microsoft Teams meeting

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Coast to Cascades Community Wellness Network (CCCWN)
Steering Committee
Held Virtually - Microsoft Teams
2:00 p.m. – 3:00 p.m.
October 9, 2024
Meeting Summary

Attendance:

Marty Cahill, Maisa Athamneh, Shelagh Baird, Emma Deane, Jeannie Davis, Ed.D., Sara Hartstein, Kayla Hatley, Mary Landis, Sommer McLeish, Jolynn Meza Wynkoop, Ruby Moon, Thien Nguyen, and Shelley Hazelton

Guest:

Luis Acosta

Welcome:

Marty Cahill called the meeting to order and welcomed everyone.

Safety/Reliability Moment:

Marty Cahill asked if anyone would like to share a safety moment.

- **Sommer McLeish** – With time/season changes, just a reminder to have safety items in your car.
- **Marty Cahill** – As kids are back in school, please watch for kids in crosswalks and be cautious as we come up to Halloween and kids out in the dark.

Meeting Summary:

The August 14, 2024, CCCWN Steering Committee meeting minutes were presented. **Ruby Moon made a motion and Sara Hartstein seconded the motion to accept the meeting minutes as presented. The motion was voted upon and unanimously approved.**

Federal/State Grants Reports:

Health Resources and Services Administration (HRSA) Rural Health Care Services Outreach Program Oral Health Co-Location Project Grant Report:

A written report for the HRSA Rural Health Care Services Outreach Program Oral Health Co-Location Project Grant was noted and distributed prior to the meeting.

HRSA Rural Communities Opioid Response Program (RCORP) Implementation III Rural Communities Supporting Women and Youth (RC-SWAY) Grant Report:

A HRSA RCORP RC-SWAY Grant report and Work Plan Highlights was noted and distributed prior to the meeting along with the Performance Improvement Measurement System (PIMS) Report, Bi-Annual Progress Report, Work Plan, and Sustainability Plan.

HRSA Rural Communities Opioid Response Program – Implementation (RCORP-I) – Helping Impact Women and Youth (HIWAY) Project Grant for Lincoln County:

A HRSA RCORP-I HIWAY Project Grant report and Work Plan Highlights was noted and distributed prior to the meeting along with the PIMS Report, Bi-Annual Progress Report, and Work Plan.

- **Jolynn Meza Wynkoop** – The PIMS Report, Bi-Annual Progress Report, Work Plan, and full narrative was all submitted to HRSA at the end of September.

HRSA Rural Health Network Development Grant Addressing Violence in Rural Oregon Communities (AVIROC) Project Update:

A written report for the HRSA Rural Health Network Development Grant Addressing Violence in Rural Oregon Communities Project and Work Plan highlights was noted and distributed prior to the meeting.

Kayla Hatley made a motion and Sara Hartstein seconded the motion to approve and accept the HRSA Rural Health Care Services Outreach Program Oral Health Co-Location Project Grant written report, HRSA RC-SWAY Grant written report and Work Plan Highlights along with the PIMS Report, Bi-Annual Progress Report, full Work Plan Sustainability Plan, HRSA RCORP-I HIWAY Project Grant written report and Work Plan Highlights, along with the PIMS Report, Bi-Annual Progress Report, and Work Plan, and the HRSA Rural Health Network Development Grant Addressing Violence in Rural Oregon Communities written report and Work Plan Highlights as presented. The motion was voted upon and unanimously approved.

Language Assessment Project:

Luis Acosta presented information on the language assessment project – Presentation, analysis, and recommendations on the results of the survey applied to Spanish speakers on interpretation services in health care.

- Interpretation in the medical field is important. Has worked as an interpreter the last 12 years.
- Questions asked in the survey:
 - a. **What country do you live in? Available answers included Benton County, Lincoln County, and Linn County. Survey results:**
 - Benton County – 558 - 44% of the total.
 - Lincoln County – 403 - 32% of total.
 - Linn County – 313 - 24% of the total.
 - b. **In what country did you learn to speak Spanish? Answers participant had to choose from is listed below. Survey results:**
 - México – 523 – 41.05%.
 - Guatemala – 183 – 14.36%.
 - Honduras – 148 – 11.62%.
 - El Salvador – 99 – 7.77%.
 - Venezuela – 60 – 4.71%.
 - Nicaragua – 53 – 4.16%.
 - Columbia – 43 – 3.38%.
 - Ecuador – 34 – 2.67%

- Argentina – 32 – 2.51%.
 - Chili – 21 – 1.65%.
 - Dominicana – 16 – 1.26%.
 - Perú – 15 – 1.18%.
 - Puerto Rico – 8 – 0.63%.
 - Bolivia – 8 – 0.63%.
 - Cuba – 7 – 0.55%.
 - Uruguay – 7 – 0.55%.
 - Costa Rica – 6 – 0.47%.
 - Panamá – 5 – 0.39%.
 - E.E.U.U. – 4 – 0.31%.
 - España – 2 – 0.16%.
 - Guinea Ecuatorial
 - Paraguay
 - Other
- c. 83.67% of participants said they had learned Spanish, Mexico, Honduras, Guatemala, El Salvador, Venezuela, or Nicaragua.
- d. **In which state, province, or department did you learn Spanish? This was an open question; the participant would write in their own answer.**
- The survey revealed 304 different places of origin. 80% of participants come from 66 different places.

State, province, or department where they learned Spanish – México:

- Oaxaca – 132.
- Sinaloa – 100.
- Jalisco – 65.
- Guanajuato – 52.
- Michoacan – 47.
- Zacatecas – 16.
- Veracruz – 11.
- Puebla – 8.
- Chiapas – 7.

State, province, or department where they learned Spanish – Guatemala:

- Guatemala – 49.
- Huehuetenango – 41.
- Quetzaltenango – 37.
- Baja Verapaz – 5.
- Petén – 5.
- La Antigua – 4.
- San Marcos – 3.
- Cobán – 3.
- Escuintla – 3.
- Alta Verapaz – 0.

State, province, or department where they learned Spanish – Honduras:

- Tegucigalpa – 44.
- Yoro – 13.
- Santa Bárbara – 7.
- Valle – 6.
- San Pedro Sula – 6.
- Copán – 5.
- El progreso – 5.
- Comayagua – 4.

- Cortés – 3.
- El progreso – 3.

State, province, or department where they learned Spanish – El Salvador:

- Libertad – 21.
- San Salvador – 11.
- Santa Ana – 11.
- San Miguel – 9.
- La Paz – 5.
- Santa Ana – 5.
- La Libertad – 5.
- San Miguel – 4.
- Morazán – 4.
- San Vicente – 3.

State, province, or department where they learned Spanish – Venezuela:

- Caracas – 12.
- Apure – 6.
- Maracaibo – 5.
- Aragua – 3.
- Valencia 3.
- Ciudad Guayana – 2.
- Barquisimeto – 2.
- Amazonas – 2.
- Carabobo – 2.
- Sucre – 2.

State, province, or department where they learned Spanish – Nicaragua:

- Managua – 10.
- León – 3.
- Managua – 5.
- Masaya – 4.
- Masaya La laguna – 3.
- León – 3.
- Carazo – 2.
- Santo Domingo – 2.
- Chinandega – 2.
- Jinotepe – 2.

e. Did you learn Spanish in a city or town? Available answers included city or town.

- City – 65%.
- Town – 35%.

What country did you learn Spanish – Mexico:

- City – 337 - 64.4%.
- Town – 186 – 35.6%.
- Grant Total – 523.

What country did you learn Spanish – Honduras:

- City – 86 – 58.1%
- Town – 62 – 41.9%.
- Grant Total – 148.

What country did you learn Spanish - Guatemala:

- City – 117 – 63.9%.
- Town – 66 – 36.1%
- Grand Total – 183.

What country did you learn Spanish - El Salvador:

- City – 61 – 61.6%.
- Town – 38 – 38.4%.
- Grand Total – 99.

What country did you learn Spanish – Venezuela:

- City – 43 – 71.7%.
- Town – 17 – 28.3%.
- Grand Total – 60.

What country did you learn Spanish – Nicaragua:

- City – 30 – 56.6%.
- Town – 23 – 43.4%.
- Grand Total – 53.

f. What was your highest level of education? Available answers included:

- a. I did not go to school – 10.
- b. I started but did not finish elementary school – 21.
- c. I finished elementary school – 53.
- d. I started but did not finish middle school – 37.
- e. I did not go to middle school – 155.
- f. I started but did not finish high school - 235.
- g. I finished high school – 500.
- h. I started but did not finish college – 167.
- i. I finished college – 91.
- j. I have post-graduate studies – 5.
- k. Total: 1,274.

l. 59.9% of those surveyed stated that they had at least a high school education.

g. Have you had problems understanding other Spanish speakers from other countries or communities? Available answers included always, almost always, almost never, and never.

- Always – 64 – 5.0%.
- Almost always – 341 – 26.8%.
- Almost never – 541 – 42.5%.
- Never – 328 – 25.7%.
- Total: 1,274.
- It is worth noting that less than 26% of those surveyed said they had never had any problems understanding other Spanish speakers; the rest said they have had some type of communication problem even when speaking the same language.

h. How often do you speak Spanish? Answers included always, almost always, almost never, and never.

- Always – 410 – 32.2%.
- Almost always – 482 – 37.8%.
- Never – 52 – 4.1%.
- Almost never – 330 – 25.9%.
- Grand total: 1,274.
- Less than 5% of Spanish speakers indicate that they never speak Spanish at home.

i. Have you needed an interpreter at your medical appointments? Answers included yes, no, other (open answer; participants could write in their own response).

- Yes – 57.5%.
- No – 42.5%.

- j. **Did the interpreter use easy-to-understand Spanish? Available answers included yes and no.**
- Yes – 52%.
 - No – 46%.
 - Other – 2%.
- k. **Did you have any problems due to not having clear interpretation at your medical appointment? Available answers include yes or no.**
- No – 1,163 – 91.3%.
 - Yes – 111 – 8.7%.
 - Grand total: 1,274.
 - It is this group, close to 9% who perceived having had some kind of problem due to interpretation, on which improvement efforts should be focused. We leave the analysis of this perception of problems for other stages of this effort.
- l. **Do you remember any pleasant or unpleasant experiences when you used interpretation services at your medical appointment? What happened? This was an open response where the participant would write in their answer.**
- The survey team was tasked with classifying the responses by their content in the different categories.
 - Empty.
 - Neutral.
 - Thank you/Congratulations.
 - Pleasant experience.
 - Unpleasant experience.
 - Suggestion.
 - Standout responses.
 - Empty – 887 – 69.6%.
 - Unpleasant experience – 149 – 11.7%.
 - Neutral or not related – 142 – 11.1%.
 - Pleasant experience – 68 – 5.3%.
 - A little pleasant experience – 11 – 0.9%.
 - Standout response – 8 – 0.6%.
 - Acknowledgement/Congratulations – 5 – 0.4%.
 - Suggestion – 4 – 0.3%.
 - Grand total: 1,274.
- m. **Do you recall any pleasant or unpleasant experiences when using interpretation services at your medical appointments? What happened? The following are some of the answers, that in the opinion of the survey team, may be relevant.**
- Standout responses:**
- Interpreters should secure the quality of their communication because patients need to clearly understand what doctors are referring to.
 - I like it when the doctor and the interpreter take time to explain it to me.
 - I like it when people ask me if I understand everything.
 - I like to repeat in my own words what I have just been told.
 - I prefer an interpreter, even though I understand the language for the technical words, and I can ask and be sure that I understand.
 - I feel that the interpreter and the doctor had communication problems.
 - I had to ask the interpreter if what I understood was true.
- Acknowledgement/Congratulations:**
- Congratulations, everything is fine.
 - It was good.

- They do their job very well.
- No, everything is fine. Congratulations.

Suggestions:

- Is pleasant when the interpreter is respectful and clarifies the doctor’s explanation.
- I would have liked to have more explanation.
- I wish they would explain more complex things like diseases and treatments.

n. In the opinion of Acosta Services: Upon reviewing the results of the survey and based on the usual practice of interpretation, we allow ourselves the following recommendations:

- Preparing physicians and health care personnel to work with interpreters.
 - **Interpreter training** - We also believe that the improvement of interpreting services should be constant. One of the important issues to consider in the feedback to the interpreters should be the regionalization of Spanish and the probable use of slang of the speaker. Specific cases such as names of illnesses, treatments or body parts should be considered.
 - **Feedback in daily practice** - Although the result of this effort to better understand the problem has been satisfactory, at ACOSTA SERVICES we believe that the survey of the perception of the interpreting service should be a constant practice. Trends in overall numbers are not invariable constants. We suggest common marketing practices such as focus groups and direct surveys as tools for market analysis and a source of data for decision making.
- **Sara Hartstein** – Thank you for your presentation. Is impressed you received close to 1,300 responses.

Community Health Improvement Plan Process Update:

Sara Hartstein provided a Community Health Improvement Plan (CHIP) update.

- Close to wrapping up on the regional CHIP.
- Ruby Moon is also here and participates in the Partner Steering Committee.
- Priority/strategy areas include:
 - a. Access to Affordable Housing and Homelessness.
 - b. Access to Quality Care.
 - c. Behavioral Health.
 - d. Inclusion, Diversity, Anti-Racism, and Equality (IDARE).
- The Project Manager is going strong and getting familiar with the work occurring.
- Leveraging resources for goals and strategies and identifying gaps.
- The Partnership for Community Health presented at the CCO Summit last week and received a positive response. Included information on experience providing recommendations and getting partnerships started.
- Identifying the budget that includes cost sharing that includes a cost sharing plan and securing Memorandum of Understandings (MOU’s), or formal budget.
- **Ruby Moon** – Will have additional speaking engagements and taking things on the road. Will be providing information at the CCO Board meeting and joint Retreat. The group is trailblazing and setting up best practices.

Strategic Planning Further Discussion:

Shelagh Baird led discussions around strategic planning.

- Noted the “draft” outline for discussion – CCCWN Strategic Planning document.

Please provide feedback to Shelagh Baird we will the work with Brandan Kearney, Consultant to finalize. Will share with the full CCCWN in November. Feels the document captures everything and aligns with values, goals and priorities and aligns with the regional CHIP.

Coalition Updates:

Linn, Benton, Lincoln Partners for Health (Partners for Health) Update:

Dr. Jeannie Davis provided a Partners for Health update.

- The Partners for Health Coalition is not meeting in October.
- Had a great summit in August. Hoping to connect with the Violence Prevention grant as well for 2025.
- **Shelagh Baird** – We can focus on youth violence at the Violence Prevention Summit in 2025 and be able to leverage HRSA funding and keep in theme with youth.
- **Dr. Jeannie Davis** – In November, Jackson Street Youth Services will be talking with the medical students. This will be a great connection.

Regional Mental Health/Substance Use Disorder (SUD) Coalition:

Shelagh Baird provided an update for the Regional Mental Health/Substance Use Disorder Coalition.

- Finished with events around Recovery Month.
- Submitted the Behavioral Health Resource Network proposals for new funding.

Benton, Lincoln, Linn Regional Oral Health Coalition of Oregon (Regional Oral Health Coalition-ROHC) Update:

Shelagh Baird provided a Regional Oral Health Coalition update.

- The Coalition continues to meet quarterly.
- The Oral Health Coalition of Oregon is restructuring and developed SMARTIE (Strategic, Measurable, Ambitious, Realistic, Time-bound, Inclusive, and Equitable) goals.
- Looking at legislature around orthodontia coverage for Medicaid.
- Drafting the Sustainability Plan with the Oral Health Co-location grant that is due in November.

Behavioral Health Resource Networks Update:

Committee members reported on the Behavioral Health Resource Networks (BHRN's).

- **Sara Hartstein – Benton County:**
 - a. The Measure 110 Request for Proposals for funding were due by October 3, 2024, for the BHRN's. It is not an extension. It is an extremely competitive application and is for 4-years of funding. There are limited funds. No are no points for those that are currently working with the BHRN's. Oregon Health Authority has tightened its reigns on the application process. Is hoping smaller organization will still apply.
- **Mary Landis** – Agrees. The application was more intensive and complex. Samaritan Health Services submitted three applications – One for Linn County, one for Benton County, and one for Lincoln County. Oregon Health Authority will notify agencies approved for Measure 110 funding in January.
- **Thien Nguyen – Lincoln County and Linn County:**
 - Linn County** – Written report was distributed in packet.
 - a. Communities Helping All Negotiate Change Effectively (C.H.A.N.C.E.) – Opened five respite beds at their shelter, funded by RC-SWAY and IHN, to support individuals experiencing homelessness and in rehabilitation.

Lincoln County:

- a. Everything is going well with partners. Samaritan Treatment and Recovery Services (STARS) and Phoenix Wellness are doing collaborative outreach
- **Sara Hartstein – Benton County** – Partners applying for new Request for Proposal for funding with the BHRN along with others that are applying. As noted, there is limited funding.

Additional Business:

Members shared additional business.

- **Dr. Jeannie Davis** – The medical students will be doing sports physicals this month at Jefferson High School.

Next Meeting:

The next meeting is scheduled for December 11, 2024.

The full meeting of the CCCWN is scheduled for November 6, 2024, at Samaritan Lebanon Community Hospital.

2025 Meetings:

Members present during the meeting were asked if they would like to keep 2025 meetings to the second Wednesday of every other month at 2:00 p.m. Dates:

- February 12, 2025.
- April 9, 2025.
- June 11, 2025.
- August 13, 2025.
- October 8, 2025.
- December 10, 2025.

Members agreed to keep the meetings as noted above for 2025 (second Wednesday of every other month at 2:00 p.m. for the months of February 2025, April 2025, June 2025, August 2025, October 2025, and December 2025).

Gratitude Moment:

Members were asked if they had a gratitude moment they would like to share.

- Grateful to all who attended.

Adjourn:

With no further business to discuss, the meeting was adjourned at 2:55 p.m.

Respectfully Submitted,

Shelley Hazelton

Grants and Sponsored Programs

CCCWN Oral Health Co-Location Project

CCCWN Update – December 2024

Reporting Updates

- EPDH has seen 595 patients to date (May 1, 2024 – Nov. 21, 2025) in grant Year 4
 - 308 patients at SPCH
 - 287 patients at SNLH
- Sustainability Report draft submitted to HRSA by Nov. 15, 2024
 - Final report will be due 90 days after grant ends.
- Project Director working with Capital Dental to identify strategies to sustain funding.

Other Updates

- EPDH Leah Hitz started maternity leave on Nov. 21, 2024 and will return in Feb. 2025
 - She provided key hospital staff with resources for referrals, education materials during her absence.
 - No EPDHs who are SHS credentialed available to continue seeing patients during Leah's maternity leave.
 - SHS Credentialing process takes up to 90 days.
 - Project Director working with other community partners to continue outreach & education efforts during her absence.
- AHM Brands is continuing to develop media campaign materials for Spanish-language community members.





Rural Communities Supporting Women & Youth (RCSWAY) CCCWN Steering Committee Update December 2024

Samaritan Lebanon Community Hospital requested \$1,000,000 to implement the Rural Communities Supporting Women and Youth (RC-SWAY) project to reduce morbidity and mortality related to substance use disorder and opioid use disorder in rural Linn County, Oregon. Under direction of the RC-SWAY consortium, we will strengthen and expand SUD/ODU prevention, treatment, and recovery activities throughout rural Linn County.

Partners on the project include Samaritan Lebanon Community Hospital & Clinics (SLCH), Samaritan Treatment and Recovery Services (STARS), Family Tree Relief Nursery (FTRN), Linn County Health Department Alcohol & Drug Program (LCAD) and Community Health Centers of Benton and Linn Counties (CHCBLC).

RCSWAY Reporting

PIMS Report – Final

- PIMS Y3R1 (September 1st, 2023-February 29th, 2024) was submitted to HRSA March 29th, 2024.
- PIMS Y3R2 (March 1st, 2024-August 31st, 2024) was submitted to HRSA September 30th, 2024.

Biannual Progress Report – Final

- Y3R1 Biannual Progress Report (September 1st, 2023-February 29th, 2024) was submitted to HRSA April 2nd, 2024.
- Y3R2 Biannual Progress Report (March 1st, 2024-August 31st, 2024) was submitted to HRSA September 30th, 2024.

Sustainability Plan – Final

- Sustainability Plan Report 3 was submitted to HRSA September 30th, 2024.

Closeout Report– Final

- The final Close out Report is due to HRSA 90 days after the extension end date, 02/29/2025.

Year 3 Budget

- RCSWAY SUD initiatives will continue in rural East Linn County until February 28, 2025 (per the HRSA six-month extension approval).
- The RCSWAY media campaign is active in rural East Linn County. Initiatives aim to raise awareness about Substance Use Disorder (SUD), reduce stigmas and biases related to SUD among women, youth, and other marginalized populations, and promote SUD as a disease. Billboards and media efforts will be active until November 2024.
- RCSWAY funds allocated to purchase maternity items for women admitted to Samaritan Labor and Delivery and STARS in Lebanon continues to be offered to women needing supplies for pre and after birth. The funds were also utilized to procure necessary infant items.
- Ralston Academy hosted an event to raise awareness about Substance Use Disorder (SUD). The event focused on educating attendees about SUD awareness and prevention, featuring volunteers who shared their insights from lived experiences. RCSWAY funds were used to purchase sweatshirts promoting SUD awareness.

Prevention, Treatment, & Recovery Activities	Responsible Persons	Timeline	Progress
<p>li. LCAD Program will continue to provide and expand evidenced-based LifeSkills Training in elementary and middle school classrooms. Lebanon Community School District 9 Alternative High School Program, Ralston Academy, will provide prevention training and activities to high school students.</p>	<p>LCAD RALSTON ACADEMY</p>	<p>Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11, Q13, Q14</p>	<p><u>LCAD</u> <u>10/31/2024</u> Scio 6th Grade: 57 students; 10/3/2024 Scio 6th Grade: 57 students; 10/10/2024 Santiam 6th Grade: 51 students; 10/7/2024 Santiam 6th Grade: 51 students; 10/14/2024 Santiam 6th Grade: 51 students; 10/21/2024 Harrisburg 6th Grade: 68 students; 10/15/2024 Harrisburg 6th Grade: 68 students; 10/22/2024 Harrisburg 6th Grade: 68 students; 10/29/2024 Scio 4th Grade: 51 students; 10/4/2024 Santiam 4th Grade: 39 students; 10/7/2024 Pioneer 4th Grade: 49 students; 10/2/2024 Central Linn 4th Grade: 34 students; 10/2/2024 Riverview 4th Grade: 72 students; 10/17/2024</p> <p><u>RALSTON ACADEMY</u> <u>07/01/2024-11/31/2024</u> Ralston Academy hosted an event to raise awareness about Substance Use Disorder (SUD). The event focused on educating attendees about SUD awareness and prevention, featuring volunteers who shared their insights from lived experiences. RCSWAY funds were used to purchase sweatshirts promoting SUD awareness.</p>
<p>lj. Primary care clinics will continue to implement Screening Brief Intervention and Referral (SBIRT), Alcohol Use Disorder Identification Test (AUDIT), and Drug Abuse Screening Test (DAST) screening for all age-appropriate patients. LCAD will advocate for schools to screen middle and high school youth using the SBIRT.</p>	<p>SLCH and clinics CHCBLC LCAD</p>	<p>Q1-Q12</p>	<p><u>LCAD</u> <u>09/01/2024-11/31/2024:</u> LCAD continues advocating for schools to use screening tools like the SBIRT when they consider referring to us for early intervention or treatment.</p>
<p>2d. RC-SWAY will continue to strengthen the service integration model between physicians, mental health providers, dentists, local law enforcement and service providers to reduce barriers to treatment and recovery.</p>	<p>PD-DC SLCH STARS FTRN LCAD CHCBLC</p>	<p>Q1-Q4</p>	<p><u>STARS</u> <u>09/2024-11/31/2024</u> STARS PSS attended the 211 round table event and participated in a PSS Networking Partner meeting hosted at the Albany Library. Recovery Month tabling event was also hosted by RCSWAY PD, Lincoln County BHRN Grant Project Coordinator and RCSWAY STARS PSS to support prevention, treatment and recovery awareness. STARS PSS was invited to be a voting member of the SIT—Service Integration Team, which has helped meet the clients' needs.</p> <p><u>FTRN</u> <u>09/01/2024-11/31/2024</u> FTRN continues to work closely with SH Community Courts and coordinates well with all local resources in connecting clients with those services.</p> <p><u>LCAD</u></p>

			09/2024-11/31/2024 LCAD is collaborating with Ralston Academy in Lebanon to develop additional support services. The goal is to utilize the grant funds allocated to Ralston Academy to create a culturally and linguistically relevant evidence-based curriculum for high school-aged youth, their families, and caregivers.
2e. Peer Support Specialists will conduct outreach efforts to Maternity Care Coordinators to assist pregnant women in navigating the treatment and recovery system.	SLCH, STARS, FTRN	Q2-Q12	<u>STARS</u> 09/2024-11/31/2024 Gabby, the Maternity Care Coordinator at SLCH, has provided significant support for referrals. Many women have been referred for the discontinuation of tobacco and marijuana use, which has been the primary focus of the maternity care coordinator. STARS PSS has increased its presence at Obria. The coordinator and nurse frequently contact PSS for referrals. <u>FTRN</u> 09/01/2024-11/31/2024 Handouts continue to be provided to multiple agencies. Supporting women in treatment and providing transportation assistance to and from appointments and inform agencies of the Parent Café Support Group.
2f. Peer Support Specialists will conduct outreach efforts to schools and youth serving agencies to assist youth in navigating the treatment and recovery system.	FTRN	Q2-Q12	<u>FTRN</u> 08/01/2024-11/31/2024 Carter and other FTRN continues to attend the YST panel.
2g. Mental Health/SUD Clinicians will facilitate entry of local middle and high school youth into early intervention and treatment services to reduce stigma.	LCAD RALSTON ACADEMY	Q3, Q12	<u>LCAD</u> 06/2024-10/31/2024 Section 2g: Early Intervention services by month: Hours have been low in east Linn County, partly due to a provider being out on medical leave but also because fewer youth were engaging in services and/or receiving referrals with the end of the school year. March: Early Intervention Hours: 2.08 hours 06/2024 : 0 hours 07/2024 : 0 hours 08/2024 : 0 hours 09/2024 : Early Intervention Hours: 6.62 Hours 10/31/2024 : Early Intervention Hours: 3.9 hours (6 individuals offered support in rural parts of the county) <u>RALSTON ACADEMY</u> 09/2024-11/31/2024 Ralston Academy recently hosted a free event focused on raising awareness for SUD prevention, treatment, and recovery. Volunteers shared their personal experiences and insights. To promote SUD awareness, RCSWAY funds were used to purchase sweatshirts. In addition, Ralston Academy is collaborating with LCAD to develop a culturally and linguistically appropriate curriculum for high school students, their families, and caregivers. This curriculum will also be funded through RCSWAY dollars.
3d. FTRN Peer Support Group Leader will provide support groups, counseling and mentoring to Peer Support Specialists connected to the project.	FTRN	Q2-Q12	<u>FTRN</u> 09/2024-11/31/2024 Josh Pankau continues to facilitate the peer support group meeting held on Thursdays at 9 am with a wide variety of attendance across all Tri-County

3e. Support FTRN in expanding access of recovery support services.

PD-DC
FTRN

Q2-Q12

PD-DC
11/30/2024

On November 21st, RCSWAY PD, Lincoln County PC, and Jaime Montgomery, OPAHEC PC, hosted the Rural Health Tabling Event at SLCH. The tabling event aimed to express support and appreciation for our rural healthcare workers. We provided prevention, treatment, and recovery items such as STARS handouts, business cards, anti-stigma education, Naloxone “how to use”, encouraging words stickers and stress balls, to raise awareness, reduce stigma, and inform attendees about available resources for help. Naloxone was also distributed at the event. Cheryl Altice, a Public Health Analyst, was in attendance, and both RCSWAY PD and OPAHEC PC provided grant initiative updates along with information about the Rural Health Tabling Event.

RCSWAY PD continues to meet with RCSWAY partners at least once per week.

Helping Impact Women & Youth (HIWAY)

CCCWN Steering Committee Meeting Update - December 2024



CCCWN

COAST TO CASCADES COMMUNITY WELLNESS NETWORK

Samaritan North Lincoln Hospital requested \$1,000,000 to implement the Helping Impact Women and Youth (HIWAY) project to reduce morbidity and mortality related to substance use disorder and opioid use disorder in Lincoln County, Oregon. Under direction of the HIWAY consortium, we will strengthen and expand SUD/ODU prevention, treatment, and recovery activities throughout Lincoln County.

Project funding was awarded and began September 1, 2022. The funding was granted for three years and will last till August 31, 2025.

Partners on the project include Samaritan North Lincoln Hospital (SNLH), Samaritan Pacific Communities Hospital (SPCH), Samaritan Medical Group (SMG), ReConnections Counseling (RC), Samaritan House, Inc. (SH), NW Coastal Housing (NWCH), Lincoln County Health and Human Services (LCHHS), Faith, Hope and Charity, Inc. (FHC), Olalla Center (OC), Confederated Tribes of the Siletz Indians (CTSI), Lincoln County Sheriff's Office (LCSO), and Partnership Against Alcohol and Drug Abuse (PAADA).

Updates:

- HIWAY grant partners met on Thursday, December 5, 2024 from 10:00AM-11:30AM to discuss quarterly project updates.
- The PD/DC, CCCWN Chair, and SHS Grant Administration have met to solidify the Year 3 budget for the HIWAY grant.
- The PD/DC participated in the National Rural Health Day celebration/tabling event on November 21, 2024 at Samaritan North Lincoln Hospital.

Work Plan Highlights = updates

SUD/ODU Activities	Responsible Persons	Timeline	Progress
1i. Partners will develop and distribute culturally and linguistically appropriate education material for family members and caregivers on SUD/ODU prevention, treatment and recovery.	PD/DC, SNLH, CTSI, RCC, FHC, OC, PAADA	Q3, Q7, Q11	In Progress: In October, PAADA shared messaging related to the promotion of the Youth Leadership Academy, sober events, and alternative to candy for trick-or-treating.
1j. Offer training to the consortium, providers, and staff of local SUD/ODU treatment centers on proper coding and billing across insurance types.	PD/DC, SNLH	Q8	In Progress: The Grants Administration Specialist attended the HRSA RCORP brief overview of the 4-hour Coding and Billing Training. The training focuses on how participants can ensure their financial sustainability for SUD/ODU treatment via primary care and mental and behavioral health encounters. The training benefits include: <ul style="list-style-type: none"> • Understanding the roles of each team member and their relationships in the coding/billing process, • Determining service code billing options based on payor requirements, • Learning about services that can be billed between patient visits, • Learning how to maximize/increase reimbursement opportunities, • Learning how coding and billing helps to achieve progress towards Core Activities, NOFO Goals, and sustainability. <p>This training will be offered to the HIWAY & CCCWN consortium and if there is interest, the PD/DC will reach out to HRSA RCORP to set up a time to host the training.</p>
1k. Partnerships across the community and region will be leveraged to secure buy-in for project and ensure activities complement and not duplicate existing services. Specific services and activities that will be leveraged to support HIWAY are listed in the Methodology, Foundational Core Activities table.	PD/DC, SNLH, SPCH, SMG, RCC, CTSI LCHHS, OC, FHC, SH, LCSO, PADAA, NWCH	Q1-Q12	In Progress: In August, PAADA partnered with the Trinity United Methodist Church to begin offering community education events in Toledo, OR on the third Tuesday of every month. The site in Waldport that has been offering these community education events hosts the events on the first Tuesday of every month. In August, the communities learned about Xylazine, Fentanyl, and harm reduction. In September, they learned about Restorative Justice practices. In November, attendees will learn about the Signs & Symptoms of Cardiac Arrest.
2c. Provide evidenced-based prevention training to coalition youth.	CTSI, OC, PAADA	Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11	In Progress: PAADA just hosted their Fall 2024 Youth Leadership Academy on October 7, 2024. 45 youth were in attendance. Workshops focused on trauma informed care and restorative communication, peer support, neurological impacts of addiction and safe community spaces. All of the workshops served as the foundation for the development of the Healthy Communities Youth Advisory.
2f. Plan and conduct evidence-based prevention activities utilizing peer-delivered education targeting youth in Lincoln County.	PD/DC, CTSI, OC, PAADA	Q3, Q5, Q7, Q11	In Progress: The PD/DC will be meeting with CTSI to go over the planned activities and events that they have planned to fulfill this work plan item. PAADA has been in communication with Angell Job Corps who have expressed interest in the Peer Support presentation provided by Phoenix Wellness. PAADA will continue to work with staff at Angell Job Corps to explore the option of getting students into the Youth Era's Peer Plus training.
3b. Provide annual CME on stigma and SUD/ODU to providers and the community.	PD/DC, SNLH	Q3, Q7, Q11	In Progress: SHS hosted a SUD/ODU-related CME opportunity on Thursday, December 5, 2024 from 12:30PM-1:30PM. The title of the presentation was, "Opioid Use Disorder: Understanding & treating this chronic illness," and was offered to all SHS staff. Extending beyond this activity's target audience, the PD/DC is organizing two Community Conversations that will take place in May 2025 for all community members to learn about stigma related to substance use. Planning efforts have begun and more details are to follow.
3k. Provide recovery support services including case management, housing, employment, transportation, food, and childcare and doula support for pregnant women, to women, youth and marginalized community members with SUD/ODU.	RCC, SH, FHC, NWCH, CTSI	Q2-Q12	In Progress: The PD/DC will be meeting with CTSI to go over this new addition of Doula training to the HIWAY workplan.

Addressing Violence in Rural Oregon

Communities (AVIROC)

CCCWN Meeting Update –
November 2024



Samaritan Lebanon Communities Hospital requested \$1,200,000 to implement the Addressing Violence in Rural Oregon Communities (AVIROC) project to expand the capacity to improve health outcomes around child abuse, domestic violence, and human trafficking. Through AVIROC, CCCWN/PFH will develop a coordinated approach to addressing these issues by 1) Conducting outreach/education with staff, providers, and the public; 2) Expanding survivor services into our rural and underserved communities.

Project funding was awarded and began July 1, 2023. The funding was granted for four years and will last till June 30, 2027.

Partners on the project include Samaritan Lebanon Communities Hospital (SLCH), Samaritan Pacific Communities Hospital (SPCH), ABC House (ABCH), Acosta Services (AS), Center Against Rape and Domestic Violence (CARDV), Linn-Benton Anti-Trafficking Coalition (LBATC), and Sarah's Place (SP).

Updates:

- *ABC House continues to provide therapy services weekly in-person at the Sweet Home Family clinic.*
- *Center Against Rape and Domestic Violence (CARDV) has started their social media campaign and have new hires to work on the grant!*
- *Acosta Services is working to build an Action Plan to reveal to participants in Spring 2025.*
- *Language Assessment Project completed and findings were shared at Partners for Health on 11/12.*
- *Bilingual Media Campaign committee finalized details for Partner Toolkit for CCCWN.org website and local marketing on Facebook/Instagram, newspaper ads, audio ads, and billboards in Lincoln and rural Linn Counties.*
- *All reports that have been completed, including carryover requests. Next report is due April 2025.*

Work Plan Highlights:

Quarter 6 (October 1- December 31, 2024)

- Convene monthly meetings of CCCWN/PFH to guide activity coordination among organizations and w/in the Network (ongoing)
- Provide progress reports and project updates to the CCCWN Steering Committee and full CCCWN (ongoing)
- Provide copies of all required federal reports and documents to the CCCWN Steering Committee and full CCCWN (ongoing)
- Provide counseling for survivors of child abuse at Sweet Home Family Medicine Clinic one day per week (ongoing) Community partner ABC House offers counseling appointments in-person at the new Sweet Home Family Medicine Clinic (started on 2/1/24 at new site).
- Identify ongoing funding opportunities, including eligibility for VOCA and CAMI funding (ongoing)
- Identify best practices in child abuse, domestic violence, and human trafficking prevention and trauma-informed response (ongoing)
- Continue to collect and report data to CCCWN and CCCWN/PFH to ensure continued implementation of and support for strategies that address violence in rural communities (ongoing)
- Conduct classes about sexual violence prevention, including human trafficking, in the context of sexual health education for middle and high school students in rural east Linn Co (Q7) Ongoing facilitating Origins of Violence and Sexual Violence presentations in Middle and High Schools in rural Linn County continues.
- Conduct annual training for CCCWN/PFH members receive training on child abuse, domestic violence, and human trafficking in region (Q5)- Training Schedule: ~~9/10-CARDV, 11/12-Acosta-Services, 12/10- Sarah's Place, 1/14-ABC House, and 2/11- Linn/Benton Anti-Trafficking Coalition~~
- AS, PD, and consultant work with CCCWN/PFH and community to develop Action Plan (Q5-Q8)- Planning for event to rollout the Action Plan
- Provide outreach services and serve as community liaison to connect community members to agencies/services in rural east Linn County (Q5-Q8)- Focus on community presentations, locations for informational materials, and social media posts
- Develop and implement data tools to track incidence of human trafficking identified by participating agencies in Lincoln and east Linn Counties (Q5-Q16)- Currently the Linn-Benton Anti-trafficking Coalition is transitioning to a new chair/leader and activities will pick up once transition is completed.



CCCWN Steering Committee Update

Measure 110 Behavioral Health Resource Network (M110 BHRN)

Linn County

December 2024



Seven community-based and governmental organizations are working together to support individuals actively using substances or diagnosed with substance use disorder in Linn County. Organizations are providing services to individuals in the areas of Peer Support Services, Screenings and Behavioral Health Needs, Low Barrier Substance Use Treatment, Housing Services, Harm Reduction Services and Supported Employment Services. While the target populations are individuals who identify as Black, Latinx, Native American, LGBTQIA2S+, Asian, Pacific Islander, houseless, incarcerated, veterans, and anyone qualifies who has lived with the experience of SUD/OD.

Partners on the project include Albany Comprehensive Treatment Center (Albany CTC), CHANCE Recovery, Community Services Consortium (CSC), Emergence Addiction Counseling and Education Services of Albany, Faith Hope and Charity (FHC), Family Tree Relief Nursery (FTRN) and Samaritan Treatment and Recovery Services (STARS).

M110 BHRN Reports, Phase 3 updates:

- Q7 R7 was submitted to OHA Jul 8th, 2024.
- Q8R8 was submitted to the OHA Oct 15th, 2024.
- Q8R9 will be submitted to OHA by January 15th, 2024.

BHRN PC Updates:

- BHRN PC, HIWAY PD, and BHRN PC - Lincoln County are collaborating with Tedra Cobb, an independent contractor for the Recovery Center for Excellence, to host a Stigma Reduction Community Conversation Workshop [Link Here](#). This event is expected to take place in the Tri-County areas in May 2025. Community members and organizations will have the opportunity to participate in workshops throughout the week at locations convenient to them. These interactive sessions will focus on understanding substance use disorder (SUD) stigmas and raising awareness of personal biases related to SUD.
- BHRN PC continues to meet with Linn County BHRN Partners once per month. The next BHRN Linn County meeting is scheduled for November 17th, 2024 at 10 AM. OHA representatives Ariana White and Aune Tarango will be present to answer reporting and other BHRN related questions.

- On November 21st, BHRN PCs Linn and Lincoln County, along with Jaime Montgomery, OPAHEC PC, hosted the Rural Health Tabling Event at SLCH. The tabling event aimed to express support and appreciation for our rural healthcare workers. We provided prevention, treatment, and recovery items such as STARS handouts, business cards, anti-stigma education, Naloxone “how to use”, encouraging words stickers and stress balls, to raise awareness, reduce stigma, and inform attendees about available resources for help. Naloxone was also distributed at the event.

Partner Updates:

- CHANCE reported a record of 145 individuals served in one day at the Corvallis office, attributing to the need for assistance in the cold months and ongoing support programs, including the CHANCE pet assistance initiative.
- Albany CTC noted a significant increase in patient admissions in Albany and Lebanon, with 140 patients admitted under four months, largely due to the fentanyl shortage, and mentioned growth of their staff to 11 employees. CSC’s Saturday program is closed.