



Coast to Cascades Community Wellness Network

May 7, 2025 – 2:00 p.m. – 4:00 p.m.

SHS Walnut Blvd Building

2300 NW Walnut Blvd., Corvallis, OR 97330 - Walnut SHS Board Room

In Person and Microsoft Teams Meeting

Agenda

Time	Topic	Disposition	Lead
2:00 pm	Welcome/Introductions <ul style="list-style-type: none"> Safety Moment 		Marty Cahill
2:05 pm	Meeting Summary 11/6/2024	Action	All
2:10 pm	Consent Calendar <ul style="list-style-type: none"> Federal Grants Reports HRSA Oral Health Co-Location HRSA HIWAY HRSA AVIROC 	Action	Marty Cahill
2:15 pm	Community Health Improvement Plan Process Update	Information	Sara Hartstein/ Amy Young
2:25 pm	Strategic Plan <ul style="list-style-type: none"> Focus Areas 	Information	Shelagh Baird
2:35 pm	Grant Funding <ul style="list-style-type: none"> Subcommittee 	Information	Shelagh Baird
2:50 pm	Media Moments <ul style="list-style-type: none"> AVIROC Recovery City 	Information	Sommer McLeish Jolynn Meza Wynkoop
3:00 pm	Updated Charter	Action	Shelagh Baird
3:10 pm	Measure 110/BHRN Lincoln County Benton County Linn County	Information	Jennifer Beckner Sara Hartstein Thien Nguyen
3:20 p.m.	Survey – Community Engagement	Information	Shelagh Baird

3:30 pm	Coalition Updates Regional Oral Health Coalition Partners for Health Regional Mental Health/SUD	Information	Shelagh Baird Dr. Jeannie Davis Jennifer Beckner/ Heidi May Stoulil
3:40 pm	Additional Business/Announcements <ul style="list-style-type: none"> • Develop Land Acknowledgement • Staffing Updates 	Information	Shelagh Baird/ All Shelagh Baird
3:55 pm	Next Meeting <ul style="list-style-type: none"> • November 6, 2025 – 10:00 am Samaritan Lebanon Community Hospital 	Information	All
4:00 pm	Adjourn		

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Coast to the Cascades Community Wellness Network (CCCWN)

Fall Meeting

Samaritan Lebanon Community Hospital
525 N Santiam Hwy, Lebanon, OR 97355

and through Microsoft Teams

12:00 p.m. – 1:20 p.m.

November 6, 2024

Attendance-Members: **Anne Daly**, VP-Chief Compliance Officer-Samaritan Health Services (SHS); **Jeannie Davis, Ed.D.**, Western University of Health Sciences-Lebanon Campus; **Bryan Decker**, Finance Director, Communities Helping All Negotiate Change Effectively (C.H.A.N.C.E.) Recovery; **Taylor Gilmour**, VP Foundations-SHS; **Sara Hartstein**, Interim Deputy Director, Benton County Public Health; **Wendy Hausotter**, Community Member; **Kelley Kaiser**, SVP-Chief Admin Officer-SHS; **Jennifer Meckley**, Superintendent, Lebanon Community School District; **Curtis Landers**, Lincoln County Sherriff; **Lesley Ogden, M.D.**, VP-CEO-Samaritan North Lincoln Hospital/Samaritan Pacific Communities Hospital; **Stephan O’Hair**, Interim Executive Director, Community Outreach, Inc; **Jennifer Thelander**, Development Manager-C.H.A.N.C.E.; **Ryan Vogt**, Executive Director, Community Services Consortium-Oregon Cascades West Council of Governments

Staff/Other Representatives: **Maisa Athamneh**, Senior Grants Specialist-Grants and Sponsored Programs-SHS; **Shelagh Baird**, Network Director, Health Resources and Services Administration (HRSA) Oral Health Co-Location Grant-Grants and Sponsored Programs-SHS; **Beatriz Botello-Salgado**, Nutrition Education Program Coordinator, OSU, Lincoln County Extension Services; **Alicia Bublitz**, Manager-Social Determinants-Samaritan Health Plans; **Todd Jeter**, Director-Behavioral Health-Samaritan Health Plans; **Hyrum Keppner**, Administrative Fellow-SHS; **Mary Landis**, Director-Grants and Sponsored Programs-SHS; **Sommer McLeish**, HRSA-Addressing Violence in Rural Oregon Communities Grant-Grants and Sponsored Programs-SHS; **Michelle Means**, Rural Communities Supporting Women and Youth Grant-Grants and Sponsored Programs-SHS; **Jolynn Meza Wynkoop**, HRSA Helping Impact Women and Youth (HIWAY) Project Grant for Lincoln County-Grants and Sponsored Programs-SHS; **Thien Nguyen**, Linn/Lincoln County, Behavioral Health Resource Network-Grants and Sponsored Programs-SHS; **Kacey Urrutia**, Manager, Community Benefit/Health Education-SHS; and **Shelley Hazelton**, Grants and Sponsored Programs-SHS

Welcome/Introduction/Safety Moment:

Shelagh Baird called the meeting to order at 12:00 p.m. and welcomed everyone and led introductions.

Safety Moment:

Attendees were asked if they would like to share a safety moment.

- **Kelley Kaiser** – Caution when foggy – Vehicle automatic lights may not turn on – Stressed the importance to make sure and check that lights are turned on.

Meeting Minutes:

Presented the May 15, 2024, CCCWN meeting minutes. **Wendy Hausotter made a motion and Dr. Jeannie Davis seconded the motion to approve the May 15, 2024, meeting minutes as presented. The motion was voted upon and was unanimously approved.**

Consent Calendar: Grant Reports:

Health Resources and Services Administration (HRSA) Rural Communities Opioid Response Program (RCORP) Implementation III Rural Communities Supporting Women and Youth (RC-SWAY) Grant Update:

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

HRSA Rural Health Care Services Outreach Program Oral Health Grant Co-Location Project Update:

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

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 written 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.

HRSA Addressing Violence in Rural Oregon Communities (AVIROC) Grant Update:

A written report and Work Plan Highlights for the HRSA AVIROC grant was noted and distributed prior to the meeting.

Kelley Kaiser made a motion and Dr. Lesley Ogden seconded to approve the consent updates and reports for the HRSA RC-SWAY Grant, and PIMS Report, Bi-Annual Progress Report, Work Plan, and Sustainability Plan; the HRSA Rural Health Care Services Outreach Program Oral Health Grant; the HRSA RCORP-I HIWAY Project Grant, and PIMS Report, Bi-Annual Progress Report, and Work Plan; and the HRSA Addressing Violence in Rural Oregon Communities Grant and Work Plan Highlights. The motion was voted upon and unanimously approved.

Department Changes and Staffing/Department Transition:

Taylor Gilmour shared information about the structure of grants and community benefit activities and the renaming of the Community Health Promotion Department.

- The **Finance** department will continue to be responsible for the regulatory and financial aspects of community benefit data collection and tracking, Community Benefit Inventory for Social Accountability (CBISA) database administration and reporting, and Oregon Health Authority (OHA) and Internal Revenue Service (IRS) reporting.
 - a. **Keith Gabensky**, Tax Program Manager – Is the CBISA administrator and continues to be responsible for associated financial reporting to OHA and the IRS.

- Community Health Promotion is now the **Grants and Sponsored Programs Department** and will focus on grant-seeking, administration, compliance, and program management, including Health Resources and Services Administration funded programs, as well as support of the Coast to Cascades Community Wellness Network.
 - a. **Mary Landis** will lead the **Grants and Sponsored Programs** team in her new role as Director of Grants and Sponsored Programs.
 - b. **Maisa Athamneh** will serve as the Senior Grants Specialist, expanding her portfolio of full cycle grant management support.
 - c. **Shelagh Baird** has been serving as the Interim Network Director of the Coast to Cascades Community Wellness Network and has accepted the permanent Network Director role. She will lead the team overseeing the HRSA/CCCWN grants and support the CCCWN partnerships throughout the region. The former Community Health Promotion team will report to Shelagh Baird.
 - d. **Rochelle (Shelley) Hazelton** will serve as Project Coordinator supporting grants, community benefit and financial tracking and reporting.
- The **Community Health and Research Department** will be responsible for aligning Samaritan Health Services' community health goals, which includes producing Community Health Needs Assessments and Community Benefit Plans for each Samaritan hospital, partnering on the Regional Community Health Assessment and Community Health Improvement Plan, and leading Samaritan's Community Benefit Advisory Council and social accountability investments.
 - a. **Paulina Kaiser** will continue to lead the **Community Health and Research** team (*previously SHS Academic Affairs/Health Education/Research & Quality*) in her new, expanded role as Director of Community Health and Research.
 - b. **Kacey Urrutia** will serve as the Manager of Community Benefit and Health Education with oversight of community benefit assessments and planning and partnering with the community to offer health education programming and improve community health through strategic investments.

Regional Community Health Improvement Plan Process Update:

Sara Hartstein provided a Regional Community Health Assessment and Improvement Plan update.

- They are getting ready to launch the Partnership for Community Health website. It will host the Community Health Needs Assessment and Community Health Improvement Plan reports, data dashboards, and community impact narratives.
- The new Project Manager has been connecting regional partners and looking at gaps. There will be a focus on the Inclusion, Diversity, Anti-Racism, and Equity (IDARE) priority areas and pulling the work group together.
- The Partnership for Community Health will be discussing finances and looking at the 2025 budget project, looking at a 3–4-year budget and cost sharing and having inter-governmental contracts in place.
- An additional goal is to conduct a regional health equity assessment. Will collaborate with the partners on the Linn, Benton, Lincoln Health Equity Alliance group and identify a third party to help work with the Alliance. We do not have the capacity to do inhouse and would like to have a more neutral party involved. All partners are engaged in the community and priority process. Will look at what we did well and areas for improvement.
- **There were 4 priorities areas identified for the Regional Community Health Improvement Plan:**
 - a. Access to affordable housing and homelessness.

- b. Access to quality care.
 - c. Behavioral Health.
 - d. Inclusion, Diversity, Anti-Racism, and Equity.
- Sara Hartstein noted that she would like to include the Regional Project Manager for future meetings to provide updates.
- Will continue to share priority areas and goals.

Strategic Plan Update:

Shelagh Baird provided a Strategic Plan update. A “draft” copy of the CCCWN Strategic Planning document was distributed prior to the meeting and included in the agenda packet. This is a three-year planning document.

- At the May 15, 2024, meeting, there were two technical advisors for our HRSA grants out of Georgia State that helped walk us through a strategic planning process to make sure we better align with the Regional Community Health Improvement Plan priorities.
- The first page of the Strategic Planning document lists the CCCWN priority areas and those key themes that are part of the Regional Health Needs Assessment.
- In terms of the CCCWN Network priorities over the next three years, with the CCCWN’s initial strategic planning meeting there were four primary focus areas that included:
 - a. Workforce Development.
 - b. Diversity, Equity, and Inclusion.
 - c. Mental and Behavioral Health.
 - d. Substance Use Disorder.
- Do we want to keep these as the focus areas, and does it align with the others listed as part of the Regional Health Needs Assessment? Those key health themes from the 2022-2026 Regional Health Assessment include – Access to Affordable Housing and Homelessness; Access to Quality care, Equity, Diversity, and Inclusion, Food Insecurity and Access, Healthy Youth and Families, Mental Health, and Substance Use and Misuse. Also, do we want to look at other agencies and their Health Needs Assessments in our region?
- **Taylor Gilmour** – Would love to see how things align with different Health Needs Assessments in our region and see the different intersection points.
- **Ryan Vogt** – Have not seen the Health Needs Assessment. Can share what Community Services Consortium has when finalized and can share the Oregon Cascades West Council of Governments plan around seniors that will be published in February.
- **Shelagh Baird** - Please further review the CCCWN Strategic Planning document and let her know if there are any suggested changes.

Funding Update/Discussion:

Shelagh Baird led discussions around different funding opportunities.

- A new HRSA grant is coming out. It is a four-year Rural Outreach Grant with \$300,000 a year for four years. Are there innovative things or needs in the community we can focus on? It does need to be rural. It would be Lincoln and could include East Linn County as well.
 - a. Our HRSA Oral Health Co-Location program is part of a Rural Outreach Grant.
 - b. **Alicia Bublitz** – Would suggest a project for pregnant preventive prenatal care. Trying to move toward the Nurture Oregon Model in Linn County. Have satellite services in Benton County. IHN-CCO funded a Delivery System Transformation (DST) project with an easy access prenatal clinic set up. If there is a way to expand this, that would be helpful. They have an excellent program in Medford.

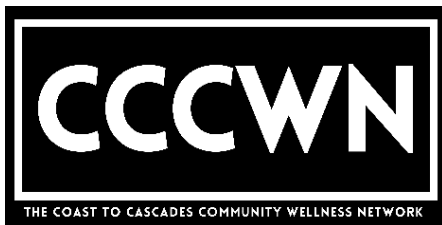
It includes wrap around services, prenatal services, postpartum services, substance use disorder (SUD) housing, a home program – All of these are pieces. It is a new idea with no buildings. With our current program, IHN-CCO DST Committee funded the initial project with seed money for a Mid-Wife’s time and established in Linn County with Benton County as a satellite location. This would help meet those needs in our communities around pregnant women and SUD.

- c. Reconnections Counseling has space in Benton County.
- d. **Michelle Means** – Would suggest something in support of behavioral health care workers or services for youth. This is a big gap area. We do currently have some current funds for youth with a couple of our grants. Maybe look at more evidence-based trainings for youth, parents, and caregivers.
- e. **Shelagh Baird** – If anyone else has any further ideas, let her know. We want to meet a need in our communities and would like some innovative ideas and address needs that are not currently being met.

CCCWN Logo:

Jolynn Meza Wynkoop led discussions around the CCCWN logo.

- At the August CCCWN Steering Committee there was discussion on the CCCWN name and logo standardization. There have been different name and logo variations. The CCCWN Steering Committee agreed to accept the name, **“Coast to Cascades Community Wellness Network”** and can have the word **“The”** at the beginning of the title in some instances.
- CCCWN Steering Committee members also agreed the main logo should be the rectangle logo black/white or white/black and we can use the version with waves and mountains for other marketing type items, etc. This would eliminate the circular logo. Examples of the logo to be used are listed below.



- **Kelley Kaiser** – Likes the version with the waves and mountains.

CCCWN members agreed with the recommendations from the CCCWN Steering Committee for the name and logos changes.

Charter Review:

Shelagh Baird led discussion around the CCCWN Charter. The 2015 version of The Coast to the Cascades Community Wellness Network was shared.

- **Title** should be changed to read, “The Coast to Cascades Community Wellness Network.”
- **Article 1. Name – Section 1.** – *Change to read, “The name of the group shall be the Coast to Cascades Community Wellness Network (CCCWN).”*
- **Taylor Gilmour - Article IV. Membership – Section 1.** – Currently reads, “Member partners shall include key leaders and executives that have an interest in issues of the overall health needs for children and adults in Benton, Lincoln, and Linn County areas.” *Would suggest changing “children and adults” to “overall health needs for all people in Benton, Lincoln, and Linn County areas.”*
- **Article IV. Membership – Section 2.** – It was noted that membership contributions are voluntary. Want to make sure we keep this statement of “voluntary.”
- **Article IV. Membership** – Would like to **add a Section 3** – Related to attending meetings or having some attend in your place if you are unable to attend. Under Section V. Steering Committee under Section 4 it does note that “members shall actively participate in CCCWN meetings each year.” *So, adding some language about attending meetings or delegated someone to attend in your place would be appropriate.*
- **Article V. Steering Committee – Section 3.** – “The Steering Committee will meet to develop agenda and review activities of the CCCWN.” The Steering Committee does meet every other month, has an agenda, and discusses activities and future agenda items.
- **Wendy Hausotter – Article VI. Officers – Section 6** – “Terms of office shall be reviewed annually.” Are we currently doing this?
 - a. **Shelagh Baird** – Marty Cahill has been Chair for the CCCWN and has indicated in the past that he is happy to still be Chair. *Will follow up with him.*
- **Article VII. Meetings – Section 1.** – Talks about the CCCWN meeting twice a year and meetings rotating between each of the counties to include Benton, Lincoln, and Linn. We have been meeting each year with one meeting in Lincoln County and usually have done a meeting in Lebanon or Linn County. Do we want to try to meet in 2025 in Benton County for one of the meetings? At the Samaritan Health Services Walnut Blvd. Building there is a Board room that might be an option for meeting. *Members present agreed to have the May 2025 meeting in Benton County at the Samaritan Health Services Walnut Blvd. Building, if the Board Room is available.*
- **Ryan Vogt** – The full group meets twice a year. Is the timeliness working?
 - a. **Shelagh Baird** – The CCCWN Steering Committee does meet every other month. We do send out emails and keep the group apprised of different activities as needed. Members are given the opportunity to respond.
- **Article VIII. Staffing – Section 1.** – *Change – “Staffing of the CCCWN will be provided by the Grants and Sponsored Programs Department.”*
- **Article VIII. Staffing – Section 2.** – Do we want to add some related to staff overseeing the CCCWN website and updates to the website? This may fall under “other information.” Jolynn Meza Wynkoop noted that role of staff expanded so could do a Section 3. *Shelagh Baird noted she would work at rewording this.*

- **Article IX. Roles and Responsibilities – Section 2.** – Can this be reworded?
- **Ryan Vogt - Article IX. Roles and Responsibilities – Section 5.** – “The CCCWN Chair will endorse requested letters of support that align with the vision and mission of the CCCWN.” Is the process that the Chair receives, gets feedback on letters, signs, and takes to group?
 - a. **Kelley Kaiser** – Within scope of Charter, outline is fine. Can pull in Steering Committee as needed.
 - b. Do we need to specify in the Charter or specify or go to officers or Steering Committee?
 - c. **Shelagh Baird** – *Will follow up with Marty Cahill.*
- **Wendy Hausotter – Article IX. Roles and Responsibilities – Section 1. And Section 4.** – These are redundant.
 - a. **Ryan Vogt** – Section 2. – Notes the CCCWN Steering Committee reviews and approves the grant and foundation application that are forwarded to the full CCCWN.
 - b. **Wendy Hausotter** – Section 4. – Is more redundant. Maybe look at combining Section 2. and Section 4.
- **Shelagh Baird** – *We will make the necessary changes to the Charter and bring back to the May meeting for review.*

Kelley Kaiser made a motion to nominate Marty Cahill to be the Chair for the CCCWN full Network and CCWN Steering Committee. Ryan Vogt seconded the motion. The motion was voted upon and was unanimously approved.

Measure 110 Behavioral Health Resource Network (BHRN) Updates:

Measure 110 BHRN updates were provided.

- **Thien Nguyen – Lincoln County** – Samaritan Treatment and Recovery Services (STARS) and Phoenix Wellness have been collaborating on events. Everything else is business as usual.
- **Sara Hartstein – Benton County** – The BHRN is meeting monthly and is planning to submit for new funding. Some partners that were not funded are applying again along with additional partners.
- **Michelle Means – Linn County:**
 - a. A written report for the Measure 110 BHRN for Linn County was noted and distributed prior to the meeting.
 - b. Linn partners are busy trying to meet the service demands of the community.
 - c. C.H.A.N.C.E. opened the respite beds at their shelter, funded by RC-SWAY and IHN, to support individuals experiencing homelessness and in rehabilitation.

Coalition Updates:

Coalition updates were provided.

- **Shelagh Baird – Benton, Lincoln, Linn Regional Oral Health Coalition of Oregon (Regional Oral Health Coalition):**
 - a. The Coalition meets quarterly and reviews activities for the Oral Health Co-Location Program for Lincoln County. We are in year four of that grant.
 - The Expanded Practice Dental Hygienist (EPDH) for the coastal facilities will be going on family leave in a few weeks.

- The EPDH has been providing community outreach and engagement and outreach is also being provided to the Spanish community at different events.
 - A referral flow chart was developed for clinicians in the hospitals in Lincoln County and a tool and resource list.
 - Working on the Sustainability Plan for the grant.
 - b. At a recent meeting, discussed a program at Mercy Medical Center that modeled their program after ours and will start billing for their program so we will be following up with them regarding this process.
- **Dr. Jeannie Davis – Linn, Benton, Lincoln Partners for Health:**
 - a. Will be meeting next Tuesday. The Coalition has been meeting monthly.
 - b. We are in the planning stages for our next summit for 2025. Having conversations about combining our yearly summit with the Violence Prevention Summit.
- **Jolynn Meza Wynkoop – Regional Mental Health/Substance Use Disorder Coalition** – The Coalition meets monthly and is very well attended with 25-30 people in attendance including public health officials, law enforcement agencies, partner agencies, and others. There are monthly conversations around overdoses and tracking, data sharing, and awareness of upcoming substances and different events occurring throughout our communities. We do provide a monthly overdose report from Samaritan Health Services and other partners report out numbers and trends as well.

Additional Business:

Additional business was discussed.

- **Michelle Means** - We will have National Rural Health Day tabling events in November at Samaritan Lebanon Community Hospital (SLCH), Samaritan North Lincoln Hospital (SNLH), and Samaritan Pacific Communities Hospital (SPCH). The event is to express support and appreciation for our rural healthcare workers. The tabling event will take place on November 21, 2024, from 11:00 a.m. – 2:00 p.m.
- **Shelagh Baird:**
 - a. Please make sure to provide any feedback on the Strategic Plan.
 - b. When the Request for Proposal comes out for the new grant, will share with everyone.
 - c. We will also further review the charter at the May meeting.
- **Sommer McLeish** – The Violence Prevention Summit is scheduled for May 23, 2025, in Lincoln City.

2025 Meeting Dates:

The next meetings of the Coast to Cascades Community Wellness Network will be scheduled for May 2025 and November 2025.

- Will look into having the May meeting at the Samaritan Health Services Walnut Blvd. Building in the Board Room if it is available. The November meeting will be in Linn County at Samaritan Lebanon Community Hospital if it is available. Staff will work on scheduling meeting dates.

Adjourn:

With no further business to discuss, the meeting was adjourned at 1:20 p.m.

Respectfully Submitted,

Shelley Hazelton

Community Health Promotion



CCCWN Oral Health Co-Location Project

CCCWN Update – May 2025

Reporting Updates

- EPDH has seen 764 patients to date (May 1, 2024 – Apr. 2, 2025) in grant Year 4
 - 396 patients at SPCH; 368 patients at SNLH
- Final Year 4 PIMS report due to HRSA May 31, 2025
- Sustainability Report final report due to HRSA July 29, 2025
 - Project Director & Oral Health subcommittee working to identify strategies to sustain funding.

Other Updates

- Year 4 of original grant period ended April 30, 2025
- HRSA approved the No Cost Extension (NCE) request
 - Core grant activities will continue to be funded through August 31, 2025
 - EPDH Leah Hitz will continue to see patients at SPCH and SNLH.
 - EPDH participated in three outreach activities at local events in April and will continue to provide outreach and education through the NCE period.
 - Provides weekly updates (see last week's below)
 - AHM Brands Spanish language media campaign began March 2025; rolled out on various social media platforms

EPDH update (March 27, 2025)

On Monday, I saw a patient in the ER who had fallen and hit her face and teeth. Two teeth had been chipped and another one was loose. I was able to consult with Dr. Matthews via text who wanted the patient to be seen in person ASAP by a dentist. I was also in contact with our CHW, Mar, trying to find an appointment for the patient, but the patient was able to get an appointment and her family was involved in getting her there. So hopefully the tooth is salvageable! I tried calling back to follow up with the patient but was unable to get ahold of her.

Another patient I saw on Monday was so appreciative of the services provided. She had not gone to the dentist in a while and appreciated the screening and fluoride. The patient was motivated to set up an appointment and had a dentist she had gone to in the past.

On Tuesday, I saw a patient at Newport who had many broken teeth. He said that the night nurse had already discussed with the patient the risk of serious infection with broken/untreated teeth. I appreciated that the nurse had taken the time to discuss this with the patient since it set up groundwork for me discussing oral care and seeking dental treatment. This is the first time I have had a patient tell me a nurse has discussed their oral health with them.

Today I saw a patient who had an extremely dry mouth - he was hardly able to close his mouth, his tissues were so tacky. I was helping him with oral care and he choked on his water. It was a scary situation but thankfully the patient recovered. I spoke to the nurse about what happened and the patient was going to have a swallow test performed. The patient also had secretions at the back of his throat that I used suction to remove. He is a big choke/aspiration risk and the nurse was appreciative that I was there to look in his mouth. The patient was also appreciative because he was in discomfort due to the dry mouth.

Helping Impact Women & Youth (HIWAY)

Spring CCCWN Meeting Update – May 2025



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 until 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:

- The PD/DC and the CCCWN Chair attended the HRSA reverse site-visit on March 4-6, 2025, in Washington D.C.
- HIWAY grant partners met on Thursday, March 13, 2025 from 10:00AM-11:00AM to discuss the Requests for Information Template as a part of the Biannual Progress Report.
- The Biannual Progress Report was submitted to HRSA by the due date – March 31, 2025. PIMS data was collected from all partners, however, it will not be submitted to HRSA until September 2025.
- The sustainability deliverable was presented to the HIWAY grant partners on December 5, 2024. The first draft of the sustainability plan is due May 30, 2025. The final copy of the sustainability plan is due in the EHB by July 31, 2025.

Helping Impact Women and Youth (HIWAY) Work Plan

Acronym	Partner Name	Key Contact(s)	Email
CTSI	Confederated Tribes of the Siletz Indians	Ruby Moon	rubym@ctsi.nsn.us
		Lacey Horton	laceeH@ctsi.nsn.us
FHC	Faith, Hope and Charity, Inc.	Frederick Edwards	frederick1@live.com
		Sheila Thompson	sheila@faithhopeandcharityinc.org
		Chris Gray	christophergray68@icloud.com
LCHHS	Lincoln County Health and Human Services	Jennifer Beckner	jbeckner@co.lincoln.or.us
LCSO	Lincoln County Sheriff's Office	Sheriff Adam Shanks	ashanks@co.lincoln.or.us
NWCH	Northwest Coastal Housing	Sheila Stiley	nwcoastalhousing@gmail.com
OC	The Olalla Center	Lori Vallelunga	loriv@olallacenter.org
		Robb Davis	robdd@olallacenter.org
PAADA	Partnership Against Alcohol & Drug Abuse	Melaia Kilduff	paadadfc@gmail.com
		Sara Birman	sara.birman@paadaoregon.org
PD-DC	Project Director-Data Coordinator	Jolynn Meza Wynkoop	jolynnm@samhealth.org
RCC	ReConnections Counseling	Lalori Lager	Lalori.lager@reconnectionsounseling.com
SH	Samaritan House	Lola Jones	lolakathleenjones@gmail.com
SMG	Samaritan Medical Group	Jennifer Will	jenniferW@samhealth.org
SNLH	Samaritan North Lincoln Hospital	Jennifer Will	jenniferW@samhealth.org
		Dr. Lesley Ogden	logden@samhealth.org
SPCH	Samaritan Pacific Communities Hospital	Jane Russell	janer@samhealth.org
		Dr. Lesley Ogden	logden@samhealth.org

Quarters
Q1 - September, October, November 2022
Q2 - December, January, February 2022 and 2023
Q3 - March, April, May 2023
Q4 - June, July, August 2023
Q5 - September, October, November 2023
Q6 - December, January, February 2023 and 2024
Q7 - March, April, May 2024
Q8 - June, July, August 2024
Q9 - September, October, November 2024
Q10 - December, January, February 2024 and 2025
Q11 - March, April, May 2025
Q12 - June, July, August 2025

Acronym	Definition
CME	Continuing Medical Education
CCCWN	Coast to Cascades Community Wellness Network
MHSUD	Mental Health/Substance Use Disorder Coalition
OD	Opioid Use Disorder
PSS	Peer Support Specialist
SUD	Substance Use Disorder

Color Key

Red	Activities completed between 9/1/2024 – 2/28/2025
Yellow	Changes made during 9/1/2024 – 2/28/2025
Green	Activities where progress has been made during 9/1/2024 – 2/28/2025 (details included)



HIWAY Work Plan

Overarching Goal: Reduce morbidity and mortality of substance use disorder (SUD), including opioid use disorder (OD), in Lincoln County.													
Goal 1: Strengthen and sustain SUD/OD services for pregnant women, women of childbearing age, and youth in Lincoln County.													
Objective	Activity Number	Core Activity	Activities	Improvement to health care delivery	Deliverable	Responsible persons	Timeline	Progress					
Develop and implement all four core functional activities by August 31, 2025. Provide effective communication about SUD/OD prevention, treatment, and recovery activities to stakeholders throughout the project period.	1a	1	Hire Project Director/Data Coordinator to support the HIWAY Project.	Improve coordination of services for people with SUD/OD	Staff hired	Network Director	Q1	Completed					
	Details 1a. The PD/DC was hired 9/1/2022.												
	1b	1	The PD/DC will work closely with Consortium members and Samaritan's Health Outcomes Research and Evaluation Team to ensure required data is collected and reported accurately.	Improve coordination of services for people with SUD/OD	Data collected and reported	PD/DC	Q1-Q12	In Progress					
	Details 1b. The PD/DC works closely with the data team to collect the required data for the PIMS and Biannual Progress Reports.												
	1c	1	Execute contracts with HIWAY project subawardees and consultants.	Improve coordination of services for people with SUD/OD	Executed Contracts and Subawards	Network Director and PD/DC, Grants Office	Q1	Completed					
	Details 1c. Subawards for Year 1 were executed within the first quarter of the grant period. Year 2 Subawards were completed in August/September 2023. Year 3 subawards were completed in August/September 2024.												
	1d	1	Hire or assign Staff to implement HIWAY activities.	Improve access to direct services and increase SUD/OD supports	Staff hired	SNLH, RCC, FHC, OC, SH, PAADA, NWCH	Q1-Q8	Completed					
	Details 1d. SNLH: hired PD/DC 9/12/2022 RCC: hired PSS 9/1/2022 FHC: hired PSS 9/1/2022 – 4/31/2023 (multiple individuals filled this position), one individual has been in this role since 5/1/2023 OC: hired resource navigator 11/2/2022 SH: hired teacher 9/1/2022 – 9/30/2022, rehired 10/1/2022 – 11/30/2023, rehired 12/1/2023 – current PAADA: hired coordinator 9/1/2022 – 9/30/2024, rehired on 10/1/2023 – 8/15/2024, rehired on 8/16/2024 – current NWCH: hired PSS 10/16/2023 – 10/31/2023, rehired 1/15/2024 – 2/29/2024, rehired 3/1/2024 – 3/15/2024, rehired 4/16/2024 – current												
	1e	1	Convene monthly quarterly meetings of the HIWAY Consortium, monthly meetings of the CCCWN Mental Health/Substance Use Disorder Regional Coalition, bimonthly meetings with the CCCWN Steering Committee and biannual meetings with the CCCWN Full Network to guide activity coordination among organizations and within the Consortium.	Improve coordination of services women and youth with SUD/OD	# of people in attendance	PD/DC, Network Director	Q1-Q12	In Progress					
	<table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">Details 1e. <u>CCCWN Meeting Attendance</u> HIWAY Meetings 9/30/2022: 16 12/9/2022: 10 3/10/2023: 14</td> <td style="width: 33%;">MH/SUD Meetings: 9/12/2022: 35 10/10/2022: 33 11/14/2022: 26 12/12/2022: 26 1/9/2023: 33</td> <td style="width: 33%;">Steering Committee Meetings: 12/14/2022: 14 2/8/2023: 14 4/12/2023: 14 6/14/2023: 13 8/9/2023: 12</td> </tr> <tr> <td colspan="3">Full Network Meetings: 11/2/2022: 22 5/24/2023: 22 11/29/2023: 32 5/15/2024: 24 11/6/2024: 26</td> </tr> </table>								Details 1e. <u>CCCWN Meeting Attendance</u> HIWAY Meetings 9/30/2022: 16 12/9/2022: 10 3/10/2023: 14	MH/SUD Meetings: 9/12/2022: 35 10/10/2022: 33 11/14/2022: 26 12/12/2022: 26 1/9/2023: 33	Steering Committee Meetings: 12/14/2022: 14 2/8/2023: 14 4/12/2023: 14 6/14/2023: 13 8/9/2023: 12	Full Network Meetings: 11/2/2022: 22 5/24/2023: 22 11/29/2023: 32 5/15/2024: 24 11/6/2024: 26	
Details 1e. <u>CCCWN Meeting Attendance</u> HIWAY Meetings 9/30/2022: 16 12/9/2022: 10 3/10/2023: 14	MH/SUD Meetings: 9/12/2022: 35 10/10/2022: 33 11/14/2022: 26 12/12/2022: 26 1/9/2023: 33	Steering Committee Meetings: 12/14/2022: 14 2/8/2023: 14 4/12/2023: 14 6/14/2023: 13 8/9/2023: 12											
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		<p>6/1/2023: 9 9/8/2023: 13 12/15/2023: 8 3/1/2024: 6 6/21/2024: 8 9/6/2024: 7 12/5/2024: 9 2/20/2025: 9</p>	<p>2/13/2023: 33 3/13/2023: 31 4/10/2023: 31 5/8/2023: 24 6/12/2023: 27 8/14/2023: 24 9/11/2023: 30 10/9/2023: 24 11/13/2023: 27 12/11/2023: 28 1/8/2024: 28 2/12/2024: 28 3/11/2024: 38 4/8/2024: 31 5/13/2024: 28 6/10/2024: 28 8/12/2024: 33 9/9/2024: 30 10/28/2024: 24 11/18/2024: 22 12/9/2024: 20 1/13/2025: 19 2/10/2025: 22</p>	<p>10/4/2023: 14 2/14/2024: 17 4/10/2024: 11 6/12/2024: 10 8/14/2024: 14 10/9/2024: 13 12/11/2024: 13 2/12/2025: 10</p>			
1f	1	<p>Provide monthly activity progress updates, lessons learned and successes to the CCCWN Mental Health/Substance Use Disorder Coalition. CCCWN Steering Committee and full CCCWN.</p>	<p>Improve access to services and increase SUD/OD support for women and youth</p>	<p>Monthly progress reports</p>	<p>PD/DC, Network Director</p>	<p>Q1-Q12</p>	<p>In Progress</p>
		<p>Details 1f. The CCCWN Mental Health/Substance Use Disorder Coalition receives monthly work plan progress updates. 28 HIWAY grant updates have been reported to the CCCWN MH/SUD Coalition since the beginning of the grant. 2/28/2025</p>					
1g	1	<p>Provide copies of all federal required reports and documents to the CCCWN Steering Committee and full CCCWN.</p>	<p>Improve coordination of services for women and youth with SUD/OD</p>	<p>Required reports and documents submitted</p>	<p>PD/DC, Network Director</p>	<p>Q2, Q5, Q7, Q9, Q11, Q12</p>	<p>In Progress</p>
		<p>Details 1g. The CCCWN Steering Committee and full consortium continue to receive copies of the required reports. The CCCWN Steering Committee and full network have received the following: Biannual Progress Report: 4 PIMS Report: 4 DIS Report: 1 Budget Adjustment Report: 1</p> <p>In May 2024, the PD/DC began working with a consultant and translator to have all formal HIWAY reports converted into a professional report format and translated into Spanish.</p>					
1h	3	<p>Partners will work with consultant to develop the culturally specific messaging for the media campaign around SUD/OD in multiple languages.</p>	<p>Improve knowledge of family members and caregivers around SUD/OD, reduce stigma and increase ability to access care</p>	<p># of media messages, articles and printed materials distributed # of media messages distributed monthly</p>	<p>PD/DC, SNLH, CTSI, RCC, FHC, OC, PAADA</p>	<p>Q3, Q7, Q11</p>	<p>In Progress</p>

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		<p>Details 1h. Conversations regarding a regional media campaign began in March 2023 with marketing company, AHM Brands. A media campaign was developed and involved braided funding between the Behavioral Health Resource Network grants (Linn & Lincoln counties), the RC-SWAY grant (RCORP Implementation III grant) and the HIWAY grant (RCORP Implementation IV grant). The stigma reduction campaign included the following media tactics: broadcast radio, video ads on social media, streaming audio ads, YouTube ads, digital display design, billboards, and TV commercials. The campaign launched in October 2023 and ran through March 2024.</p> <p>In Lincoln County, one billboard was placed in the central region of the county in Newport, OR. The billboard read: Prevent, Treat, Recover, and pointed people to our resource website: LinnBentonLincolnRecovery.com. The billboard included a picture of Araceli Cuevas (peer support specialist with ReConnections Counseling) and her family. Araceli also shared her story of recovery and this was cut into a 10 second, 30 second and 1 minute clip that was shared on social media and TV. Additionally, AHM Brands was able to facilitate the recording of radio segments both by youth, and adults, that urged people to seek support and resources at the website. All of the resources for this campaign can be viewed and listened to at: https://cccwn.org/ptr-campaign-toolkit/.</p> <p><u>Data:</u> <u>Webpage views:</u> November 2023: 15 December 2023: 2,431 January 2024: 1,759 February 2024: 1,462</p> <p><u>Adult Focused Campaign – Lincoln County – January 2024</u> Targeted Display Impressions: 117,837, clicks: 231 Streaming Audio Impressions: 19,676, clicks: 7 Connected TV Impressions: 19,370, clicks: 3</p> <p><u>Youth Focused Campaign – Lincoln County – January 2024</u> Streaming Audio Impressions: 18,687, completes: 18,366 Connected TV Impressions: 19,241, completes: 16,583</p> <p><u>Adult Focused Campaign – Lincoln County – February 2024</u> Targeted Display Impressions: 103,428, clicks: 104 Streaming Audio Impressions: 18,675, clicks: 4 Connected TV Impressions: 18,674, clicks: 3</p> <p><u>Youth Focused Campaign – Lincoln County – February 2024</u> Streaming Audio Impressions: 15,585, clicks: 8 Connected TV Impressions: 15,395, clicks: 37</p> <p><u>Adult Focused Campaign – Lincoln County – March 2024</u> Targeted Display Impressions: 115,501, clicks: 102 Streaming Audio Impressions: 18,969, LTR: 98.1%</p>	<p>Connected TV Impressions: 19,676, VCR: 97.7% <u>Youth Focused Campaign – Lincoln County – March 2024</u> Streaming Audio Impressions: 12,628, LTR: 99.2% Connected TV Impressions: 13,081, VCR: 90.5%</p> <p><u>Adult Focused Campaign Explained:</u> In March 2024, 19,676 TV commercials were aired. The Video completion rate was 97.7%. This means 19,100+ ads were watched to completion. Our ads were delivered at a frequency of 5x per unique household and reached 4,100+ unique households. For audio commercials, we aired 18,969 total ads. The average listen through rate was 98.1% which means that 18,600+ of the people who heard the ad listened to the entire commercial. The ads delivered at a frequency of 2x per unique individual and reached 10,500+ unique individuals. For display ads, we saw 115,501 impressions served. This ad group drove 102 clicks to the site, giving us a click-through-rate of 0.09% against the platform average of 0.10%.</p> <p><u>Youth Focused Campaign Explained:</u> In March 2024, 13,081 TV commercials were aired. The video completion rate was 90.5%. This means 11,700+ ads were watched to completion. Our ads were delivered at a frequency of 4x per unique household and reached 3,500+ unique households. For audio commercials, we aired 12,628 total ads. The average listen through rate was 99.2% which means that 12,500+ of the people who heard the ad listened to the entire commercial. The ads delivered at a frequency of 7x per unique individual and reached 1,800+ unique individuals.</p> <p>CTSI # of media messages, articles and printed materials distributed 9/1/2022 – 2/28/2023: 425 3/1/2023 – 8/31/2023: 60+ 9/1/2023 – 2/29/2024: 200+ 3/1/2024 – 8/31/2024: 800+ 9/1/2024 – 2/28/2025: none</p> <p># of media messages distributed monthly 9/1/2022 – 2/28/2023: 5 3/1/2023 – 8/31/2023: none 9/1/2023 – 2/29/2024: 1 per month on the digital newsletter, community newsletter, and CTSI Facebook 3/1/2024 – 8/31/2024: 1 per month on the digital newsletter, community newsletter, and CTSI Facebook 9/1/2024 – 2/28/2025: none</p> <p>FHC FHC continues to reach out to partnering organizations in Lincoln County. They developed a new flyer that was printed and has been distributed throughout the county. 8/31/2024 # of media messages, articles and printed materials distributed 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/31/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 60 9/1/2024 – 2/28/2025: 35 # of media messages distributed monthly</p>
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						9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/31/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 10 9/1/2024 – 2/28/2025: 4	
1i	3	Partners will develop and distribute culturally and linguistically appropriate education material for family members and caregivers on SUD/OD prevention, treatment and recovery.	Improve community knowledge of SUD/OD, reduce stigma and increase access to services	# of education materials developed and distributed	PD/DC, SNLH, CTSI, RCC, FHC, OC, PAADA	Q3, Q7, Q11	In Progress
<p>Details 1i.</p> <p>CTSI # of education materials developed and distributed 9/1/2022 – 2/28/2023: 425 3/1/2023 – 8/31/2023: 60+ 9/1/2023 – 2/29/2024: unknown 3/1/2024 – 8/31/2024: 400 9/1/2024 – 2/28/2025: none</p> <p>PAADA PAADA is working with the tribe and high schools' student advocates to create educational materials for the '23 - '24 school year. Woody Crobar, Lincoln County School District (LCSD) Homeless Coordinator, is now on the PAADA board to help with coordinating this. He and school administrator, Sandy Mummey, are the communication conduits to the LCSD. 8/31/2023</p> <p>Social media posts created: <u>September 2023</u> Safe med disposal (not translated) Alternatives to candy for trick or treaters (translated) <u>October 2023</u> Printed candy safety tips for Halloween Social media posts throughout the month about candy safety <u>December 2023</u> PSA distributed via Facebook 2 Posts about safe and sober celebration plans 2 Posts about scholarship and FentAlert campaign from SAHMSA</p> <p><u>January 2024</u> Bilingual post shared via LCSD website & social media about community education events Rx drop off info cards delivered to SPCH and Integrity Wellness Anti-vaping and vape cessation information distributed via social media <u>February 2024</u> Bilingual messaging and announcements going out in print and on social media for Community Education events</p> <p>RCC RCC's PSS is bilingual and has converted all the English Nurture Oregon brochures into Spanish. Not only do connections at the hospitals receive these materials, but the bilingual PSS has also worked to share these resources with community members at churches, state agencies, etc. 2/28/2023</p> <p>FHC # of educational materials developed and distributed 9/1/2023 – 2/29/2024: 1 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 3</p> <p>SNLH Educational resource brochures were purchased this year as a way to educate the community on various SUD/OD topics. The brochures purchased covered the following topics:</p> <ul style="list-style-type: none"> • 6 Things Kids Need to Know About Drugs • Xylazine: What You Need to Know • Opioids & Stigma: Why It Matters and What You Can Do • Los opioides y el estigma • Naloxone: What You need to know • Naloxona: Lo que debe saber • Opioid Misuse and Overdose: What friends and family need to know • Uso indebido y sobredosis de opioides: Lo que amigos y familiares necesitan saber • Opioid Addiction: What everyone should know about treatment and recovery • La adicción a opioides: Lo que todos deben saber sobre el tratamiento y la recuperación • Dealing with Relapse • Vaping, Smoking & Your mental Health • Building Resilience and Hope during stressful times • The risks of fentanyl & fake pills • Los riesgos del fentanilo y las pastillas falsas <p>8/31/2024 These educational resource brochures were passed out to hospital staff, community members, and young adults (ages 16-24) at the following events: 9/4/2024 – Recovery Month Tabling in Lincoln City 9/5/2024 – Recovery Month Tabling in Newport 9/12/2024 – Inheritance Documentary Screening in Newport 9/13/2024 – Inheritance Documentary Screening in Lincoln City 9/21/2024 – Hands Across the Bridge Recovery Month Event in Waldport</p>							

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		<p><u>March 2024</u> Bilingual messaging and announcements via social media for community education events, Party Talk for Parents Bilingual social media shared about Lincoln County Public Health Risk Reduction services Bilingual messaging and announcements going out in print and on social media for community education events surrounding safe storage and disposal of medications Social media posts on safe medication storage and Narcan</p> <p><u>April 2024</u> N/A</p> <p><u>May 2024</u> Social media messaging on anti-vaping, safe med storage, world no tobacco day</p> <p><u>June/July 2024</u> Promoted local events</p> <p><u>August 2024</u> Promoted “sober” events Posted anti-vaping messaging on social media Posted community education events ads Shared Wellbriety month promotions (Phoenix Wellness, Agape Respite Center, Hands Across the Bridge)</p> <p><u>October 2024</u> Shared messaging about upcoming Youth Leadership Academy on socials Advertised two community education events on restorative justice practices and safe communication</p> <p><u>November 2024</u> Advertised community education events on the signs and symptoms of cardiac arrest</p> <p><u>January 2025</u> Advertised community education events where “The New Drug Talk” film would be screened Posted an appreciation for inclusion at the Native Youth Conference Posted about smoking cessation (quitnow.net/Oregon) Promoted sober community events Promoted the Song for Charlie youth interview opportunity</p> <p><u>February 2025</u> Six posts were made during the Seafood & Wine festival promoting sobriety and refraining from driving while intoxicated Two posts were made to educate on alcohol health risks Advertised the middle school leaders events</p>					
1j	2	<p>Offer training to the consortium, providers, and staff of local SUD/ODU treatment centers on proper coding and billing across insurance types.</p>	<p>Increase resources to sustain services provided through this project</p>	<p># of people attend trainings</p>	<p>PD/DC, SNLH</p>	<p>Q8</p>	<p>In Progress</p>
<p>Details 1j. The Senior Grants Specialist and the HIWAY Project Director 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:</p> <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, 							

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		<ul style="list-style-type: none"> • 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>At this time, there is no interest from the HIWAY consortium in participating in this type of training. This training opportunity will be revisited at a later date. 2/28/2025</p>					
1k	4	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.	Buy-in and support for project secured HIWAY activities and services complement existing services	Consortium meeting minutes	PD/DC, SNLH, SPCH, SMG, RCC, CTSI LCHHS, OC, FHC, SH, LCSO, PADAA, NWCH	Q1-Q12	In Progress
<p>Details 1k. Partners from across the Linn, Benton, and Lincoln County region continue to meet to discuss ongoing efforts and activities. Conversations take place during the Mental Health/Substance Use Disorder Coalition monthly meetings.</p> <p>Olalla Center Project Bravery’s (PB) tabling opportunities continued in August 2023. The first Tuesday of August is the annual National Night Out (NNO), a chance for community to interact with law enforcement. This year’s NNO was well attended and PB was able to speak with representatives of several law enforcement agencies, at the municipal, county, and state levels. PB also tabled at the Linn Benton Lincoln Partners for Health Summit held in Newport and made new connections.</p> <p>PB attended its first of at least four teacher in-service days at a school in the county’s district. Teachers and staff at the school were (re-)introduced to PB via a fifteen-minute presentation where they learned how PB supports youth. 8/31/2023</p> <p>The Lincoln County School District (LCSO) schools have started the 2023-2024 school year, so PB has resumed activities that were paused in June.</p> <p>PB’s continued presence at a book club at the local library has caused high school attendees to recognize the PB Resource Navigator. 2/29/2024</p> <p>PB and Walden staff continued to work together to provide a Summer Arts Club for youth, from 4:30-6:00pm on Thursdays through August 31st. Over time, participants have become more open about discussing their personal lives and issues they experience, while crafting. Long term activities such as this are valuable in building trust with youth. PB also continues to utilize the equine services of Olalla partner, Bright Horizons.</p> <p>In the spring, PB’s program manager attended a six-part online training in Trauma-Informed Care (TIC). At the beginning of August, he was able to attend a full-day, in-person summit on Building a Trauma-Informed Community during which participants were able to role-play TIC scenarios and further discuss how to build resilience in those who have experienced trauma and adverse childhood experiences (ACEs).</p> <p>PB continues to attend virtual trainings (including a Healthcare System Navigation training provided by OHA) to better navigate resources for PB clients. In addition to attending the TIC Summit (above), Project Bravery had the opportunity to network in person with representatives of many partner organizations. In doing so, PB builds its capacity to address SUD prevention.</p> <p>PB attended an open house for Angell Job Corps. They offer hands-on education in a variety of fields. The local Job Corps focuses on the trades: carpentry, plumbing, masonry, auto mechanics, urban forestry, etc. The PB Project Coordinator toured the campus with business cards and handed them out. PB’s office is looking forward to working with this Angell Job Corps, its students, and its staff. 8/31/2023</p> <p>In September 2023, PB attended the online Parenting Success Network (PSN) Fall Kickoff Meeting with approximately 25 partners in local social service organizations.</p> <p>PB is becoming better known among community partners. PB was sought out by both Lincoln County Behavioral Health and the Health and Human Services Department of Developmental Disabilities for collaborations with each of their service populations. Behavioral Health is looking for a place to hold meetings and get support with their clients.</p> <p>PB held its first coffee-meetup at an espresso cafe in Newport at the end of September. The event went well, and it will continue to be held at the same location on a regular basis. PB has contacted other local businesses about hosting community events.</p>							

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Since beginning the coffee meetups, the meeting date has moved from Thursdays (not well attended) to Mondays and Tuesdays, twice a month, for the months of January and February. Since the Oregon coast is a tourist destination even in winter months, many locals work the traditional weekend days of Saturday and Sunday to accommodate the visitors and then take the first couple weekdays off. Coffee-meetup events were held four times during January 2024, but they were not well attended. This may be due to the change in day. PB will continue these opportunities for members of the community to meet up, then re-evaluate day(s) of the week again.

With the help of an enthusiastic volunteer in Lincoln City, PB is establishing a coffee meetup in north Lincoln County. It will take place on the second Sunday of each month. February was the first of these meetups, and it attracted nearly 10 members of the community.

Partners from the Lincoln County Children’s Advocacy Center and Lincoln County Behavioral Health have taken tours of PB. 2/29/2024

Between September 2024 and February 2025, PB offered outreach and prevention activities. PB continued in partnership with the White Rabbit Espresso coffee house and Left Coast Coffee Company for their coffee meetups. The Newport Public Library continued to partner with PB to offer the teen book club. Writing groups were also offered for students. High school students had the opportunity to participate in a creative writing course after school on Wednesdays. For recent high school graduates and other young adults, an expressive writing class was offered. Both writing classes were offered as therapeutic activities. In the winter, PB met with the Youth Era coordinator who is new to Lincoln County. Youth Era provides drop-in center peer support services for youth. Currently, Youth Era does not have a drop-in center location in Lincoln County, but they are looking to open one in the near future. PB and Youth Era discussed how they might be able to support each other in their efforts to serve youth populations. A partnership with the Newport Recreation and Aquatic Center resulted in a new event featuring a night of roller skating on 2/7/2025. PB’s coordinator now meets twice monthly at the aquatic center. Finally, PB has been a part of the Linn-Benton-Lincoln Suicide Care Coalition that has been working to provide resources and services that reduce suicidality (as well as the isolation and depression that lead to suicidal ideation). 2/28/2025

PAADA

The following events and trainings have taken place in order to establish community partnership and collaboration:

September 2022

9/17/2022 Hands Across the Bridge Event

September 2023

9/30/2023 Hands Across the Bridge Event

9/30/2023 Attended Healthier You Expo to educate the community about safe drug disposal

November 2023

11/27/2023 Attended the LCSD Native Youth Conference and presented at the conference (8 youth attended)

December 2023

New PSA developed in cooperation with LCHHS surrounding vaping

January 2024

Underage tobacco and vape use training at DaNoble House, Waldport

New PSA developed in cooperation with LCHHS surrounding vaping

February 2024

2/5-8/2024 Trauma Informed Care Train the Trainer

Attended a community education event surrounding restorative family circles. Topics covered how to have hard conversations with your child/family and build safe spaces for communication.

2/6/2024 Hosted a Community Education Event on Restorative Family Circles. Topics included how to have hard conversations with your child/family and build safe spaces for communication.

March 2024

3/5/2024 PAADA partnered with Phoenix Wellness who presented on Risk Reduction and use of naloxone/Narcan. They distributed Narcan to adult participants.

April 2024

4/1/2024 Lincoln County Public Health staff presented on safe storage & disposal of medications

August 2024

Partnership with Trinity United Methodist Church started to begin offering Community Education Events in Toledo. The site in Waldport will offer classes on First Tuesdays. Toledo will offer the same class on Third Tuesdays. The first class was presented by Lincoln County Public Health on Xylazine, Fentanyl, and Risk Reduction.

September 2024

Restorative justice practices

November 2024

Signs and symptoms of cardiac arrest

January 2025

“The New Drug Talk” documentary screening (15 people attended, including 2 HS students and 1 elementary student)

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			<p>SH SH attended the Oregon Conference on Opioids, Other Drugs and Addiction Treatment (OPAT) on May 8-10 where they participated in presenting for a plenary session. They presented their work with Nurture Oregon. 8/31/2023</p> <p>RCC The RCC PSS is now doula certified. She completed her peer wellness specialist training (90 hours) and the medical interpretation class. She continues to study for her court interpreter license. Additionally, she has been CPR certified. In 2023, she attended the Peerpacolypse Conference where she was able to make connections in peer community in the state of Oregon. 8/31/2023</p> <p>FHC FHC continues to build connections with other community-based organizations. FHC made connections with C.H.A.N.C.E. Recovery and ReConnections Counseling in Newport, OR. A shared workspace was identified at each location so that FHC can have a physical site to meet with clients in Lincoln County. FHC was also able to discuss future collaborations with both partners. 2/29/2024 Partnership activity continues to happen in Lincoln County. FHC partners heavily with ReConnections Counseling but has also made connections with the Yaquina Bay Oxford house. PHC has been assisting the houseless community by providing transportation to services, survival gear such as sleeping bags, tents, and food. They have utilized a funding stream to purchase used bikes and have partnered with the Newport Bike Shop to refurbish the bikes and get them running smoothly for clients. 8/31/2024</p>
Goal 2: Strengthen and expand SUD/ODU prevention services in Lincoln County.			
Develop and implement all five core prevention activities by August 31, 2025.	2a	4	<p>Providers, Clinicians, and Peer Support Specialists will identify and screen individuals at risk of SUD/ODU and connect them to prevention, risk reduction, early intervention, treatment, and other support services.</p> <p>Increase number of individuals with or at-risk of SUD/ODU who are referred to treatment programs</p> <p># of screening and connections</p> <p>SNLH, SPCH, SMG, LCHHS, LCSO, RCC, FHC, OC, NWCH</p> <p>Q1-Q12</p> <p>In Progress</p> <p>Details 2a. Olalla Center Parker Preston joined the Bravery office at the beginning of August 2023, and he will be providing mental health services to the community. He has an office in the Bravery Center and has been willing to meet Bravery clients all over the county if they have limited access to transportation. Near the end of October 2023, the PB staff (program manager, mental health therapist, and Olalla Center’s communications specialist) met to discuss its vision and mission: what does the community look like if Project Bravery is successful? PB’s clinician went over what success would look like related to the mental health needs of the community, and ways to improve the overall health of the community was discussed. It was decided that PB could use another clinician, at least part time, to address the mental health needs of the community. PB will also be looking to hire a part-time (possibly leading to full time) program assistant to help with prevention outreach/activities throughout the county. 2/29/2024</p> <p>LCHHS/RCC/CTSI Partners are beginning to expand and build upon Risk Reduction services in Lincoln County. RCC, LCHHS, CTSI and Phoenix Wellness Center are now all providing Risk Reduction services in Lincoln County and have met with one another to coordinate services and share resources. A Risk Reduction support group is being formed between the organizations to provide time to debrief and give care to the Risk Reduction workers. 2/29/2024 ReConnections’ PRIME+ program provides Risk Reduction services in the community through participation in community distribution events with a mobile van. 2/28/2025</p>
	2b	4	<p>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.</p> <p>Increase number of individuals with or at-risk of SUD/ODU who are referred to appropriate treatment programs</p> <p># of screenings conducted</p> <p>SNLH, SPCH, SMG, LCHHS</p> <p>Q1-Q12</p> <p>In Progress</p> <p>Details 2b. SNLH/SPCH/SMG SBIRT Screenings: 9/1/2022 – 2/28/2023: 11,726 3/1/2023 – 8/31/2023: 11,485 (corrected) 9/1/2023 – 2/29/2024: 11,094 3/1/2024 – 8/31/2024: 12,218 (corrected) 9/1/2024 – 2/28/2025: 10,606 (PIMS not required this reporting period)</p>

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2c	1	<p>Provide evidenced-based prevention training to coalition youth.</p>	<p>Improve youth resistance to substance use and delay age of first use</p>	<p># of prevention trainings offered # of youth participate in training</p>	<p>CTSI, OC, PAADA</p>	<p>Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11</p>	<p>In Progress</p>
		<p>Details 2c. PAADA Youth Leadership Academies (YLA) YLA 3/16/2023: 51 youth YLA 10/23/2023: 68 youth YLA 4/4/2024: 34 youth, 43 attendees total YLA 10/7/2024: 45 youth Middle School Leader’s Summit 2/27/2025: 38 youth</p> <p><u>Spring 2023 YLA</u> PAADA planned the Youth Leadership Academy (YLA) that took place 3/16/2023 at the Center for Health Education in Newport. Partnerships included the Lincoln County School District (LCSD), CTSI, charter schools and Job Corp. 51 youth were in attendance. Breakout sessions included the following: Introduction to restorative practices; Building a healthy and peaceful community; Risk reduction strategies; and “There is an “Art” to Leadership. Surveys were completed by the students, many of whom rated the event positively and indicated that they would like to participate again in the next academy. PAADA is in the process of developing their second academy through the use of HIWAY grant funding for October 23, 2023. The Spring 2024 Academy is set for April 4, 2024. PAADA will be inviting several students from last spring’s academy to serve on the board and help plan the academies. One student has already requested to help with the planning. 8/31/2023</p> <p>PAADA is working with Lincoln County Dispute Resolution (LCDR) on plans for Restorative Practices with Juvenile Dept. youth. PAADA is working with Asia Richardson and Isabelle Cisco from Lincoln County Public Health on activities to deliver to LCSD high schools. PAADA has ongoing collaboration efforts with CTSI for prevention efforts and is working with Sheila Aviles on Siletz School prevention activities (Leadership Academy aka Warrior Day) and with LCCR (Lincoln Community Dispute Resolution) on prevention/intervention restorative justice programs for community and Siletz community. 8/31/2023</p> <p><u>Fall 2023 YLA</u> PAADA hosted their second YLA on 10/23/2023 where 68 youth were able to attend. Two of three workshops were about prevention: tobacco/vaping and OUD prevention and response. The third workshop was on restorative justice practices. A final component of the Fall 2023 YLA were the student projects. Youth attending spent some time with their school groups, brainstorming ideas on how they could increase prevention efforts at their schools. The Spring 2024 YLA will be student-driven and the students will be sharing on their project process, successes, and challenges.</p> <p>The PAADA coordinator has had a large involvement in meeting with the students since the Fall 2023 YLA. She goes to each school and meets with the students who attended the YLA and their teachers. So far, she has met on the following dates with youth at their various campuses: 12/5/23, 12/7/23, 12/12/23, 12/13/23, 1/19/24, 1/22/24, 1/23/24, 1/24/24, 2/5/24, 2/12/24, 2/20/24, 2/28/24, 3/11/24, 3/18/24, 3/19/24, 3/20/24, and 3/21/24.</p> <p>11/13/2023 alternative YLA planning with WHS, included brief coverage of Narcan, vaping ed, and encouraged further engagement with upcoming community education (10 youth)</p> <p><u>Spring 2024 YLA</u> The Spring 2024 Academy took place on 4/4/2024 at the Center for Health Education and had 43 attendees (youth and adults) from Lincoln County. 34 students were in attendance. All students attended workshops on Skill Sets vs. Short Cuts, sober parties, and how to engage others in leadership tasks.</p>			<p>CTSI - CEDARR Coalition Meetings & Attendance: 9/7/2022: 9 10/5/2023: unknown 11/2/2022: 19 (7 youth) 1/4/2023: unknown 2/8/2023: 32 (4 youth) 3/1/2023: unknown 4/7/2023: unknown 5/17/2023: 9/6/2023: 22 10/6/2023: 17 11/1/2023: unknown 1/3/2024: 17 (0 youth) 2/7/2024: cancelled due to weather 3/13/2024: 17 (0 youth) 4/3/2024: cancelled 5/8/2024: 24 (4 youth) 6/10/2024: 14 (0 youth) 7/8/2024: 12 (0 youth) 8/14/2024: 4 (0 youth)</p>		

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		<p>PAADA has been meeting with the school district to discuss the Fall Youth Leadership Academy and future academies. Additionally, PAADA hired a new person to take over the 0.5FTE coordinator role for the HIWAY grant. This position is heavily involved with the Youth Leadership Academy planning and the projects that take place at the schools. They are the person going into the schools and meeting with the students. This position is essential, as they are the face representing PAADA in the schools and the person who will help with making sure the projects that come out of the YLA are completed. PAADA also received funding from OHA to do a middle school youth summit for each school, but at a location that is outside of the school building. With funding from the System of Care, PAADA is beginning to look for Juniors and Seniors who could be a part of a Healthy Communities Youth Council. They would like to have one student from each area throughout the county participate. These youth would then work together to come up with a statement or plan on how the region could become healthier for youth.</p> <p><u>May 2024</u> Began implementation and recruitment of Healthy Communities Youth Advisory to convene during 2024-2025 school year with the goal of learning about health services and resources in the region and how they can be implemented as partners in an action plan for youth in Lincoln County.</p> <p><u>Fall 2024 YLA</u> The Fall 2024 Academy took place on 10/7/2024 at the Center for Health Education and had 45 attendees from Lincoln County. 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 (HCYA).</p> <p>This committee has been developed and includes high school youth who have a desire to take a leadership role in substance use prevention advocacy, education, and outreach. HCYA began meeting in December 2024 and began planning for the launch of the first Middle School Leader’s Summit which took place on February 27, 2025.</p> <p><u>Middle School Leader’s Summit</u> The day included guest speaker, Jake White, from Vive 18 who spoke all about SUD prevention in a fun and engaging way. The HCYA was not only involved in the planning for the event, but they also served on a panel where they led the discussion titled: “What I wish I knew my freshman year...”. Middle school students were able to ask questions and myths were busted surrounding drugs, alcohol, and partying in high school. During the lunch break, the new film by A Song for Charlie called, “The New Drug Talk”, was shown to the students. Overall, 38 middle school students were able to attend from five different schools: Newport, Toledo, Taft, Waldport and Siletz.</p>												
2d	1	<table border="1"> <tr> <td data-bbox="346 1008 934 1138"> <p>PSSs in the ED will provide culturally and linguistically appropriate educational SUD/OD materials in multiple languages at NWCH - Coastal Phoenix Rising (CPR), transitional living facility in the hospital.</p> </td> <td data-bbox="934 1008 1192 1138"> <p>Increase the number of individuals with or at-risk of SUD/OD who are aware of appropriate treatment programs</p> </td> <td data-bbox="1192 1008 1430 1138"> <p># of individuals receiving educational materials</p> </td> <td data-bbox="1430 1008 1612 1138"> <p>SNLH, SPCH, NWCH</p> </td> <td data-bbox="1612 1008 1766 1138"> <p>Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11</p> </td> <td data-bbox="1766 1008 2009 1138"> <p>In Progress</p> </td> </tr> <tr> <td colspan="6" data-bbox="346 1138 2009 1421"> <p>Details 2d. NWCH NWCH-CPR hired a Peer Support Specialist who began providing services on 10/23/2023. This peer will serve pregnant and parenting women in the CPR transitional living facility. They will also serve families and other community members through offering recovery peer services.</p> <p># of individuals receiving educational materials 3/1/2023 - 8/31/2023: 50 9/1/2023 - 2/29/2024: 50 3/1/2024 - 8/31/2024: 50 9/1/2024 - 2/28/2025: 100</p> </td> </tr> </table>	<p>PSSs in the ED will provide culturally and linguistically appropriate educational SUD/OD materials in multiple languages at NWCH - Coastal Phoenix Rising (CPR), transitional living facility in the hospital.</p>	<p>Increase the number of individuals with or at-risk of SUD/OD who are aware of appropriate treatment programs</p>	<p># of individuals receiving educational materials</p>	<p>SNLH, SPCH, NWCH</p>	<p>Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11</p>	<p>In Progress</p>	<p>Details 2d. NWCH NWCH-CPR hired a Peer Support Specialist who began providing services on 10/23/2023. This peer will serve pregnant and parenting women in the CPR transitional living facility. They will also serve families and other community members through offering recovery peer services.</p> <p># of individuals receiving educational materials 3/1/2023 - 8/31/2023: 50 9/1/2023 - 2/29/2024: 50 3/1/2024 - 8/31/2024: 50 9/1/2024 - 2/28/2025: 100</p>					
<p>PSSs in the ED will provide culturally and linguistically appropriate educational SUD/OD materials in multiple languages at NWCH - Coastal Phoenix Rising (CPR), transitional living facility in the hospital.</p>	<p>Increase the number of individuals with or at-risk of SUD/OD who are aware of appropriate treatment programs</p>	<p># of individuals receiving educational materials</p>	<p>SNLH, SPCH, NWCH</p>	<p>Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11</p>	<p>In Progress</p>									
<p>Details 2d. NWCH NWCH-CPR hired a Peer Support Specialist who began providing services on 10/23/2023. This peer will serve pregnant and parenting women in the CPR transitional living facility. They will also serve families and other community members through offering recovery peer services.</p> <p># of individuals receiving educational materials 3/1/2023 - 8/31/2023: 50 9/1/2023 - 2/29/2024: 50 3/1/2024 - 8/31/2024: 50 9/1/2024 - 2/28/2025: 100</p>														

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2e	1	The coalition/consortiums will utilize evidence-based strategies from the SAMSHA resource <i>Focus on Prevention: Strategies and Programs to Prevent Substance Use</i> .	Increase coalition/consortium knowledge on evidenced-based strategies and programs that focus on prevention	# of coalition/consortium members attend training	PC/DC, CCCWN-MHSUD coalition, HIWAY Consortium	Q2, Q6, Q10	Not Started
	Details 2e. N/A						
	2f	1	Plan and conduct evidence-based prevention activities utilizing peer-delivered education targeting youth in Lincoln County.	Improve youth knowledge on SUD/OD prevention, treatment and recovery	# of activities offered # of youth participate	PD/DC, CTSI, OC, PAADA	Q3, Q5, Q7, Q11
<p>Details 2f.</p> <p>CTSI Activities</p> <p># of Youth Prevention workgroup meetings offered: 4</p> <p># of attendees participating in workgroups:</p> <p>5/12/2023: 9 attendees</p> <p>5/18/2023: 7 attendees</p> <p>5/25/2023: 4 attendees</p> <p>6/1/2023: 7 attendees</p> <p>Sacred Site Restoration Work Group Meetings: 4</p> <p># of attendees participating in workgroups:</p> <p>5/11/2023: 14 attendees</p> <p>5/19/2023: 4 attendees</p> <p>5/26/2023: 3 attendees</p> <p>6/2/2023: 9 attendees</p>			<p>PAADA</p> <p><u>October 2023</u></p> <p>Youth attendees from the Youth Leadership Academy from Newport High School and Siletz Valley School want to take on vaping and Narcan education at their schools. Their end goal is to have their bathrooms open and accessible again. Currently, their bathrooms are frequently closed due to vandalism, use of drugs, and use of tobacco.</p> <p><u>December 2023</u></p> <p>12/12/2023 PAADA posted drunk driving PSA created by two students onto their socials.</p> <p><u>August 2024</u></p> <p>PAADA began partnering with Lincoln County School District to use OHA-funded training for Peer Support Specialists. Two HELP Advocates will be trained in September. At this time, adults are being trained in order to further promote the peer support specialists (youth 18+) program. PAADA is working to build up its capacity of youth who may be interested in a peer support specialist type position in the future.</p> <p><u>September 2024</u></p> <p>Two peer supports completed the OHA-funded training and can now serve in the Lincoln County School District and assist youth in need.</p>				
2g	2	LCHHS will coordinate and monitor the purchase and distribution of Narcan.	Reduce overdose fatalities	Amount Narcan distributed through tracking sheets	LCHHS	Q1-Q12	In Progress
		<p>Details 2g.</p> <p>LCHHS</p> <p>LCHHS ordered 168 boxes of Narcan for the HIWAY grant in August 2023. 72 boxes of Narcan were distributed to SNLH & SPCH hospital staff/community members during September 2023 Recovery Month tabling. LCHHS purchases Narcan for the community and law enforcement through the Oregon Clearinghouse. 8/31/2023</p> <p>48 boxes of Narcan were distributed to SNLH & SPCH hospital staff/community members during September 2024 Recovery Month tabling.</p> <p>Narcan Distribution for LCHHS (LCHHS is able to order Narcan through the Save Lives Oregon Harm Reduction Supply Clearinghouse (www.savelivesoregon.org/reduction-clearinghouse/))</p> <p>Lincoln City Event 6/3/2023: 17 Narcan</p> <p>Yachats Event 6/4/2023: 6 Naloxone, 31 Narcan</p> <p>Library Foundation 7/12/2023: 12 Narcan</p> <p>Lincoln City Parks & Recreation 7/24/2023: 12 Narcan</p> <p>Lincoln City Kiwanis 7/27/2023: 24 Narcan</p> <p>Newport Library 11/2/2023: 3 Narcan</p> <p>Angel Job Corps 12/1/2023: 48 Narcan</p> <p>Lincoln County Public Health 12/12/2023: 21 Narcan</p>		<p>Lincoln County Public Health 9/6/2024: 4 Narcan</p> <p>Preparedness Fair Newport 9/6/2024: 32 Narcan</p> <p>Samaritan Health Services 9/13/2024: 48 Narcan</p> <p>Preparedness Fair Yachats 9/14/2024: 36 Narcan</p> <p>PAADA 9/17/2024: 4 Naloxone</p> <p>Hands Across the Bridge 9/21/2024: 12 Narcan</p> <p>Newport Event 9/21/2024: 24 Narcan</p> <p>Medication Station 9/25/2024: 36 Narcan</p> <p>Arcoiris Cultural 9/26/2024: 9 Narcan</p> <p>OCCC South Beach Campus 9/27/2024: 24 Narcan</p> <p>OCC 9/27/2024: 12 Narcan</p> <p>Angell Job Corps 9/27/2024: 48 Narcan</p> <p>Senior Fair Lincoln City 10/1/2024: 48 Narcan</p> <p>Senior Center Flu Clinic 10/2/2024: 2 Narcan</p> <p>Newport High School Flu Clinic 10/2/2024: 7 Narcan</p> <p>OCCC South Beach Campus 10/9/2024: 7 Narcan</p> <p>Medication Station 10/15/2024: 24 Narcan</p> <p>Newport Fisherman's Wives/Sea Grant 10/15/2024: 12 Narcan</p> <p>Lincoln County Transit District 10/26/2024: 36 Narcan</p> <p>Healthier You Expo 10/19/2024: 35 Narcan</p> <p>SHS Center for Health Education (First Aid Training Courses) 10/19/2024: 24 Naloxone</p>			

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		<p>Lincoln County Adult Behavioral Health & Mobile Crisis Teams 12/14/2023: 12 Narcan Bloom 5/15/2024: unknown Yachats Event 6/1/2024: 12 Narcan Lincoln City Event 6/29/2024: unknown OCF 7/10-14/2024: 48 Narcan PAADA/DeNoble/Seashore Literacy Center 9/3/2024: 6 Narcan Lincoln County School-Based Health Center 9/5/2024: 48 Narcan</p>	<p>Responsible Sales Training 10/23/2024: 10 Narcan Lincoln County Jail 10/26/2024: 12 Narcan Fisherman's First Aid Course 11/12/2024: 48 Narcan Oregon Coast Aquarium 11/19/2024: 17 Narcan Behavioral Health Transit Crew 11/21/2024: 12 Narcan Medication Station 12/12/2024: 47 Narcan Samaritan Center for Health Education 1/16/2025: 24 Narcan Lincoln County Jail 1/29/2025: 36 Narcan Newport Library 2/7/2025: 36 Narcan</p>				
2h	2	<p>LCHHS will provide trainings to community and family members on proper use of Narcan and injectable naloxone in multiple languages.</p>	<p>Increased number of people who can administer Narcan to reduce overdose fatalities</p>	<p># of attendees through sign-in sheets</p>	<p>LCHHS</p>	<p>Q4</p>	<p>In Progress</p>
		<p>Details 2h. LCHHS LCHHS leads Narcan trainings in Lincoln County.</p> <p><u>Narcan Training Events for LCHHS</u> Responsible Sales Training – Lincoln City 2/7/2023: 4 attendees Responsible Sales Training – Newport 2/9/2023: 20 attendees Lincoln City Christian School 3/17/2023: 7 attendees Lincoln County Public Health Child and Family Team 3/31/2023: 15 attendees St. James Santiago School 4/15/2023: 9 attendees Yachats Library 5/1/2023: 30 attendees Angell Job Corp 5/4/2023: 1 attendee Depoe Bay City Council 5/16/2023: 12 attendees Newport Library 7/7/2023: 10 attendees Library Foundation 7/12/2023: 11 attendees Lincoln City Parks & Recreation 7/24/2023: 9 attendees Lincoln City Kiwanis 7/27/2023: 35 attendees US Coast Guard Station, Depoe Bay 9/5 & 9/11 15 total attendees LCHHS Primary Care 9/12/2023 10 attendees Angell Job Corps 9/18/2023 55 attendees LCHHS Primary Care 9/26/2023 25 attendees LCHHS Winter Shelter Staff 10/19/2023 3 attendees</p>	<p>LCHHS Health Council 10/20/2023 15 attendees PAADA YLA 10/23/2023 80 attendees Newport Library 11/2/2023 8 attendees Angell Job Corps 12/1/2023 65 attendees Lincoln County Public Health 12/12/2023 41 attendees Lincoln County Adult Behavioral Health & Mobile Crisis Teams 12/14/2023 25 attendees Urgent Care Newport 3/19/2024 unknown Board of Commissioners 4/17/2024 unknown Newport Fire & Rescue 4/22/2024 unknown Hatfield Marine Science Center 4/23/2024 unknown Community Conversations 2/29/2024 unknown Urgent Care Newport 3/19/2024 unknown Urgent Care Lincoln City 3/20/2024 unknown Board of Commissioners 4/17/2024 unknown Newport Fire and Rescue 4/22/2024 unknown Hatfield Marine Science Center 4/23/2024 unknown Moonshine Parks Staff 5/7/2024 unknown Elections Staff 5/8/2024 unknown Newport Aquarium 5/15/2024 unknown Newport Aquarium 5/21/2024 unknown Fentanyl Eradication Marches 6/13/2024 unknown Fentanyl Eradication Marches 6/27/2024 unknown Angell Job Corps Quarterly Resource Fair 6/21/2024 unknown Fentanyl Eradication Marches 7/8/2024 unknown Angell Job Corps Quarterly Resource Fair 8/23/2024 unknown Board of Commissioners Proclamation and Trainings Session 8/31/2024 unknown PAADA Narcan/Polysubstance Presentation in Waldport 9/3/2024 6 attendees PAADA Narcan/Polysubstance Presentation in Yachats 9/17/2024 8 attendees Lincoln County Transit District 10/16/2024 36 attendees Responsible Sales Training 10/23/2024 10 attendees Fisherman's First Aid Course 11/12/2024 20 attendees Oregon Coast Aquarium Staff 11/19/2024 17 attendees Behavioral Health Transit Crew 11/21/2024 12 attendees</p>				

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2i	5	LCSO will provide trainings to law enforcement and first responders on proper use of Narcan and injectable naloxone.	Increase number of people who can administer Narcan to reduce overdose fatalities	# of attendees through sign-in sheets	LCSO	Q4	Completed
		Details 2i. LCSO 85/100 staff were trained prior to the HIWAY grant and the remaining members are in the process of becoming trained. There is also retraining that is taking place. Everyone will be trained by the end of Year 1 of the HIWAY grant. 4/4/2023					
	2j	3	PAADA will conduct community training and education on safe storage and disposal of prescription drugs.	Increase awareness of safe storage and disposal of prescription drugs	# of trainings # attendees through sign-in sheet	PAADA	Q2, Q6, Q10
Details 2j. PAADA <u>August 2023</u> PAADA's website is up and running and has a drug-take-back page as well as a youth leadership page. <u>September 2023</u> 9/30/2024 PAADA tabled at the Healthier You Expo and spoke 1:1 with approximately 70 people regarding safe disposal of medications and where to find drop boxes around Lincoln County. <u>December 2023</u> 12/1/2023 Reposted 'how-to' video on safe prescription drug disposal. <u>March 2024</u> PAADA is preparing for an upcoming Drug Take Back Community Education Event in March. They were also invited to present to Waldport City Council in March about the prescription drug safe disposal sites (only one permanent site there). They continue to collaborate with Waldport City Council to establish additional drop-off locations in Waldport and South county. At this time, City Hall is not interested in participating as a drop site saying that the risk of theft is too high. Lincoln County Sheriff's Office is not able to supervise a drop site consistently and the local fire department has not responded on partnering efforts. <u>April 2024</u> 4/1/2024 PAADA partnered with Lincoln County Public Health staff to present on safe storage & disposal of medications. <u>May 2024</u> PAADA presented on Safe Storage & Disposal at a community education event.							
2k	3	PAADA will conduct on-going drug take-back programs throughout the year.	Reduce incidents of drug use and overdose	Quantity of drugs collected	PAADA	Q2-Q12	In Progress
		Details 2k. PAADA <u>Recovery Month September 2022 & 2023</u> PAADA is evaluating the drug-take-back at this event. On PAADA's website, there is a page that have been developed with links to locations for safe disposal throughout Lincoln County. With locations all throughout Lincoln County, there is not a need at this time to host drug take back events. PAADA continues to help educate the community on how and where to safely dispose of medications. <u>September 2024</u> PAADA is increasing efforts and collaborating on ideas for safe storage and disposal for active users to prevent child overdose.					
2l	3	Marketing and education campaign will provide information about drug take back programs, including community locations of secure drop boxes.	Increase in awareness of drug take back program Increase use of drop boxes	# of media messages, articles and printed materials distributed	PD/DC, PAADA	Q1-Q12	In Progress

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		<p>Details 2l. PAADA <u>August 2023</u> PAADA has developed new flyers that are posted on Facebook, their website, community/pharmacy locations, and all throughout the county. Lincoln County Health and Human Services created a flyer for their own website and Facebook page. 8/31/2023 <u>September 2023</u> One drug-take-back information card was developed 1 Facebook story was shared on 9/28/23 1 Facebook post was shared on 9/28/23 <u>October 2023</u> Step-by-step instructional video about mail-back prescription disposal was posted to the PAADA website and social media 10/31/23 PSAs went out on local radio spots in December 2023. PAADA worked with the Eddyville Sports class who have experience in podcasting/broadcasting to update and add a youth voice to the PSAs. 2/29/2024 <u>January 2024</u> Plans for medication take-back PSA post-flu season Community education event promotion with info spots on social media (specific training to happen in April) <u>March 2024</u> Increased effort in collaboration with LCPH to establish more visible take-back efforts Online ad put up regarding drug take back events (will continue through August 2024) <u>May 2024</u> Increased messaging about safe storage of medications at home due to incoming visitors during summer months.</p>					
2m	4	<p>Individuals at risk of infectious complication, including HIV, viral hepatitis, and endocarditis, will be screened, tracked, and referred to treatment.</p>	<p>Increase number of individuals with or at risk of infectious complications who are referred to treatment</p>	<p># of screenings and referrals</p>	<p>SNLH, SPCH, SMG, LCHHS, CTSI</p>	<p>Q1-Q12</p>	<p>In Progress</p>
		<p>Details 2m. CTSI # of screenings & referrals: 9/1/2022 – 2/28/2023: 2 & 2 3/1/2024 – 8/31/2024: 42 & 2 CTSI CTSI has expanded their efforts to include sex education in the Siletz Valley School and in the community. In February 2024, the CTSI educator held a ladies & guardians night where safe sex information could be shared in a positive way. This helped to remove stigmas associated with talking about sex. They did a craft together, shared a nice meal, were able to distribute condoms, lube, HIV information flyers and cards with support and connections for testing & supplies. Nine youth were in attendance and seven adults. In March 2024, the CTSI coordinator hosted a raffle event where individuals could enter a raffle drawing after they got tested for Hep C (HCV) & HIV. 12 adults were tested.</p>					
		<p>SHS # of individuals with an SUD diagnosis who were tested for HIV/AIDS: 9/1/2022 – 2/28/2023: 72 3/1/2023 – 8/31/2023: 60 9/1/2023 – 2/29/2024: 80 3/1/2024 – 8/31/2024: 65 9/1/2024 – 2/28/2025: 81</p> <p># of individuals with an SUD diagnosis who were tested for HCV: 9/1/2022 – 2/28/2023: 86 3/1/2023 – 8/31/2023: 54 9/1/2023 – 2/29/2024: 86 3/1/2024 – 8/31/2024: 77 9/1/2024 – 2/28/2025: 74</p>					

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	2n	5	Coordinate training and education opportunities for law enforcement and first responders to understand the trends of SUD/OD in the community particularly unhoused, pregnant women, youth and community members.	Create a more compassionate environment that will improve access to services for women, youth and community members	# of people attend trainings	PD/DC	Q3, Q7, Q11	In Progress
Details 2n. LCHHS LCHHS planned the first annual Mental Health Symposium on 1/26/2023. Present were first responders and law enforcement. 2/28/2023								
Goal 3: Strengthen and expand SUD/OD treatment and recovery services in Lincoln County.								
Develop and implement all five core treatment and recovery activities by August 31, 2025.	3a	1	Monthly CCCWN/MHSUD and HIWAY Consortium meetings 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.	Improve coordination of services for women, youth and community members with SUD/OD	Service integration model implemented in the community	PD/DC, SNLH	Q1-Q4	In Progress
	Details 3a. Organizations representing physicians, mental health providers, dentists, local law enforcement and service providers attend local meetings and work together to reduce barriers to treatment and recovery.							
	3b	1	Provide annual CME on stigma and SUD/OD to providers and the community.	Increase awareness of the impacts of stigma, reduce stigma among providers and community	# CMEs offered	PD/DC, SNLH	Q3, Q7, Q11	In Progress
Details 3b. SHS Dr. Haner Hernandez presented on Eliminating Disparities & Building Health Equity at the Boulder Falls Event Center on 9/26/2023. This activity was completed and will not occur again. 50 service providers from Linn, Benton and Lincoln Counties learned how to better provide treatment services for people of color and other populations through a health equity lens. Participants were able to: 1. Define health disparities and health equity 2. Understand and describe the concepts of cultural humility and cultural intelligence 3. Name at least three tools designed to improve outcomes 4. Name at least five strategies for participant/client engagement, retention, improving outcomes All educational opportunities assist is reducing stigma and normalizing care for these health issues. 8/31/2024 SHS CME opportunities: 10/13/2022 SUD Panel: 51 attendees 11/7/2022 Cannabis & Cannabinoids: Clinical Considerations: 96 attendees 11/30/2022 Antidepressants: Starting Them and Stopping Them: 70 attendees 2/23/2023 New & Trending Marijuana Products: 208 attendees 4/12/2023 Pain the SUD Setting: 55 attendees 4/27/2023 Vaping Associated Lung Injury: 74 attendees 9/24/2024 Veteran Suicide: 47 attendees 12/5/2024 Opioid Use Disorder: 58 attendees In September 2024, the HIWAY grant team hosted two documentary showings for the community during the week of September 9th in Lincoln County. The documentary film, <i>Inheritance</i> , followed the life of a young child for 11 years growing up in rural Appalachia. The film depicted what his life was like growing up in poverty and being surrounded by parents and family members who all used drugs. After showing the 82-minute film, we hosted a community conversation with the filmmaker and the main character in the documentary, the boy, Curtis. He is								

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		<p>now 18 and since the premiere of the documentary in 2024, he has been traveling to talk about his experience. This film was shown to individuals over the age of 18 and we advertised the events to community members, medical providers, and partners throughout our county and region. The film was free to attend and educational materials including books and pamphlets were passed out to attendees. Community organizations such as the Hatfield Marine Science Center in Newport and the Lincoln City Cultural Center in Lincoln City partnered with us to show the film.</p> <p>Current planning efforts will bring the University of Rochester Center of Excellence to Lincoln County in May 2025. Tedra Cobb will be hosting four community conversations, two of which will occur in Lincoln County. In addition to these stigma reducing community conversations, there will be one Facilitator Leader Training. This training is intended for members of the community who want to be trained in providing stigma reduction trainings. Current planning is underway with locations secured for May 19 (Oregon Coast Community College) and May 20 (Lincoln City Community Center). Outreach efforts are underway and the HIWAY grant team is working to spread the flyer for the event and encourage people to sign up. 2/28/2025</p>					
3c	1	<p>Prioritize hiring providers who already have DEA Waiver to provide medication assisted treatment and strongly encourage new hires to obtain DEA Waiver</p>	<p>Increase number of providers with DEA Waiver, increase available MAT services</p>	<p># of hires with DEA Waiver</p>	<p>SNLH, SPCH, SMG</p>	<p>Q1-Q12</p>	<p>Not Started</p>
<p>Details 3c. DEA Waivers are no longer required to provide MAT.</p>							
3d	1	<p>Offer DEA Waiver trainings annually in Lincoln County to increase number of providers and other paraprofessionals licensed to provide MAT services.</p>	<p>Increase number of providers with DEA Waiver, increase available MAT services</p>	<p># of trainings offered</p>	<p>SNLH, SPCH, SMG</p>	<p>Q2, Q6, Q10</p>	<p>Not Started</p>
<p>Details 3d. DEA Waivers are no longer required to provide MAT.</p>							
3e	2	<p>Provide community linkages and referral systems for entry into MAT/treatment from primary care, ED and community partners.</p>	<p>Increase the number of individuals accessing MAT treatment</p>	<p># of individual entering MAT treatment</p>	<p>SNLH, SPCH, SMG, LCHHS, RCC, OC, FHC, SH, NWCH</p>	<p>Q2 – Q12</p>	<p>In Progress</p>
<p>Details 3e. SNLH/SPCH/SMG MAT Individuals: 9/1/2022 – 2/28/2023: 56 3/1/2023 – 8/31/2023: 57 9/1/2023 – 2/29/2024: 65 3/1/2024 – 8/31/2024: 61 9/1/2024 – 2/28/2025: 64</p> <p>MAT providers in Lincoln County include: Changing Tides, Depoe Bay, 1 MAT provider SHS Toledo Clinic, Toledo, 1 MAT provider Equinox Clinics, Lincoln City, Newport, 1 MAT provider Lincoln County OBAT program in Newport, Lincoln City, Waldport, 4 MAT providers Siletz Clinic, 1 MAT provider New Life Wellness, LLC, 1 MAT provider</p>							
3f	2	<p>Peer Support Specialists in the EDs will provide services in the ED and hospital setting, providing a linkage into MAT/treatment services, as well as connecting individual to support services such as housing and transportation, as needed.</p>	<p>Peer support services available on-site to facilitate entry into treatment. Increase number of people entering SUD / OUD treatment. Housing and transportation available</p>	<p># of contacts, # of referrals # of individuals entering treatment # of individuals in treatment provided housing and/or transportation</p>	<p>SNLH, SPCH, RCC, SH, NWCH, FHC</p>	<p>Q2-Q12</p>	<p>In Progress</p>

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		<p>Details 3f. FHC PSS: #Contacts 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 4 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 30 #Referrals 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 3 3/1/2024 – 8/31/2024: 8 9/1/2024 – 2/28/2025: 6 #Individuals Entering Treatment 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 3 3/1/2024 – 8/31/2024: 4 9/1/2024 – 2/28/2025: 2 #Individuals in treatment provided housing/transportation 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 4 9/1/2024 – 2/28/2025: 4</p>	<p>RCC PSS #Contacts 9/1/2022 – 2/28/2023: 136 3/1/2023 – 8/3/2023: 182 9/1/2023 – 2/29/2024: 300 3/1/2024 – 8/31/2024: 289 9/1/2024 – 2/28/2025: 251 #Referrals 9/1/2022 – 2/28/2023: 20 3/1/2023 – 8/3/2023: 18 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 34 9/1/2024 – 2/28/2025: 25 #Individuals Entering Treatment 9/1/2022 – 2/28/2023: 25 3/1/2023 – 8/3/2023: 18 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 34 9/1/2024 – 2/28/2025: 25 #Individuals in treatment provided housing/transportation 9/1/2022 – 2/28/2023: 136 3/1/2023 – 8/3/2023: 182 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 34 9/1/2024 – 2/28/2025: 25</p>	<p>RCC The RCC PSS has been working to find Spanish-speaking residential treatment program. She is also working on developing relationships with these locations. The best program she found in the state was Best Care, located in Madras, OR, which has a large Latinx population. They are one of the only Spanish-speaking residential treatment programs in the state. 2/29/2024 ReConnections Counseling now has two bilingual peer support specialists. They lead two Spanish-speaking groups in Newport and two in Lincoln City. One of the groups is DUI specific. A different Spanish-speaking group is education therapy related. Another group focuses on group activities. They do fun activities such as going to the zoo, water park, and focus on really caring for the group members and making sure they all feel valued and a part of a group. 8/31/2024</p>	<p>NWCH #Contacts 9/1/2023 – 2/29/2024: 57 3/1/2024 – 8/31/2024: 122 9/1/2024 – 2/28/2025: 108 #Referrals 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 5 9/1/2024 – 2/28/2025: 12 #Individuals Entering Treatment 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 3 9/1/2024 – 2/28/2025: 6 #Individuals in treatment provided housing/transportation 9/1/2023 – 2/29/2024: 5 3/1/2024 – 8/31/2024: 122 9/1/2024 – 2/28/2025: 53 NWCH hired their PSS on April 26, 2024. This individual has been off to a great start in their role. In their first couple of weeks, they successfully got two clients into Powerhouse Detox. They are also well connected with Lincoln County Maternal and Child Health to ensure that the pregnant and parenting clients at Coastal Phoenix Rising (CPR) are receiving the care they need. In addition to connections to detox that the new peer has been able to make for the CPR clients, he has also helped three clients get on medication-assisted treatment. 8/31/2024</p>		
3g	3	<p>Partners will offer linkages to and coordination with community services including case management, housing, employment, transportation, food, and childcare to support individuals in recovery.</p>	<p>Increase the services and supports available for women, youth and community members in recovery</p>	<p># of individuals in recovery accessing services</p>	<p>RCC, SH, NWCH, OC, FHC</p>	<p>Q2- Q12</p>	<p>In Progress</p>
		<p>Details 3g. FHC PSS #Individuals in recovery accessing services: Case Management 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 7 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0 Housing 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 3</p>	<p>RCC PSS #Individuals in recovery accessing services: Case Management 9/1/2022 – 2/28/2023: 25 3/1/2023 – 8/3/2023: 24 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 25 Housing 9/1/2022 – 2/28/2023: 5 3/1/2023 – 8/3/2023: 6 9/1/2023 – 2/29/2024: 10 3/1/2024 – 8/31/2024: 9 9/1/2024 – 2/28/2025: 3</p>	<p>NWCH PSS #Individuals in recovery accessing services: Case Management 9/1/2023 – 2/29/2024: 27 3/1/2024 – 8/31/2024: 94 9/1/2024 – 2/28/2025: 120 Housing 9/1/2023 – 2/29/2024: 57 3/1/2024 – 8/31/2024: 122 9/1/2024 – 2/28/2025: 218 Employment 9/1/2023 – 2/29/2024: 5 3/1/2024 – 8/31/2024: 45 9/1/2024 – 2/28/2025: 68</p>	<p>Olalla Center Olalla Center usually screens out clients with active SUD and refers to partner organizations for SUD services; however, several clients at Olalla who formerly had a SUD diagnosis now receive mental health services while in recovery. With the addition of a therapist to Project Bravery, it has expanded its capacity to provide SUD recovery services. PB manages a clothing closet for their clients. Thrift stores often provide Project Bravery vouchers for the value of their donations for their clients. 8/31/2023 The PB program manager met with the community health program manager of Equi Institute to discuss funding options for low-income, housing-insecure individuals. PB also met with local clergy, who have applied for rapid rehousing grant funds.</p>		

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		<p>Employment 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 4</p> <p>Transportation 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 5 3/1/2024 – 8/31/2024: 4 9/1/2024 – 2/28/2025: 2</p> <p>Food 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0</p> <p>Childcare 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0</p> <p>FHC FHC is partnering with NWCH Coastal Phoenix Rising (CPR) to do peer support at the CPR location in Lincoln City. 8/31/2023</p> <p>FHC is also partnering with ReConnections Counseling to provide support and services for the houseless populations. 8/31/2024</p>	<p>Employment 9/1/2022 – 2/28/2023: 6 3/1/2023 – 8/3/2023: 8 9/1/2023 – 2/29/2024: 25 3/1/2024 – 8/31/2024: 22 9/1/2024 – 2/28/2025: 8</p> <p>Transportation 9/1/2022 – 2/28/2023: 25 3/1/2023 – 8/3/2023: 23 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 25</p> <p>Food 9/1/2022 – 2/28/2023: 10 3/1/2023 – 8/3/2023: 12 9/1/2023 – 2/29/2024: 10 3/1/2024 – 8/31/2024: 12 9/1/2024 – 2/28/2025: 25</p> <p>Childcare 9/1/2022 – 2/28/2023: 5 3/1/2023 – 8/3/2023: 3 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 3 9/1/2024 – 2/28/2025: 3</p> <p>RCC The RCC PSS has been assigned to DHS clients to help them in navigating services in the community. 8/31/2023</p> <p>RCC's PSS has been contacted by My Sisters Place (domestic violence organization https://www.facebook.com/MSPNewport/) and the Lincoln County School District to work with a local family who are residing at the domestic violence shelter. She has been working with them to navigate housing services and FAIR (Family's Actively Improving Relationships) services. https://www.reconnections-counseling.com/fair 2/28/2023</p>	<p>Transportation 9/1/2023 – 2/29/2024: 16 3/1/2024 – 8/31/2024: 41 9/1/2024 – 2/28/2025: 46</p> <p>Food 9/1/2023 – 2/29/2024: 3 3/1/2024 – 8/31/2024: 40 9/1/2024 – 2/28/2025: 11</p> <p>Childcare 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 5</p> <p>NWCH NWCH continues to support two pregnant and/or parenting women with SUD with transitional housing at their Coastal Phoenix Rising facility. 8/31/2024</p> <p>SH Samaritan House continues to provide childcare services for children of adults who are participating in active recovery activities. 8/31/2023 Samaritan House continues to provide childcare services. 2/28/2025</p>	<p>PB joined with St. Stephen's and St. Luke's Episcopal Churches in Newport and Waldport, respectively, in order to take part in a "rapid rehousing" grant which would support housing-insecure community members. 2/29/2024</p>		
3h	4	<p>Peer Support Specialists will conduct outreach to organizations serving pregnant women to assist in navigating the treatment and recovery system.</p> <p>Details 3h. FHC PSS: #Pregnant Women Provided Assistance: 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 1 9/1/2024 – 2/28/2025: 0</p>	<p>Improve access to treatment and recovery programs for pregnant women</p> <p>RCC PSS: #Pregnant Women Provided Assistance: 9/1/2022 – 2/28/2023: 10 3/1/2023 – 8/3/2023: 8 9/1/2023 – 2/29/2024: 8 3/1/2024 – 8/31/2024: 5 9/1/2024 – 2/28/2025: 8</p>	<p># of pregnant women provided assistance</p> <p>NWCH PSS: #Pregnant Women Provided Assistance: 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 23</p>	<p>SNLH, SPCH, RCC, SH, FHC, NWCH</p> <p>RCC, SH & NWCH: RCC, SH, and NWCH participate in a weekly meeting where they discuss and coordinate care and services for their Nurture Oregon cliental. They discuss housing, medical services needed, recovery groups and participation, etc. 8/31/2023 RCC's PSS attends the Nurture Oregon group every Monday and helps to facilitate the Peer Support Group of women who are pregnant and/or postpartum. She is the main resource navigator</p>	<p>Q2-Q12</p>	<p>In Progress</p>

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							for this group. The group has 3-6 participants per week. 2/28/2023 These three organizations continue to meet on a weekly basis to discuss care coordination for pregnant and postpartum women participating in the Nurture Oregon program. The RCC's PSS is actively involved in these meetings and with the Nurture Oregon clients. 2/28/2025
3i	4	Peer Support Specialists will conduct outreach efforts to schools and youth serving agencies to assist youth navigate the treatment and recovery system.	Improve access to treatment and recovery programs for youth	# of youth provided assistance	RCC, OC, FHC, NWCH	Q2-Q12	In Progress
		Details 3i. RCC PSS: #Youth Provided Assistance: 9/1/2022 – 2/28/2023: 2 3/1/2023 – 8/3/2023: 2 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: unknown RCC RCC's PSS served one pregnant 17-year-old through housing search support. Additionally, she translated for a 13-year-old youth and his family. She sits in on their appointments as they navigate treatment services. 2/28/2023		NWCH PSS: #Youth Provided Assistance: 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 1 9/1/2024 – 2/28/2025: 4 FHC PSS: #Youth Provided Assistance: 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 1			
3j	4	Peer Support Specialists will assist individuals, family members and caregivers with referrals and connections to community-based and social support services available in the community.	Improve access to services and community supports for women, families, caregivers, and youth with SUD/OD	# of people who are referred to services # of people connected to services	SNLH, SPCH, RCC, SH, FHC, NWCH	Q1-Q12	In Progress
		Details 3j. FHC PSS: # people referred to community based/social support services: 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 15 FHC FHC's PSS is working on getting integrated into Lincoln County. They are a new agency to Lincoln County and have started to serve clients through receiving referrals from partner agencies, such as NWCH. FHC has served 9 clients with PSS services. 2/28/2023 FHC is now well-integrated in Lincoln County and has been meeting with clients at the ReConnections Counseling Annex, as well as the Newport Library. FHC is currently looking for office space in Lincoln County so that		RCC PSS: # people referred to community based/social support services: 9/1/2022 – 2/28/2023: 35 3/1/2023 – 8/3/2023: 30 9/1/2023 – 2/29/2024: 30 3/1/2024 – 8/31/2024: 32 9/1/2024 – 2/28/2025: unknown RCC RCC's PSS has started a Spanish speaking group at the Newport Annex and groups began meeting in April 2023. Due to challenges, individuals often go without treatment until they are court-mandated to a program or suffer injuries and other substance use-related health crises that require emergency medical services. Offering groups and services in their language allows us to break through those barriers and support them in getting the services they need. The RCC PSS has made connections to three churches with Spanish-speaking congregations. She dropped off brochures that are going to be put in food boxes for outreach on a weekly basis. 8/31/2023		Since September 2023, the RCC PSS has been focusing on getting people that are uninsured on the Oregon Health Plan (OHP). She has been working with the Oregon Health Authority and has helped 15 individuals get placed on OHP. The RCC PSS now has two Spanish-speaking peer groups in Newport and one in Lincoln City. 2/29/2024 Peer delivered services to the Spanish-speaking population have been going well and the need has increased, resulting in the hiring of another PSS in the Lincoln County area (not funded by the HIWAY grant). Between the two PSS in Lincoln County, three group sessions are held once a week. Two are located in Newport and one is located in Lincoln City. Overall, there are 25 Spanish-speaking clients. The focus is not only on serving the individual in treatment or recovery, but the entire family unit. 8/31/2024 NWCH PSS: # people referred to community based/social support services: 9/1/2023 – 2/29/2024: 75 3/1/2024 – 8/31/2024: 87 9/1/2024 – 2/28/2025: 77	

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		they can have their own physical location to meet with clients. 2/28/2025				
3k	5	Provide recovery support services including case management, housing, employment, transportation, food, childcare, and doula support for pregnant to women, youth and community members with SUD/ODU.	Increase the services available to individuals in recovery	# of individuals accessing services	RCC, SH, FHC, NWCH	Q2-Q12 In Progress
		<p>Details 3k. (SAME DATA AS ACTIVITY 3g)</p> <p>FHC PSS #Individuals in recovery accessing services: Case Management 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 7 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0 Housing 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 3 Employment 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 2 9/1/2024 – 2/28/2025: 4 Transportation 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 5 3/1/2024 – 8/31/2024: 4 9/1/2024 – 2/28/2025: 2 Food 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0 Childcare 9/1/2022 – 2/28/2023: 0 3/1/2023 – 8/3/2023: 0 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 0</p>	<p>RCC PSS # Individuals in recovery accessing services: Case Management 9/1/2022 – 2/28/2023: 25 3/1/2023 – 8/3/2023: 24 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 25 Housing 9/1/2022 – 2/28/2023: 5 3/1/2023 – 8/3/2023: 6 9/1/2023 – 2/29/2024: 10 3/1/2024 – 8/31/2024: 9 9/1/2024 – 2/28/2025: 3 Employment 9/1/2022 – 2/28/2023: 6 3/1/2023 – 8/3/2023: 8 9/1/2023 – 2/29/2024: 25 3/1/2024 – 8/31/2024: 22 9/1/2024 – 2/28/2025: 8 Transportation 9/1/2022 – 2/28/2023: 25 3/1/2023 – 8/3/2023: 23 9/1/2023 – 2/29/2024: 35 3/1/2024 – 8/31/2024: 35 9/1/2024 – 2/28/2025: 25 Food 9/1/2022 – 2/28/2023: 10 3/1/2023 – 8/3/2023: 12 9/1/2023 – 2/29/2024: 10 3/1/2024 – 8/31/2024: 12 9/1/2024 – 2/28/2025: 25 Childcare 9/1/2022 – 2/28/2023: 5 3/1/2023 – 8/3/2023: 3 9/1/2023 – 2/29/2024: 2 3/1/2024 – 8/31/2024: 3 9/1/2024 – 2/28/2025: 3</p>	<p>RCC RCC's PSS is supporting 5 Latino/a/x individuals at RCC and many women through the Nurture Oregon program. 2/28/2023 RCC's PSS has been working with six Nurture Oregon families and has been involved in two births. Her services primarily focus on supporting families in getting their medical needs met and addressing health issues, with the goal of children remaining with their parents and in the home. 2/28/2025 NWCH PSS # Individuals in recovery accessing services: Case Management 9/1/2023 – 2/29/2024: 27 3/1/2024 – 8/31/2024: 94 9/1/2024 – 2/28/2025: 120 Housing 9/1/2023 – 2/29/2024: 57 3/1/2024 – 8/31/2024: 122 9/1/2024 – 2/28/2025: 218 Employment 9/1/2023 – 2/29/2024: 5 3/1/2024 – 8/31/2024: 45 9/1/2024 – 2/28/2025: 68 Transportation 9/1/2023 – 2/29/2024: 16 3/1/2024 – 8/31/2024: 41 9/1/2024 – 2/28/2025: 46 Food 9/1/2023 – 2/29/2024: 3 3/1/2024 – 8/31/2024: 40 9/1/2024 – 2/28/2025: 11 Childcare 9/1/2023 – 2/29/2024: 0 3/1/2024 – 8/31/2024: 0 9/1/2024 – 2/28/2025: 5</p>	<p>SH Samaritan House is providing housing to two families who are new parents with SUD/ODU. SH is continuing to receive referrals from PSSs. 2/28/2023 FHC The PSS has been providing services in Lincoln County twice per week. Their focus has been on serving individuals in transitional living situations, individuals with mental health needs, and pregnant and parenting individuals. FHC has been using one of their funding streams to help individuals get access to transport through the purchase of used bikes. Once success they shared was that one client was able to successfully get a job due to having consistent transportation with the bike. They have also been able to pass out survival gear and other items such as phones, sleeping bags, tents, socks and baby clothes. FHC have also been helping clients get access to mental health services by accompanying them to Lincoln County Mental Health and helping them to fill out paperwork. 8/31/2024 CTSI CTSI will have six staff members participate in doula training in April 2025. 2/28/2025</p>	

FY22 RCORP Implementation IV – Year 3 Progress Report 1 Request for Information

2. Grantee Information

1. Grantee Name and RCORP Grant Number

SAMARITAN NORTH LINCOLN HOSPITAL (GA1RH45981)

Your responses to this Request for Information should reflect the current reporting period (September 1, 2024-February 28, 2025).

3. Implementation IV Prevention-Related Work Plan Activities

2. P1. Community-based Prevention. Support culturally and linguistically appropriate substance use prevention activities and evidence-based programs, delivered in diverse environments (e.g., schools, community centers) and to diverse participants.

In September 2024, Samaritan Health Services, in partnership with Lincoln County Health and Human Services (LCHHS), hosted two tabling events for Recovery Month. One event took place on September 4th at Samaritan North Lincoln Hospital (Grant Applicant) and the other event took place on September 5th at Samaritan Pacific Communities Hospital (Partner). At both events, books were passed out to staff and community members to educate about and reduce stigma associated with Substance Use Disorders (SUD). Narcan was also available and distributed to SHS staff and community members. Pamphlets were passed out, offering prevention education on the following topics:

- 6 Things Kids Need to Know About Drugs
- Xylazine: What You Need to Know
- Opioids & Stigma: Why It Matters and What You Can Do
- Dealing with Relapse
- Vaping, Smoking & Your mental Health
- Building Resilience and Hope during stressful times
- The risks of fentanyl & fake pills
- Naloxone: What You need to know
- Opioid Misuse and Overdose: What friends and family need to know
- Opioid Addiction: What everyone should know about treatment and recovery
- Los opioides y el estigma
- Naloxona: Lo que debe saber
- Uso indebido y sobredosis de opioides: Lo que amigos y familiares necesitan saber
- La adicción a opioides: Lo que todos deben saber sobre el tratamiento y la recuperación
- Los riesgos del fentanilo y las pastillas falsas

To continue stigma reduction associated with SUD, the Helping Impact Women and Youth (HIWAY) grant team hosted two documentary showings for the community during the week of September 9, 2024 in Lincoln County. The documentary film, *Inheritance*, followed the life of a young child for 11 years growing up in rural Appalachia. The film depicted what his life was like growing up in poverty being surrounded by parents and family members who all used drugs. After showing the 82-minute film, we hosted a community conversation with the filmmaker and the main character in the documentary, Curtis. He is now 18 and since the premiere of the documentary in 2024, he has traveled and shared his experience. This film was shown to individuals over the age of 18. We advertised the events to community members, medical providers, and partners throughout our county and region. The film was free to attend. Educational materials including books and pamphlets were passed out to attendees.

Partnership Against Alcohol and Drug Abuse (PAADA) hosted their Fall 2024 Youth Leadership Academy on October 7, 2024, at the Center for Health Education in Newport, OR. There were 45 high school youth in attendance. The workshops offered focused on trauma-informed care, restorative communication, peer support, neurological impacts of addiction, and safe community spaces. All the workshops offered served as foundational elements for the development of the Healthy Communities Youth Advisory (HCYA or Heck-Yeah!). This committee has been developed and includes high school youth who have a desire to take a leadership role in substance use prevention advocacy, education, and outreach. HCYA began meeting in December 2024 and began planning for the launch of the first Middle School Leader's Summit which took place on February 27, 2025. The day included guest speaker, Jake White, from Vive 18 who spoke about SUD prevention in a fun and engaging way. HCYA was not only involved in the planning for the event but also served on a panel where they led the discussion, "What I wish I knew my freshman year...". Middle school students were able to ask questions and myths were busted surrounding drugs, alcohol, and partying in high school. During the lunch break, the new film by A Song for Charlie called "The New Drug Talk" was shown to the students. Overall, 38 middle school students were able to attend from five different schools across Lincoln County: Newport, Toledo, Taft, Waldport, and Siletz.

The Confederated Tribes of Siletz Indians (CTSI) hosted a successful sober New Years Eve party with culturally specific activities that over 25% of the community in Siletz attended. Prevention education was provided and Narcan was distributed.

3. P2. Naloxone Access. Increase access to naloxone within the target rural service area and provide training on overdose prevention and naloxone administration for community members likely to respond to an overdose.

PAADA began hosting bimonthly community education events in Toledo and Waldport. In September 2024, the outreach event included a training on risk reduction. This included education on fentanyl, xylazine and Narcan administration. In November 2024, they provided Automated External Defibrillator (AED) and CPR training that instructed on how to perform hands-on CPR for someone experiencing an overdose. In January 2025, they began to show the new Song for Charlie documentary titled "The New Drug Talk". At all community education events held by PAADA Narcan was available for distribution.

CTSI has been a leader in Narcan administration across the county. They currently have Narcan available for community members in their area offices, clinic, housing department, and administration building. They also have locations in Siletz where newspaper stand style, free standing naloxone distribution boxes, or barneys, are located for individuals to have easy access to free Narcan. Recently, they were able to take 10 Narcan kits to the Chinook Winds Casino in Lincoln City to have them available for use there. Within the last three years, they have passed out 43,000 Narcan kits.

All HIWAY partners continue to have an adequate supply of Narcan. The regional overdose prevention coordinator with LCHHS is actively involved in regional meetings and outreach events and can be a source of Narcan when needed.

4. P3. Prescription Drug Storage and Disposal. Train community members and other stakeholders on safe storage and disposal of prescription drugs with potential for misuse.

In September 2024, PAADA coordinated a prescription drug storage and disposal event and continue to speak openly to community members about storage and disposal sites located throughout the county each time they host community events.

In early 2025, CTSI opened their new pharmacy providing prescription drug storage and disposal as well.

5. P4. SUD Screening and Referral. Identify and screen individuals at risk for SUD/ODU and co-occurring disorders/infectious complications (including HIV, viral hepatitis, mental illness, etc.), and provide, or make referrals to, prevention, risk reduction, early intervention, treatment, and other support services.

Samaritan Health Services' rural hospitals and clinics in Lincoln County continue to screen and diagnose individuals for SUD. Between September 1, 2024 – February 28, 2025, 10,606 individuals were screened or diagnosed with a SUD. Of the 1,061 individuals diagnosed with SUD, 144 were screened for depression, 81 were tested for HIV/AIDS, 74 were tested for Hepatitis C, and 5 were referred to treatment.

6. P5. Law Enforcement and First Responder Collaboration. Train and strengthen collaboration with and between law enforcement and first responders to enhance their capability of responding and/or providing emergency treatment to those with SUD/ODU.

Faith, Hope and Charity, Inc. (FHC) has maintained good communication with the Lincoln County jail in order to assist clients upon discharged. In one instance, FHC was called on by the jail to support a discharged individual with communications support. They were able to connect them with a cellular device, as well as other items, to get them integrated back into the community and back on their feet.

7. Status Relative to Timeline. For each core requirement below, please indicate your implementation status relative to the timeline proposed in your work plan.

	Delayed	On Track	Ahead of Schedule
P1. Community-based Prevention.		X	
P2. Naloxone Access.		X	
P3. Prescription Drug Storage and Disposal.		X	
P4. SUD Screening and Referral.		X	
P5. Law Enforcement and First Responder Collaboration.		X	

4. Implementation IV Treatment and Recovery-Related Work Plan Activities

8. TR1. Recruit, Train, and Mentor Support Staff. Recruit, train, mentor, and retain interdisciplinary teams of clinical and social service providers, to support an integrated approach to SUD/ODU treatment, including evidence-based behavioral therapy (e.g., cognitive behavioral therapy, community reinforcement approach, etc.), U.S Food and Drug Administration-approved pharmacotherapy (e.g., buprenorphine, naltrexone), and any other necessary supportive services.

In order to expand our SUD/ODU workforce and improve outcomes for the pregnant women population with SUD, CTSI will train six of their staff members to become doulas. This training has been in the planning processes since early 2025 and is scheduled to take place in following reporting period (April 2025).

PAADA has facilitated the training of two Peer Support Specialists (PSS) through the Youth Era curriculum, which will allow them to work with youth in the school district.

Northwest Coastal Housing's (NWCH) housing navigator and PSS at their Coastal Phoenix Rising facility in Lincoln City have begun to take a larger role in their job responsibilities, including conducting the initial assessments for new clients. The Executive director, housing navigator and PSS meet on a weekly basis to discuss each new and existing client's needs. They have conversations about how to get clients access to treatment, how to better work with their health providers, how to address their other health needs, etc.

9. TR2. Develop Referral Systems. Create community linkages and referral systems for a seamless entry into MAT/SUD treatment from primary care, emergency departments, law enforcement/first responders, community-based organizations, social service organizations, etc.

PAADA has recently signed a memorandum of understanding with the organization, Conflict Artistry, to serve youth individuals who aren't ready for deflection, but still have conflicts they have been a part of that need to be resolved. Conflict Artistry is a local nonprofit versed in restorative justice practices for youth. They have a great working relationship with law enforcement, the Lincoln County School District, and Juvenile Justice Department.

NWCH reports that their referral systems are in place and are working; however, when there is a change in staff at a partnering organization, miscommunications occasionally occur, and processes or procedures may not be effectively shared with new employees, making follow-up challenging.

10. TR3. Improve Access to Recovery Supports. Ensure linkages to and coordination with home and community-based social services (such as case management, housing, employment, food assistance, transportation, etc.) to support individuals in recovery, including those discharged from inpatient treatment facilities and/or other community transitions.

The NWCH PSS is embedded into their transitional housing programs. He is able to meet with clients and address their specific needs. For example, if someone is a veteran, he is able to assist them in getting access to support services that are only available to veterans. He has also supported clients in getting access to Meals on Wheels, which serves individuals in Lincoln County who are food insecure. If there is a need for home furnishings, he is able to support them in finding access to furniture through local distribution centers and organizations.

FHC, who serve the houseless population with SUD, are working to establish a physical site in Lincoln County, which will enable them to have a space of their own to serve clients. Currently, they partner with the local library and HIWAY grant partner, ReConnections Counseling, to utilize space to meet with clients. FHC will be working with the HIWAY project director to order emergency supplies for the houseless populations with SUD.

11. TR4. Expand Peer Workforce. Expand the peer workforce to provide support in various settings, including hospitals, emergency departments, law enforcement departments, SUD/ODU treatment programs, and in the community.

CTSI is hiring a new PSS that will work in serving clients mental health and SUD needs. They will work in both the Medication Assisted Treatment program and Behavioral Health program with the tribe. This position is not funded through the HIWAY grant but will be able to partner with the three PSS who are funded through the HIWAY grant program.

12. TR5. Develop Recovery Support Services. Support the development of recovery support services such as recovery community organizations, recovery homes, mutual aid groups, and other recovery resources and infrastructure to expand the availability of and access to recovery support services.

ReConnections Counseling, Northwest Coastal Housing and Samaritan House are actively involved in the Nurture Oregon program in Lincoln County. This program serves pregnant and postpartum women with SUD and within the last six months, a new recovery moms' group has formed in Lincoln City. There is a group that meets in Newport. The addition of the group in Lincoln City allows for more women in recovery to participate.

13. Status Relative to Timeline. For each core requirement below, please indicate your implementation status relative to the timeline proposed in your work plan.

	Delayed	On Track	Ahead of Schedule
TR1. Recruit, Train, and Mentor Support Staff.		X	
TR2. Develop Referral Systems.		X	
TR3. Improve Access to Recovery Supports.		X	
TR4. Expand Peer Workforce.		X	
TR5. Develop Recovery Support Services.		X	

5. Successes, Challenges, and TA Needs

14. Capacity

	Success	Challenge	Need TA	N/A
Availability of MAT	X			
Availability of Mental Health Treatment		X		
Availability of Substance Use Disorder (SUD) Treatment		X		
Other Service Capacity (not including MAT, mental health, or SUD treatment capacity) – please specify	X			

15. Please specify which other service capacity (not including MAT, mental health, or SUD treatment capacity) you are referring to in the Capacity question above.

Pregnant women who use substances (Nurture Oregon population)

16. Services

	Success	Challenge	Need TA	N/A
Care Coordination	X			
Discharge Planning				X
Risk Reduction (other than naloxone distribution)	X			
Naloxone Distribution	X			
Prevention Services (other than risk reduction or naloxone distribution)	X			
Recovery Services	X	X		

17. Operations

	Success	Challenge	Need TA	N/A
Consortium Growth and/or Engagement (including competing priorities)		X		
Billing/Coding for service reimbursement		X		
Program Financing				X
Workforce (e.g., hiring, recruitment, retention)	X			
Telehealth/Telemedicine				X
Accessing data from consortium members for HRSA reporting	X			
Accessing data for consortium planning, monitoring consortium activities, etc.	X			

18. Other

	Success	Challenge	Need TA	N/A
Stigma/Stigma Reduction	X			
Engagement with populations residing in service area (please specify population(s) below)	X			
Other (please specify)		X		

19. Please specify the populations residing in service area engagement that you refer to in the Other question.

Young adults and youth population (ages 16-25)

20. Please specify the "Other" response in the Other question.

Access to transportation

21. Please describe your project's successes (related to capacity, services, operations, and/or other areas of implementation).

Availability of MAT – HIWAY grant partners are continuing to have good working relationships with the medication assisted treatment (MAT) providers in Lincoln County. There have been no issues from partnering organizations whose clients are utilizing MAT at this time.

Other Service Capacity (not including MAT, mental health, or SUD treatment capacity) – please specify (Nurture Oregon) – Nurture Oregon in Lincoln County is continuing to serve pregnant and postpartum individuals with SUD. Recently, the first set of twins were born through this program and are doing well with their mother. HIWAY partners involved with Nurture Oregon are actively involved with other counties across the state of Oregon who are looking to expand Nurture Oregon type services. Nurture Oregon has been a leader in bringing doula, peer support, treatment, and other supportive services to pregnant and postpartum individuals with SUD. Partners are actively watching legislation in Oregon (Mominibus SB960-966) to determine if legislation will pass that could create funding for the continued support of services for this population. The funding would provide safe and stable housing through rental assistance, provide maternal behavioral health care support through SUD treatment, and expand the perinatal workforce to include postpartum doulas and Certified Lactation Consultants.

Care Coordination – One success was promptly addressing a concern raised by a pregnant patient with SUD. The issue was shared with the Maternal Care Coordinator, who communicated it to the provider, who in turn passed it on to the labor and delivery team. Within a week, all three were able to meet and discuss the matter, allowing the Maternal Care Coordinator to report back to the Nurture Oregon team with a solution. The quick response from all involved demonstrated a commitment to address the patient's concerns, exemplifying a success in care coordination and reflecting the impact stigma reduction can have on the quality of care for pregnant individuals with SUD.

Risk Reduction – Mobile risk reduction strategies have been advertised heavily by PAADA. During their large group gatherings, such as the bimonthly community education events in Waldport and Toledo, they discuss risk reduction services available to individuals in their community. Additionally, they ensure community members know where disposal sites are located.

Naloxone distribution – The Confederated Tribes of Siletz Indians has been a leader in Narcan administration across the county. They currently have Narcan available to community members in their area offices, clinic, housing department, and administration building. They also have locations in Siletz where barneys are located for individuals to have easy access to free Narcan. Recently, they were able to take 10 Narcan kits to the Chinook Winds Casino in Lincoln City to have them available for use there. Within the last three years they have passed out 43,000 Narcan kits.

Prevention Services (other than risk reduction or naloxone distribution) – PAADA continues to offer their high school youth leadership activities where high school youth spend a day learning about SUD prevention. This past February, middle school students were invited for the first time to participate in their own version of a youth leadership academy. The day included a guest speaker from Vive 18, who spoke about SUD prevention in a fun and engaging way. High school members from the Healthy Communities Youth Advisory (Heck-Yeah!) came and served on a panel where the middle school students could ask questions of the high school students. The panel was very engaging, and myths were busted surrounding drugs, alcohol, and partying in high school. Overall, this was a great first convening of middle school students in Lincoln County where substance use prevention was the main focus.

Recovery Services –ReConnections Counseling continues to provide recovery support groups in both English and Spanish in Newport and Lincoln City. The groups are well attended.

Workforce – PSS involved with the HIWAY grant will be invited to a new peer-to-peer support group that will begin in April 2025. The formation and planning for this group event were a huge success for the Confederated Tribes of the Siletz Indians. They have been working on advertising the first event and have hopes that the PSS will come together to plan future meetings, preferably once per month. This group will allow for a more engaged and supported workforce. 'Care for the Caregiver' is a common practice for other healthcare professions. PSS, who have lived experience and are also serving individuals with SUD, need support and a space to debrief and come together.

Accessing data from consortium members for HRSA reporting - HIWAY grant partners are consistent in their reporting for their monthly work plan updates, biannual progress reports, and Performance Improvement Measurement System (PIMS) reports. When partners have questions, they follow up with the Project Director and Grants Management team members in a timely manner.

Accessing data for consortium planning, monitoring consortium activities, etc. – The Coast to Cascades Community Wellness Network (CCCN) staff are actively involved in conversations with network members to learn about ways to better serve them. A survey is being developed to find a new meeting time that will work best for partners to continue their efforts in sharing grant information, planning for future funding, networking, and overseeing the current federal and state grant projects/activities.

Stigma/Stigma Reduction – One partnering organization shared that they have noticed a significant decrease in stigma towards the unhoused populations among community members. These community members may have had personal biases on how shelters and transitional living facilities operate. Many community members feared that bringing transitional living facilities to Lincoln County would bring a lot of disturbance to the neighborhoods in which they were placed. The opposite has been the reality. Because of good working partnerships between the transitional living facilities and community supports, the spaces themselves remain very quiet, peaceful, and have a great outward appearance. Projects that are well implemented, such as Coastal Phoenix Rising and Nate's Place transitional living facilities, allow community members to face their biases they may have related to transitional housing and individuals with SUD.

Engagement with populations residing in service area (please specify population(s) below) – The Helping Impact Women and Youth (HIWAY) grant team was invited to attend a health fair focusing on interacting with young adults ages 16-24 at Angell Job Corps in Yachats, OR (the very south-most part of Lincoln County). Angell Job Corps is one of 24 centers across the U.S. known as Civilian Conservation Centers. These centers are operated by the U.S. Forest Service. Students live on campus and train in career fields that support the land they live on. Many of the young adults at Angell Job Corps have a SUD or substance dependence. The health fair is a quarterly event that poses a great opportunity to provide education on substance use prevention. One HIWAY grant partner, Lincoln County Health and Human Services (LCHHS), provided education on tobacco prevention and vaping. Another provider shared important information related to sexually transmitted diseases and sexual health. Finally, our HIWAY Project Director was able to interact with students and play a trivia game that educated on topics related to SUD services in Lincoln County, peer support services, drugs of concern, substance use and pregnancy, and much more. This first event was a success, the HIWAY grant team is excited to participate in future health fair and educational events.

22. Please describe your project’s challenges and/or technical assistance needs (related to capacity, services, operations, and/or other areas of implementation).

Availability of Mental Health Treatment – One challenge involves the lack of mental health services for youth and adolescents. Currently, crises intervention has been successful, but youth should not have to elevate to the level of being in crises to receive services. There is a need for more support related to youth mental health and treatment. There are mental health counseling services available in Lincoln County; however, waitlists are long.

Additionally, there is a lack of counselors available to offer in-person services. This poses a challenge, especially for the SUD and houseless populations who may not have access to a mobile device or reliable internet services to access services.

Availability of SUD Treatment – There is an ever-widening gap that exists between detox services and residential SUD treatment. Clients have been successfully receiving detox services in Lincoln County, but they have limited places to be referred to afterwards to continue their sobriety. Residential treatment options are limited across the state and while a residential treatment center will be opening in Lincoln County in Summer 2025, there are currently none. Additionally, there are no SUD treatment services for youth.

Recovery Services – Although recovery services do exist, the support group meetings such as Narcotics Anonymous, Alcoholics Anonymous and Celebrate Recovery are not as developed in the north part of the county as they are in the south. NWCH has discussed potentially bringing these types of meetings/groups to their Coastal Phoenix Rising location in north Lincoln County to offer a site for these programs.

Consortium Growth and/or Engagement – The CCCWN has maintained its membership, however, some challenges have come up around engagement. The CCCWN Steering Committee will begin to look at ways to further engage partners to support our key areas of focus.

Billing/Coding for Service Reimbursement – One challenge shared was the inability to bill for services provided by a PSS to an individual before they officially become a client. There is a need to redefine a billable service for Peer Support Specialists. Values-based payments should be provided for this type of work that often occurs as trust is being built between a PSS and a prospective client.

Other (please specify) (Transportation) – Transportation, like in many rural communities, is a large barrier to accessing services. It is difficult for clients in the north part of the county to attend meetings and group events in the south part of the county due to a lack of reliable transportation.

6. SUD/Substance Concerns

23. Among the substances listed, please rank in order the top three substances that currently pose the greatest concern to the health and well-being of the individuals in your HRSA-designated rural service area. Rank from 1 to 3 with 1 being the substance of most concern. If you have a concern not included in this list, please use the comment box to specify.

1. Fentanyl and Fentanyl Analogs (i.e., synthetic opioids)
2. Alcohol
3. Methamphetamine

Comments:

24. Among the substances listed, please rank in order the top three substances that your HRSA-designated rural service area has the least capacity to treat. The ranking is only for those areas that are a problem in your community (e.g., if you do not have the capacity to address cocaine but that is not a problem in your service area, do not rank it). Rank from 1 to 3 with 1 being the substance you have the least capacity to address. If you have a concern not included in this list, please use the comment box to specify.

1. Alcohol
2. Marijuana
3. Methamphetamine

Comments:

7. SUD-Related Health Concerns

25. Among the problem areas listed, please rank in order the top three problem areas that currently pose the greatest concern to the health and well-being of the individuals in your HRSA-designated rural service area. Rank from 1 to 3 with 1 being the health issue of most concern. If you have a concern not included in this list, please use the comment box to specify.

1. Fatal and Non-Fatal Overdoses (all drugs)
2. Opioid Poisonings Among Children Aged 1-4 Years
3. Neonatal Abstinence Syndrome

Comments: Why isn't 'Opioid poisonings among older youth' listed?

26. Among the problem areas listed, please rank in order the top three problem areas that your HRSA-designated rural service area has the least capacity to treat. The ranking is only for those areas that are a problem in your community (e.g., if you do not have the capacity to address opioid poisoning among children but that is not a problem in your service area, do not rank it). Rank from 1 to 3 with 1 being the health issue you have the least capacity to address. If you have a concern not included in this list, please use the comment box to specify.

1. Drug-related HIV Infection
2. Opioid Poisonings Among Children Aged 1-4 Years
3. Fatal and Non-Fatal Overdoses (all drugs)

Comments:

8. Behavioral Health Concerns

27. Among the behavioral health services listed, please rank in order the top three services that your HRSA-designated rural service area has the least capacity to provide. Rank from 1 to 3 with 1 being the service you have the least capacity to provide. If you have a concern not included in this list, please use the comment box to specify.

1. Crisis intervention for children and adolescents
2. Treatment for substance use disorders in children and adolescents
3. Treatment for mental health disorders in children and adolescents

Comments:

9. Naloxone Availability

28. Is over-the-counter (OTC) naloxone currently available in your service area?

Yes

29. Has access to naloxone increased, decreased, or stayed the same since OTC naloxone became available?

Stayed the same

30. Within which of the following is naloxone currently available? *Select all that apply.*

Community based organizations
Risk reduction venues
Health departments
Mobile units
Pharmacies
Treatment and/or recovery organizations
Other (please specify):: o Barneys (newspaper stand style, free standing naloxone distribution boxes) , Casino

31. Please list any concerns or anticipated challenges you or members of your consortium have regarding the changes in naloxone availability (e.g., cost, stigma, etc.)

None at this time.

10. Funding and Sustainability

32. Are you familiar with the "incident-to" billing mechanism?

No

33. Are you familiar with efforts related National Opioid Settlement funds in your service area?

Yes

34. Are you directly engaged in any of the effort related to the National Opioid Settlement funds in your service area?

Yes

35. Which, if any, of the below grants are you familiar with? Has your consortium (or a consortium member) applied for funding for any of the below grants? Please select the most applicable answer for each.

	Not aware and want more information	Aware	Aware and applied	Aware, applied, and received funding	Aware, applied, but did not receive funding
State Opioid Response Grants		X			
Substance Abuse Prevention and Treatment Block Grants (SABGs) to your state's/jurisdiction's Single State Agency (SSA) for Substance Abuse Services				X	
Community Mental Health Services Block Grants (MHBGs) to your state's/jurisdiction's Single State Agency (SSA) for Mental Health Services	X				

36. Please share why you have not applied or tried to access funding though one or more of these opportunities.

HIWAY partners were not familiar with these funding streams by the names listed in the table. More information is needed about these funding streams to answer this question.

37. For the funding opportunities you have applied to and received funds, please give a brief description of what the funds will be used for.

PAADA received the Substance Abuse Prevention and Treatment grant and has been using it for substance use outreach and education.

38. What other types of funding opportunities are needed to address SUD/OD in your target rural population?

HIWAY partners have shared that they would like access to the following types of funding opportunities:

- Funding streams that cover values-based care (i.e., services that occur before an individual is officially established as a client or patient, usually to build trust and rapport)
- Funding streams to cover auxiliary support services that are not currently billable.
- Funding streams that assist with transitional housing and shelter needs for the SUD/OD populations.

39. What other types of funding opportunities are needed to address mental health in your target rural population?

HIWAY partners have shared that they would like access to the following types of funding opportunities:

- Funding streams that enhance and improve mental health treatment for children and adolescents.
- Hiring bonuses and retention incentives for workforce that work in youth/adolescent mental health.

11. Loan Repayment Programs

40. Are any consortium members/partner organizations already utilizing or planning to leverage the 2024 National Health Service Corps' Rural Community Loan Repayment Program, the Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program, or other Loan Repayment Program(s)?

Already utilizing

41. Which loan repayment program(s) are you and/or your consortium members/partner organizations utilizing/planning to leverage? Please select all that apply:

- State Loan Repayment Program
- Other 1 (please specify):: Oregon Partnership State Loan Repayment Program
- Other 2 (please specify):: Oregon Healthcare Provider Loan Repayment
- Other 3 (please specify):: Scholars for a Healthy Oregon Initiative

42. For the loan repayment program(s) you are already utilizing, which members/partner organizations applied?

Samaritan North Lincoln Hospital, Samaritan Pacific Communities Hospital

12. RCORP Feedback

43. What would you like to see in future RCORP funding opportunities?

The HIWAY partners continue to express a need for funding opportunities that allow for services supporting youth health and wellbeing. This grant has allowed us to support youth in prevention, but more funding is necessary to sustain services. One partner shared that due to the recent emphasis on the dangers of fentanyl, youth are starting to turn back towards alcohol. Teens are drinking in parking lots, outside of schools, and there is little to no focus on alcohol prevention for this age group. Teens are viewing alcohol as the "safer" drug, and it is easy to gain access to. It would be beneficial for future funding streams and national/state campaigns to also focus on alcohol prevention for youth and adolescents.

44. Were you able to successfully integrate marriage/family therapists into the workforce, given that they are eligible for Medicare reimbursement?

No

45. Were you able to successfully integrate mental health counselors into the workforce, given that they are eligible for Medicare reimbursement?

No

HRSA gathers anecdotal data to show how its programs help people. By providing a success story below, you are granting permission for the information to be used for official U.S. Government purposes in a variety of formats (print, social media, web pages, etc.), without restrictions or payment. Names of individuals will be removed before use, unless otherwise agreed upon/approved.

46.

Please provide 1-2 grantee success stories that showcase an achievement/accomplishment during the FY22 RCORP Implementation project. The success story must be tangible and include quantitative data. Examples of a success story include individuals who have successfully gained employment, communities that have the school system support to address SUD amongst youth, etc.

"This is a snapshot of a life of turmoil and recovery through the journey of a BIPOC young man who was born in rural Oregon, that became addicted to meth and heroin. This led to a life that descended into crime and eventual imprisonment. He hit bottom and found his truth while he was incarcerated. Upon his release he enrolled in a Newport Oxford House. He had many challenges on his road to recovery but Faith, Hope & Charity Inc. was there to support him. Still unable to find employment, he faced eviction from the sober living house for his inability to pay rent. FHC paid for one month of rent for him while providing psych-social support and peer encouragement. He was self-motivated to maintain his sobriety and a better life. Faith, Hope & Charity Inc. purchased a phone, job-interview clothes and a bicycle to assist him in his employment search.

Today, he is still living in the Oxford House, presiding over Narcotics Anonymous meetings and gainfully employed at a locally-owned Newport business." – Faith, Hope & Charity, Inc.

47. What were you able to accomplish with your RCORP grant that you would not have been able to accomplish through another funding stream (such as another government grant, foundation funding, etc.)? Please provide specific and detailed examples of activities completed using the RCORP grant funding that you could not have accomplished with another funding stream.

"With the funding from the HIWAY Grant, PAADA was able to be more agile in responding to the needs of youth in Lincoln County. Our Youth Leadership Academies had been in a cookie-cutter formula for many years and was not responsive to youth needs. At the end of the Spring Youth Leadership Academy (April 2024), we had data from the students that they wanted and needed something different from us. We were able to shift to a youth advisory model in the Fall of 2024. We used that gathering to give foundational training on finding safe community spaces, developing restorative communication, starting conversations about peer support and we informed students on the neurological impacts of substance use from a research-based perspective. The event ended with a quick recruitment pitch and we now have ten students actively engaged in a Healthy Communities Youth Advisory. The Healthy Communities Youth Advisory is funded by a grant from the Oregon Health Authority, Linn Benton Lincoln Health Equity Alliance, and United Way of Benton County. The HCYA (or Heck Yeah!) planned our first-ever Middle School Leaders Summit and are going to use the Spring 2025 Youth Leadership Academy to gather information from peers to determine a year-long schedule of sober events throughout Lincoln County. Without the HIWAY Grant, we wouldn't have had the opportunity to make this leap into peer-led prevention services for the youth of Lincoln County." – PAADA

Cohort	Grant Number	Organization Name	Organization Type	Organization City	State/Territory	Address in U.S.	First Name of Organization's PRIMARY Point of Contact	Last Name of Organization's PRIMARY Point of Contact	Email of Organization's PRIMARY Point of Contact	Lead organization? (Y/N)	Subcontractor on RCORP grant? (Y/N)	Has signed an MOU and/or is responsible for activities on the Workplan? (Y/N)	Submits data for PMS reporting? (Y/N)	Notes - Please describe a brief description of any changes.	First Name of Organization's SECOND Point of Contact (if applicable)	Last Name of Organization's SECOND Point of Contact	Email of Organization's SECOND Point of Contact
(select from dropdown)	(select from dropdown)	(auto-populated by Grant# from Column B) (auto-populated after row 2)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)
(select from dropdown)	(select from dropdown)	(auto-populated by Grant# from Column B) (auto-populated after row 2)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)
(select from dropdown)	(select from dropdown)	(auto-populated by Grant# from Column B) (auto-populated after row 2)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)	(select from dropdown)
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Confederated Tribes of the Siletz Indians	Siletz	OR	Yes	Ruby	Moon	ruby@tbi.us	No	Yes	Yes	Yes	Member of Helping Impact Women and Youth (HIWAY) Project (RCORP implementation IV); Member of Coast to Cascades Community Wireless Network (CCCWN) Updated: Added 2nd POC Lacey Horton	Lacey	Horton	lacey@tbi.us
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Faith, Hope and Charity	Newport, Lincoln City	OR	No	Frederick	Edwards	fredrick1@live.com	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV) Updated: Added 2nd POC Member of HIWAY (Impl. IV)	Sheila	Thompson	sheila@faithhopeandcharityinc.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Lincoln County Health & Human Services	Newport	OR	No	Jayne	Romero	jromero@co.lincoln.or.us	No	No	Yes	Yes	Member of CCCWN	Jennifer	Beckner	jbeckner@co.lincoln.or.us
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Lincoln County Sheriff's Office	Newport	OR	Yes	Adam	Shanks	Ashanks@co.lincoln.or.us	No	No	Yes	Yes	Member of HIWAY (Impl. IV) Member of CCCWN Updated: POC changed from Curtis Landers to Adam Shanks; removed 2nd POC			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Northwest Coastal Housing	Newport, Lincoln City	OR	Yes	Sheila	Stiley	nwcoasthousing@gmail.com	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV); Transitional housing Updated: Added 2nd POC	Jessica	Duranceau-Meyer	jessica@nwcoasthousing.com
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Odalis Center	Toledo	OR	Yes	Lori	Vallelunga	loriv@odaliscenter.org	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV); POC changed from Dee Teem to Lori Vallelunga Updated: Added 2nd POC	Robb	Davis	robbd@odaliscenter.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Partnership Against Alcohol & Drug Abuse	Newport	OR	Yes	Melania	Kiduff	paadadf@gmail.com	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV); POC changed from Mindy Baxter to Melinda Kiduff Updated: Added 2nd POC	Sara	Birman	sara.birman@paadadregon.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	ReConnections Counseling	Newport, Lincoln City, Florence, Toledo,	OR	Yes	Labori	Lager	labori.lager@reconnectionsouthern.org	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV) Updated: Added city of Corvallis to "Organization City"			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan House	Newport	OR	Yes	Lola	Jones	lola@kathleenjones@gmail.com	No	Yes	Yes	Yes	Member of HIWAY (Impl. IV); Housing program with wraparound services			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan Medical Group	Corvallis	OR	No	Jennifer	Will	JenniferW@samhealth.org	No	No	Yes	Yes	Member of HIWAY (Impl. IV); Network of providers and leaders who work within Samaritan's hospitals and clinics. Updated: Not a subcontractor on RCORP grant Member of HIWAY (Impl. IV)			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan North Lincoln Hospital	Lincoln City	OR	Yes	Lesley	Ogden	logden@samhealth.org	Yes	No	Yes	Yes	Member of CCCWN Updated: Changed 2nd POC from Virginia Riffe to Jennifer Will Member of HIWAY (Impl. IV)	Jennifer	Will	jenniferw@samhealth.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan Pacific Communities Hospital	Newport	OR	Yes	Lesley	Ogden	logden@samhealth.org	No	No	Yes	Yes	Member of CCCWN	Jane	Rusell	jane@samhealth.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Benton County Health Department	Corvallis	OR	No	Sara	Hartstein	sarahartstein@co.benton.or.us	No	No	Yes	No	Member of CCCWN, POC changed from Suzanne Hoffman to Sara Harstein			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Capitol Dental Care	Salem	OR	No	Linda	Mann	lmann@intudent.com	No	No	Yes	No	Member of CCCWN			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	C.H.A.N.C.E.	Newport	OR	Yes	Erma	Dzane	edzane@chanceorecovery.com	No	No	Yes	No	Member of CCCWN, POC changed from Michelle Shannon to Emma Deane			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Community Member	Depoe Bay	OR	Yes	Wendy	Hauszetter	wendyhauszetter@gmail.com	No	No	Yes	No	Member of CCCWN			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Community Outreach Inc.	Corvallis	OR	No	Greg	Moore	gmoore@communitysevice.us	No	No	Yes	No	Member of CCCWN; POC changed from Ben Danley to Greg Moore			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Community Services Consortium	Newport	OR	Yes	Kayla	Armstrong	karmstrong@communitysevice.us	No	No	Yes	No	Member of CCCWN; POC changed from Pagge McGuire to Kayla Armstrong			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	COMP NW Medical School	Lebanon, Corvallis, Monroe, Alose, Lebanon, Sweet Home	OR	Yes	Jeanne	Davis	jdavis@westernu.edu	No	No	Yes	No	Member of CCCWN, Medical school			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Community Health Centers of Benton and Linn Counties	Corvallis	OR	Yes	Lacey	Mollet	Lacey.mollet@bentoncountyor.gov	No	No	Yes	No	Member of CCCWN; POC changed from Carla Jones to Lacey Mollet			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Good Samaritan Regional Medical Center	Corvallis	OR	No	Sy	Johnson	josy@samhealth.org	No	No	Yes	No	Member of CCCWN; POC changed from Laura Hennum to Sy Johnson			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	InterCommunity Health Network	Corvallis	OR	No	Bruce	Butler	bbutler@samhealth.org	No	No	Yes	No	Member of CCCWN; Health network; Removed second POC			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Lebanon Community School District	Lebanon	OR	Yes	Jennifer	Meckley	jennifer.meckley@lebanon.k12.or.us	No	No	Yes	No	Member of CCCWN, POC changed from Bo Yates to Jennifer Meckley			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Linn County Department of Health Services	Albany	OR	No	Todd	Noble	tnoble@co.linn.or.us	No	Yes	Yes	No	Member of CCCWN	Justin	Thomas	jthomas@co.linn.or.us
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Oregon Cascades West Council of Governments	Albany, Corvallis, Toledo	OR	Yes	Ryan	Vlapi	rvg@ocwco.org	No	No	Yes	No	Member of CCCWN, Council of governments			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Oregon Office of Rural Health	Portland	OR	No	Sarah	Andersen	ansarah@ohsu.edu	No	No	Yes	No	Member of CCCWN			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan Albany General Hospital	Albany	OR	No	Dan	Keteri	dketeri@samhealth.org	No	No	Yes	No	Member of CCCWN			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan Health Services	Corvallis	OR	No	Marty	Chall	mchall@samhealth.org	No	No	Yes	Yes	Member of CCCWN; Hospital system; POC changed from Kelley Kaiser to Marty Chall; Additional POC's added: Anne Daly, Kelley Kaiser, Taylor Gilmore	Anne	Daly	adaly@samhealth.org
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Samaritan Lebanon Community Hospital	Lebanon	OR	Yes	Daniel	Ruckham	druckham@samhealth.org	No	No	Yes	No	Member of CCCWN; POC changed from Wendie Wunderwald to Daniel Ruckham			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Linn, Benton, Lincoln Health Equity Alliance	Corvallis	OR	No	Mica	Contreras	mica.contreras@bthea.org	No	No	Yes	No	Member of CCCWN			
Imp IV	GA18H45981	SAMARITAN NORTH LINCOLN HOSPITAL	Neighbors for Kids	Depoe Bay	OR	Yes	Toby	Winn	director@neighbornforkids.org	No	No	Yes	No	Member of CCCWN			

New, Updated, or Vacant? (Y/N)	Name (If vacant, write VACANT)	Title	Organizational Affiliation	FTE (0-1) (If vacant, list planned FTE)	NOTES If new or updated, provide a brief description (2-3 sentences) of the changes. If vacant, provide a brief description (2-3 sentences) of the timeline and process for hiring for this position.
No	Jolynn Meza Wynkoop	Project Director/Data Coordinator	Samaritan North Lincoln Hospital	1	Jolynn Meza Wynkoop began on 9-12-2022. Jolynn continues providing services. As of 9-1-2023, this position will now be affiliated with Northwest Coastal Housing instead of North Lincoln Hospital. The position is also being changed from a 0.5 FTE position to a 1.0 FTE position.
No	Veronica Martinez Heather Gendreau Jessica R. Lee Jason L. Wright Dana Morris Davontay Mosley Doyle Franklin Frederick Edwards Jenna Bean Chris Gray	Peer Support Specialist	Northwest Coastal Housing	1	Veronica Martinez served in the PSS role from October 16, 2023 - October 31, 2023. Heather Gendreau served in the PSS role from January 15, 2024 - February 29, 2024. Jessica Lee served in the role between March 1, 2024 - March 15, 2024. Jason Wright began in this role on April 16, 2024 and is the current PSS serving in this role. Between 9-1-2022 and 2-28-2023, the PSS working on the HIWAY grant included: Dana Morris, Davontay Mosley, Doyle Franklin and Frederick Edwards. They split the 0.5 FTE position. Between 3-1-2023 and 4-31-2023, the PSS working on the HIWAY grant included: Jenna Bean, Doyle Franklin, and Chris Gray. They split the 0.5 FTE position. Since 5-1-2023, Chris Gray has been the sole PSS working on the HIWAY grant.
No	Robb Davis	Resource Navigator	Olalla Center	0.5	Robb Davis began on 1-25-2023. Robb continues to provide services.
No	Sara Birman Melaia Kilduff Melinda Baxter	Coordinator	Partnership Against Alcohol & Drug Abuse	0.25	Melinda Baxter began on 9-1-2022. Melinda Baxter will be splitting the 0.5 FTE Coordinator role. Melaia Kildruff took over the coordinator role in October 2023. Sara Birman took over the coordinator role on 8-16-2024.
No	Sara Birman Melaia Kilduff Don McDonald	Coordinator	Partnership Against Alcohol & Drug Abuse	0.25	Don McDonald began on 9-1-2022. Don McDonald will be splitting the 0.5 FTE Coordinator role. Melaia Kildruff took over the coordinator role in October 2023. Sara Birman took over the coordinator role on 8-16-2024.
No	Kiah Brucha Kortney Kurmins-Hahn Gracee Esquivel	Teacher	Samaritan House, Inc.	0.5	Between 9-1-2022 and 9-30-2022, Gracee Esquivel worked as the teacher under the HIWAY grant. Between 10-1-2022 and 11-30-2023, Kourtney Kurmins-Hahn worked in the role. Since 12-1-2023, Kiah Brucha has worked in this role.
Yes	Araceli Cuevas Gypsy Hinman	Peer Support Specialist	ReConnections Counseling	0.5	Araceli Cuevas began on 9-1-2022. Gypsy Hinman took over the peer support specialist role on 12-16-2024 and has been providing services since.
Yes	Shelagh Baird	CCCWN Director	Samaritan Health Services	0.15	This person provides in-kind support. Changed from interim director to director.
No	Mary Landis	Director of Grants & Sponsored Programs	Samaritan Health Services	0.02	This person provides in-kind support.
No	Maisa Athamneh	Senior Grants Specialist	Samaritan Health Services	0.02	This person provides in-kind support.

Addressing Violence in Rural Oregon

Communities (AVIROC)

CCCWN Meeting Update –
April 2025



COAST TO CASCADES COMMUNITY WELLNESS NETWORK

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).

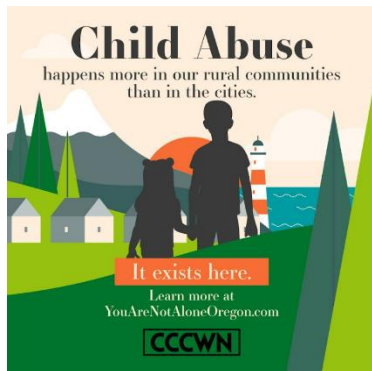
Updates:

- *Partners for Health* Committee planning details for 2nd annual Violence Prevention Summit (5/23/25).
- *Center Against Rape and Domestic Violence (CARDV)* social media campaign continues and will be focusing on providing resources at tabling events in rural Linn Co
- *Acosta Services*- completed final details for the Action Plan for participants to review on 5/8-5/9/25.
- Bilingual Media Campaign local advertising is winding down; partner toolkit draft is available to review; completed survey for evaluation to determine Marketing Plan: [HERE](#)
- Searching for a licensed therapist to provide services for children and their non-offending caregiver
- NCC for year 2 has been submitted and approved; next reports due are the PIMS and Data Dashboard

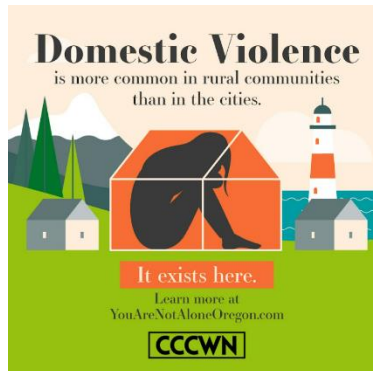
Work Plan Highlights:

Quarter 8 (April 1- May 31, 2025)

- 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 (on hold) Community partner ABC House pauses counseling services with AVIROC; working to fill this gap
- 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) review federal guidelines: https://acf.gov/sites/default/files/documents/otip/adult_human_trafficking_screening_tool_and_guide.pdf
- 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)
- Annual summit planned and implemented (scheduled for 5/23/25 in Lincoln City)
- AS, PD, and consultant work with CCCWN/PFH and community to develop Action Plan (Q5-Q8)- Event in Spanish- 5/8; event in Mam- 5/9
- Provide resources and outreach information to connect community members to agencies/services in rural east Linn County (Q5-Q8)- Focus on resource tables at community events, 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)- The Partners for Health coalition is starting to explore what this will look like for our rural region



CCCWN Meeting



May 7, 2025



AVIROC



CCCWN STRATEGIC PLANNING

Draft outline for discussion

I. CCCWN Priority Areas/Community Focus Areas

CCCWN membership has recognized 11 priority areas for community health improvement. These focus areas align significantly with the seven key themes identified in the most recent regional community health assessment. The chart below shows areas of overlap.

CCCWN PRIORITY AREAS	REGIONAL HEALTH NEEDS ASSESSMENT: KEY THEMES
1. Pregnancy prevention and prenatal care.	• Healthy youth and families.
2. Housing.	• Access to affordable housing and houselessness.
3. Chronic conditions.	• Healthy youth and families.
4. Oral health.	• Healthy youth and families.
5. Access to care and workforce.	• Access to quality care.
6. Behavioral health and mental health.	• Mental health.
7. Violence prevention.	• Healthy youth and families.
8. Diversity, equity and inclusion (DEI)	• Diversity, antiracism and equity (IDARE)
9. Food access.	• Food insecurity/access.
10. Tobacco prevention.	• Substance use and misuse.
11. Substance use disorder.	• Substance use and misuse.

CCCWN members have expressed strong support for strengthening and maintaining the alignment of Network priorities with the goals and strategies of regional partners on a three-year cycle. In terms of specific Network priorities over the next three years, CCCWN’s initial strategic planning meeting emphasized four primary focus areas: *Workforce Development*, *Diversity, Equity and Inclusion*; *Mental and Behavioral Health*; and *Substance Use Disorder*. Factors in identifying these priority areas include county, state and regional health assessment data; internal data from Network members and partners; estimates of organizational and systemic capacity; identified disparities and inequities in access to care, quality of care, and health outcomes; public/organizational momentum for change; identified opportunities to address upstream issues; and the Network’s own capacity to serve as an effective partner or leader in driving local, regional and systemic change.

Similarly, CHIP planning have worked with the community to narrow their focus to four areas: *Housing*; *Access to Quality Care*; *Behavioral Health*; and *Inclusion, Diversity, Anti-Racism and Equity (IDARE)*. There is a strong potential to better align CHIP priorities and CCCWN priorities, which often overlap internally and externally.

Workforce

All Network goals rely on developing and retaining a trained and resilient workforce, particularly in the badly understaffed mental and behavioral health fields. Improving access to services without adding adequate workforce will, at best, result in longer waitlists, suboptimal care and worse patient outcomes. DEI/IDARE goals also depend heavily on a diverse and

trauma-informed workforce, especially when it comes to mental and behavioral health care providers; currently, nondominant populations in the tri-county region are too often served by providers who may question or even deny their lived experience of identity-based trauma.

CCCWN WORKGROUP RECOMMENDATIONS

RELATED CHIP STRATEGIES

Workforce should include Oregon Health Plan optimization and supportive services.	
Identify new and emerging regional health care training and workforce opportunities, with a focus on engaging uncounseled/unrepresented groups.	<ul style="list-style-type: none"> • IDARE 1.3. Increase the number of culturally and linguistically appropriate service providers by removing institutional barriers and uplifting communities into these roles.
Support new and existing legislation for workforce development.	
Pool funds to support training for Peer Support Specialists, CHW, CADAC, and others.	<ul style="list-style-type: none"> • IDARE 1.3. Increase the number of culturally and linguistically appropriate service providers by removing institutional barriers and uplifting communities into these roles.
Provide staff with lived experience to support workforce members undergoing secondary trauma.	<ul style="list-style-type: none"> • IDARE 2.1. Grow and maintain a healthy behavioral health provider workforce by addressing retention strategies, burnout, and recruitment. Example: For retention and recruitment, support career development opportunities such as internships, mentorships, and culturally specific peer supports. • AQC 1.1. Sustainability – Increase the number of all levels and types of health care providers in the region (and particularly in rural areas). Focus areas include addressing institutional barriers, prioritizing meaningful strategies for recruitment and retention of diverse talent, and exploring innovative ideas to address provider burnout.
Expand peer support into EDs, law enforcement and other agencies.	<ul style="list-style-type: none"> • IDARE 1.3. Increase the number of culturally and linguistically appropriate service providers by removing institutional barriers and uplifting communities into these roles.
Identify sustainable funding sources to maintain staff and programs (e.g., discuss creative payment models with IHN-CCO).	

Strengths and opportunities

- Promising workforce development models include Marion County Medical Assistant Program through Willamette ESD Career Center; the Community Health Workers program at Linn-Benton Community College (LBCC); and Lane County ‘hybrid programs for dental assistants and other providers; and Albany’s para-medicine program.
- Delivery system transformation funding through IHN-CCO has helped fund regional training hubs.

Threats and weaknesses

- New workforce positions may require considerable upfront investment without providing currently billable services.
- Nonprofit and long-term funding opportunities may fall outside the three-year strategic planning window.

Diversity, Equity and Inclusion

DEI/IDARE strategies are crucial to workforce development efforts, the provision and delivery of member and partner services, reaching underserved and/or mistrustful populations, CCCWN’s strategic planning and decision-making, and to the Network’s efforts to expand and sustain its membership. Transforming the health and social services systems to work for all people logically entails transforming CCCWN itself to include under-represented voices and culturally specific advocates and to act on their recommendations (the chart below shows the stages by which dominant-culture organizations typically engage nondominant community members in decision-making and ownership).

The Spectrum of Community Engagement to Ownership

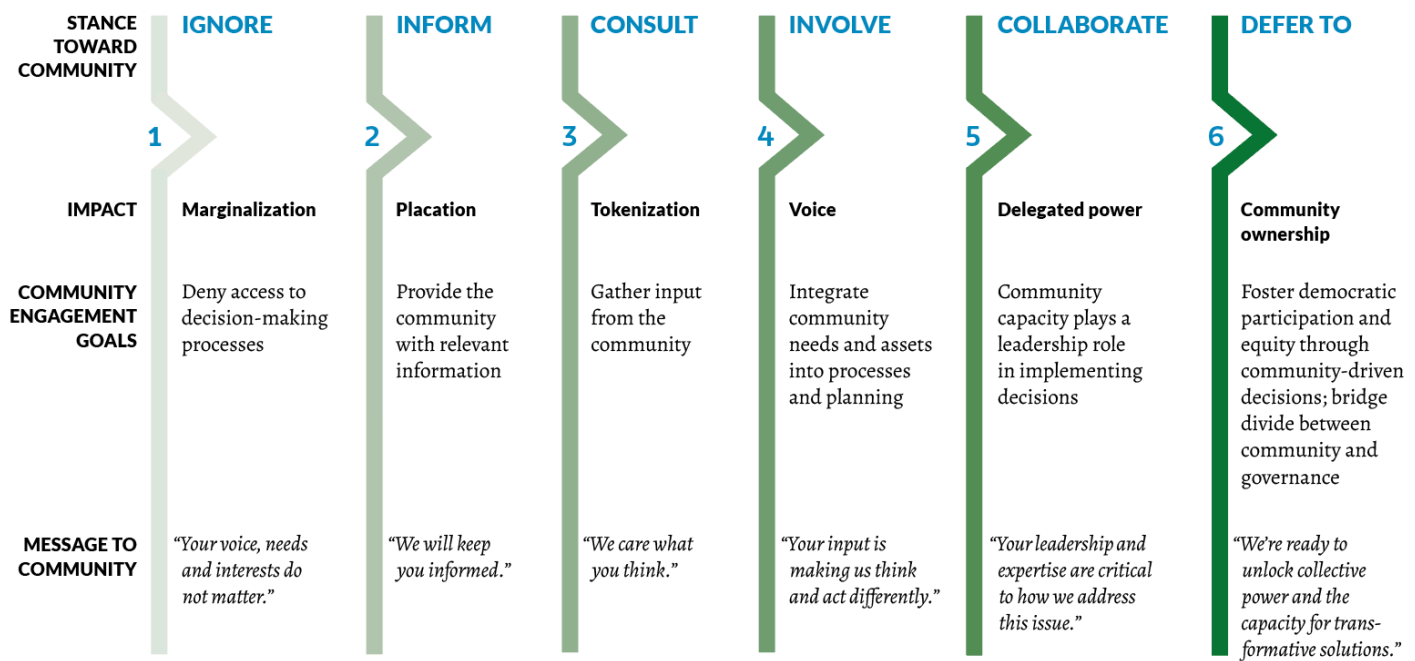


Chart adapted from Community Commons: <https://www.communitycommons.org/entities/3aec405c-6908-4bae-9230-f33bef9f40e1>

CCCWN's initial strategic planning identified the following steps toward transformative—as opposed to superficial, rhetorical or merely performative—DEI work; related CHIP goals and IDARE activities appear in the adjacent column.

CCCWN WORKGROUP RECOMMENDATIONS

Incorporate achievable and accountable EDI goals into the Network's mission and value statements.

Create a request for proposal/memorandum of understanding specifying a percentage of Network funding to be allocated to DEI efforts.

Marketing should communicate DEI values.

Improve data collection relating to underserved and marginalized population and DEI goals (Note: This entails strengthening relationships with culturally specific, community-based organizations; the practice of collecting data without welcoming deeper collaboration from the partners who provide it is a long-time complaint of organizations and advocates serving nondominant populations.)

Identify which currently excluded stakeholders and providers need to be at the table when deciding how to identify and resolve issues of nonrepresentation, barriers to access, historical and ongoing experiences of institutional trauma, and community mistrust. (Note: Partners providing this information should be remunerated and, ideally, have decision-making power. Existing members should recognize and accept that this may entail changing the nature of the "space" in which CCCWN has previously operated.)

RELATED CHIP STRATEGIES

IDARE 2.2. Build accountability measures for providers and community members.

IDARE 1.1.1. Develop community-driven practices which embed equity principles in the removal of institutional barriers.

IDARE 2.3. Provide resources (e.g., funding) and supports to community members around participation in decision-making bodies and advocacy.

IDARE 2.3. Provide resources (e.g., funding) and supports to community members around participation in decision-making bodies and advocacy.

- IDARE 3.1. Change strategies for gathering data to reflect inclusion, diversity, antiracism, and equity and gender justice.
- IDARE 3.2. Centralize and coordinate data collection.
- IDARE 3.3. Disaggregate data using a combination of quantitative (statistical) and qualitative data (people's experiences).
- BH 2.3. Create learning opportunities for providers that increase awareness around cultural competence and the unique health needs of marginalized (under-resourced) communities.

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IDARE 2.3. Provide resources (e.g., funding) and supports to community members around participation in decision-making bodies and advocacy.

CCCWN WORKGROUP RECOMMENDATIONS

Recognize that some marginalized people will continue to avoid health and social services institutions, and identify ways to deliver the services, resources and education they need through culturally specific partners they already trust. (Note: In many cases, this may entail empowering, trusting and funding these organizations to make their own decisions.)

Engage culturally specific partners and Network members in setting meaningful standards for DEI accountability and maintenance. (Note: To be effective and trustworthy, accountability measures require formal input from end users of the services and their advocates rather than institutional self-policing.)

RELATED CHIP STRATEGIES

- BH 2.2. Reduce barriers of access to care including the physical barriers of transportation, rural and tribal needs, and culturally appropriate and gender-affirming treatment options. Example: Support funding for existing community service providers, CBOs, tribal organizations/support (term TBD), and non-clinical settings.
- IDARE 1.1. Develop community-driven practices which embed equity principles in the removal of institutional barriers.
- IDARE 1.2. Improve equitable access to culturally and linguistically appropriate service (CLAS) providers.
- IDARE 1.3. Increase the number of culturally and linguistically appropriate service providers by removing institutional barriers and uplifting communities into these roles.
- IDARE 2.2. Build accountability measures for providers and community members.

Mental Health/Behavioral Health

CCCWN’s workgroups agreed that although SUD technically falls under this heading, it’s a wide-ranging issue that may have separate resources and goals and therefore requires its own focus area. While this is a somewhat different approach from CHIP, both approaches have similar goals and strategies. The workgroup assigned to the topic identified *youth/families, equity and inclusion, and training opportunities* as significant needs in this area.

Mental/behavioral health issues among marginalized communities are often compounded by experiences of institutional trauma, neglect, abuse, and/or lack of access to respectful and compassionate care within hospitals and other systems. People who don’t feel safe in these spaces are unlikely to seek care from them regardless of their access to or awareness of resources; reaching these patients will likely require increased support for trusted, culturally specific organizations.

CCCWN WORKGROUP RECOMMENDATIONS

Increase trauma-informed, linguistically and culturally appropriate training.

Create workforce retention strategies, especially in rural areas.

Define pathways along the continuum of care to educate providers and community members on where to get appropriate mental/behavioral health services.

RELATED CHIP STRATEGIES

- BH 2.2. Reduce barriers of access to care including the physical barriers of transportation, rural and tribal needs, and culturally appropriate and gender-affirming treatment options. Example: Support funding for existing community service providers, CBOs, tribal organizations/support (term TBD), and non-clinical settings.
- AQC 1.1. Sustainability. Increase the number of all levels and types of health care providers in the region (and particularly in rural areas). Focus areas include addressing institutional barriers, prioritizing meaningful strategies for recruitment and retention of diverse talent, and exploring innovative ideas to address provider burnout.
- IDARE 1.2. Improve equitable access to culturally and linguistically appropriate service (CLAS) providers.

Substance Use Disorder

People with SUD have often experienced trauma, identity-based discrimination and other inequitable treatment, as well as involvement in the criminal justice system. Many of them complain of dismissive, disrespectful, traumatizing interactions with regional providers as well as substandard or inadequate care. Provider bias against people using substances is pervasive enough that even people who do *not* have SUD report being designated by ED staff as “drug-seeking” patients on the basis of what these staff perceive as an “unconventional” appearance.

While eradicating stigma among providers and staff is a necessary step in providing appropriate care, people who hold multiply stigmatized identities or who have experienced egregious mistreatment within the “official” health and social services systems may still be unwilling to see these providers as safe. For these reasons and others—including lack of transportation and the difficulty of navigating support systems—the SUD workgroup emphasized the value of bringing services to people through trusted community-based partners, using such methods as hub-and-spoke mobile providers, one-stop facilities and street outreach.

CCCWN WORKGROUP RECOMMENDATIONS

Meet people with SUD where they are instead of focusing on pulling them into existing systems.

Consistently provide safe, trauma-informed, culturally appropriate services and referrals to people with SUD.

Delegate outreach and services to local community-based organizations that have already built trust with people who have SUD. Fund and support their work without visibly linking it to hospitals, county agencies or law enforcement.

Partners could develop, fund and staff one-stop sites where people can access multiple services and types of assistance (e.g., coordinated care, medication management, housing and food assistance, MAT, harm reduction services, navigation services, mental/behavioral health services, legal assistance, translation/interpretation, and other resources) without having to travel to multiple locations.

Improve pathways for people who connect with recovery services to become peer support specialists or other types of providers or community-based advocates (cf. ReConnections Counseling program in Lincoln County).

RELATED CHIP STRATEGIES

- BH 2.2. Reduce barriers of access to care including the physical barriers of transportation, rural and tribal needs, and culturally appropriate and gender-affirming treatment options. Example: Support funding for existing community service providers, CBOs, tribal organizations/support (term TBD), and nonclinical settings.
- BH 2.3. Create learning opportunities for providers that increase awareness around cultural competence and the unique health needs of marginalized (under-resourced) (term TBD) communities.
- AQC 1.1. Sustainability. Increase the number of all levels and types of health care providers in the region (and particularly in rural areas). Focus areas include addressing institutional barriers, prioritizing meaningful strategies for recruitment and retention of diverse talent, and exploring innovative ideas to address provider burnout.
- o AQC 1.2. Grow an electronic, closed loop referral system between community and clinical services that supports community partners in accessing resources, meeting patient needs, gathering standardized data, and expanding community-based care.
- Create sustainable funding mechanisms for effective community-based care delivery. Examples include establishing reimbursement guidelines and fee schedules.
- BH 2.1. Grow and maintain a healthy behavioral health provider workforce by addressing retention strategies, burnout, and recruitment. Example: For retention and recruitment, support career development opportunities such as internships, mentorships, and culturally specific peer supports. AQC 1.1. Sustainability – Increase the number of all levels and types of health care providers in the region (and particularly in rural areas). Focus areas include addressing institutional barriers, prioritizing meaningful strategies for recruitment and retention of diverse talent, and exploring innovative ideas to address provider burnout.
- IDARE 2.3. Provide resources (e.g., funding) and supports to community members around participation in decision-making bodies and advocacy.
- IDARE 1.3. Increase the number of culturally and linguistically appropriate service providers by removing institutional barriers and uplifting communities into these roles.

The Coast to Cascades Community Wellness Network
Charter
2025

Article I. Name

Section 1. The name of this group shall be the Coast to Cascades Community Wellness Network (CCCWN).

Article II. Mission/Vision

Section 1. Mission: To provide leadership to enhance the health of communities through development and support for collaborative regional partnerships and community health programs in Benton, Lincoln, and Linn Counties.

Section 2. Vision: The Coast to Cascades Community Wellness Network leads and sustains a system of partnerships of agencies and organizations working together to provide integrated services and programs to promote individual and community health.

Article III. Organization

Section 1. The CCCWN will consist of a general body of members and a Steering Committee. Additional committees may be organized to develop and support community health projects.

Article IV. Membership

Section 1. Members shall include key leaders and executives that have an interest in issues related to the overall health and wellbeing of all people in Benton, Lincoln, and Linn County areas.

Section 2. Membership contributions of the CCCWN are voluntary. Contributions are used to cover meeting materials, meals, room rentals, related activities and grant matching funds. Contributions are not used for staff or administration.

Section 3. Members or an appropriate delegate shall actively participate in biannual CCCWN meetings.

Article V. Steering Committee

Section 1. The Steering Committee will be developed from the body of the CCCWN and have representation of at least one person from each county.

Section 2. The Steering Committee is responsible for the overall direction of the CCCWN.

Section 3. The Steering Committee will meet to review activities of the CCCWN.

Section 4. Members shall actively participate in CCCWN and Steering Committee meetings.

Article VI. Officers

Section 1. The CCCWN shall have a Chairperson.

Section 2. The Chairperson shall be nominated and elected by the CCCWN.

Section 3. The Chairperson shall preside over all CCCWN meetings and serve on the CCCWN Steering Committee.

Section 4. In the event the Chairperson is unable to attend the CCCWN meeting, the Chairperson will contact staff or a Steering Committee member to preside over the meeting.

Section 5. Terms of office shall be reviewed annually.

Article VII. Meetings

Section 1. The CCCWN shall meet two times a year. Official business will include but is not limited to reports, discussion of projects and goals, funding and grant opportunities, and any additional activities surrounding overall health in the region. The meetings will rotate between each of the counties to include Benton, Lincoln, and Linn.

Section 2. The Steering Committee will meet every other month. The Steering Committee will set the agenda, review programs and activities, and identify projects for the CCCWN. The Steering Committee can meet virtually.

Article VIII. Staffing

Section 1. Staffing of the CCCWN will be provided by Samaritan Health Services Grants and Sponsored Programs Department.

Section 2. Staff shall work with the Chairperson to develop and distribute the agenda, meeting summaries, and other information that is of interest to the CCCWN.

Section 3. Staff shall maintain communications with members and other local organizations and agencies and shall maintain and update the CCCWN website as necessary.

Article IX. Roles & Responsibilities

Section 1. The CCCWN Steering Committee will review and approve all grant reports, applications, and other relevant information before forwarding to the full CCCWN.

Section 2. The CCCWN Steering Committee will review and approve consortium grant applications; full network members will be given opportunity to review and respond within two weeks of receipt of documents.

Section 3. The CCCWN will review and approve all reports, assessments, and plans that are required by local organizations and agencies.

Section 4. The CCCWN Chairperson will endorse requested letters of support that align with the vision and mission of the CCCWN.

Adopted: July 31, 2013

Revised: May 27, 2015

Revised: November 6, 2024

Measure 110 Behavioral Health Resource Network (M110 BHRN)

Linn County

CCCWN Steering Committee Update – May 2025

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).

Reporting:

- Expenditure reports for BHRN Quarters 10-12 have been expedited. The Quarter 11 expenditure report was due May 1. The Quarter 12 report is due June 1.
- Narrative Report 11, covering data and services from Jan 1, 2025 – Mar 31, 2025 is due May 15.

BHRN Partner Updates:

- Emergence is launching it's Connections Co-Dependency Group, which will run on Mondays from 1:00pm-2:30pm. This program is for SUD clients, as well as Reflections clients who are voluntary. See attached flier for more info.
- Emergence's Women's Trauma Informed program (Reflections) continues to see high attendance and consistent progress among clients.

- Family Tree Relief Nursery's peer support training program continues to see high attendance, with upcoming classes at capacity. Individuals who wish to be added to the waitlist for upcoming classes may contact Meredith Schrepfer (mschrepfer@familytreern.org).
- Samaritan Health is hosting two "Community Conversations" stigma reduction workshops in Linn County. The first workshop is on **May 21**, at Boulder Falls Inn in Lebanon. The second is on **May 22**, at CHANCE Recovery's Albany office. The workshops run from 9am-12pm, with the Lebanon session having an optional trainer certification workshop from 1pm-4pm. Please see the attached flier for more info and registration links.

**EMERGENCY
ADDICTION AND BEHAVIOR
THERAPIES
PRESENTS**

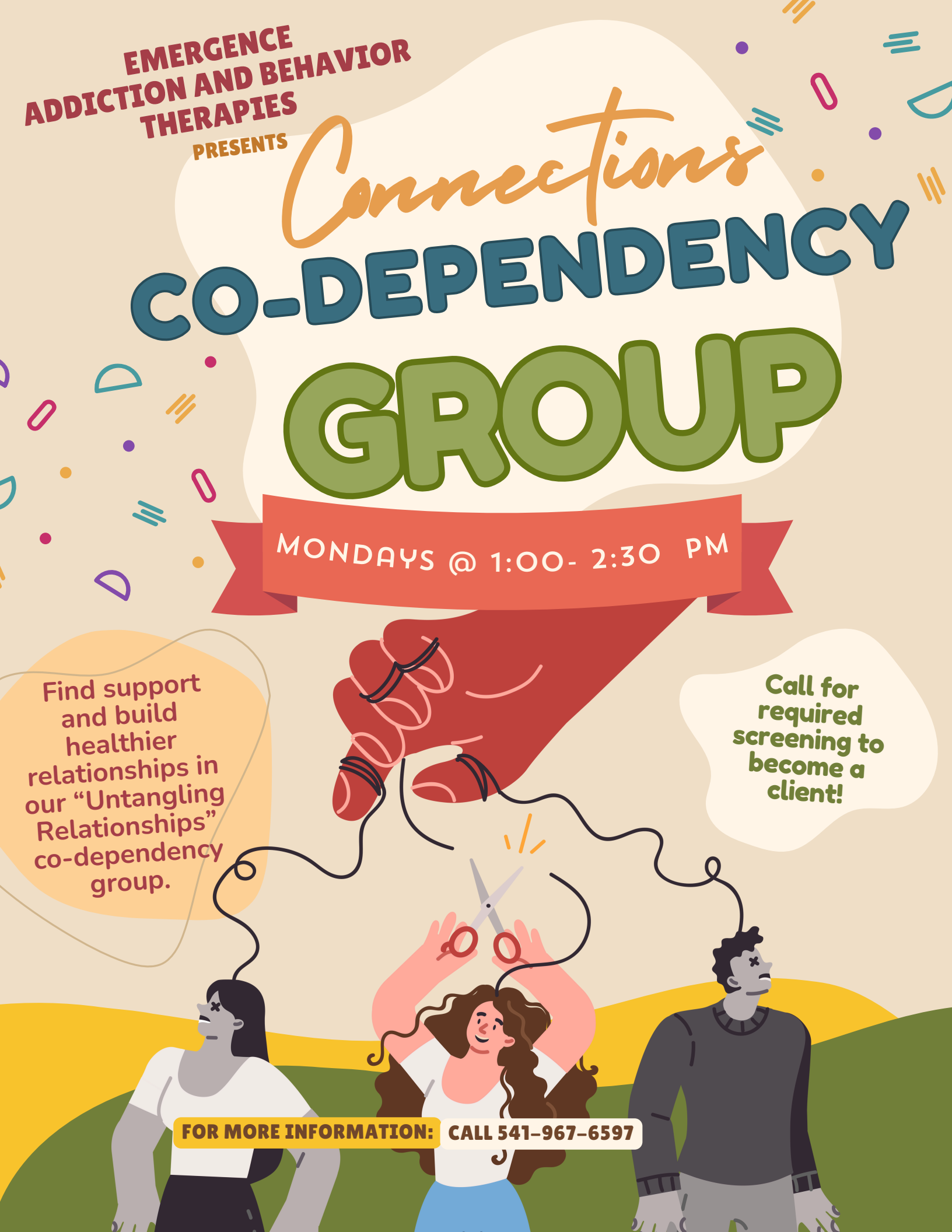
Connections **CO-DEPENDENCY GROUP**

MONDAYS @ 1:00 - 2:30 PM

Find support and build healthier relationships in our "Untangling Relationships" co-dependency group.

Call for required screening to become a client!

FOR MORE INFORMATION: CALL 541-967-6597





JOIN THE conversation

A COMMUNITY CONVERSATION ON OPIOID USE DISORDER

In partnership with UR Medicine Recovery Center of Excellence

ENDING STIGMA STARTS WITH A CONVERSATION

Come join us for an interactive community conversation surround substance use and stigma. This is not an academic workshop, but a conversation for participants to explore stigma, how we support people with substance use disorder (SUD) and their families, and how we work together in our communities to reduce stigma. We use portraits and videos of people with lived experience to facilitate discussion, making it very interactive.

- = community conversation
- = facilitator leader training*

*must attend the community conversation session prior to attending the facilitator leader training

Register here! **Monday, May 19**
9 AM-12 PM
1 PM-4:30 PM
 Oregon Coast Community College
 400 SE College Way
 Newport, OR 97366
 Room CC140
CCNewport.eventbrite.com

Register here! **Tuesday, May 20**
10:30 AM-1:30 PM
 Lincoln City Community Center
 2150 NE Oar Pl.
 Lincoln City, OR 97367
CCLincolnCity.eventbrite.com

Register here! **Wednesday, May 21**
9 AM-12 PM
1 PM-4:30 PM
 Boulder Falls Inn Club Room
 505 Mullins Dr.
 Lebanon, OR 97355
CCLebanon.eventbrite.com

Register here! **Thursday, May 22**
9 AM-12 PM
 CHANCE Recovery Conference Room
 231 SE Lyon St.
 Albany, OR 97321
CCAlbany.eventbrite.com

This HRSA RCORP RCOE program is supported by the Health Resources & Services Administration (HRSA) of the US Department of Health & Human Services (HHS) as part of an award of \$3.33M in the current year with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by HRSA, HHS or the US Government.

Tedra Cobb



Community Conversation Facilitator

President, Tedra L. Cobb & Associates

Tedra L. Cobb is president of her consulting firm, Tedra L. Cobb & Associates. Cobb's expertise is in program and organizational development and facilitation of highly effective, interactive educational workshops. Her diverse experience ranges from bilingual counseling (Spanish) in the New York State prison system to founding and directing a community-based health coalition. She currently serves as a consultant trainer for the University of Rochester Medicine Recovery Center of Excellence and travels across the country working with rural communities to address stigma and substance use disorder. Her civic engagement includes two terms as an elected county legislator, a run for Congress, and appointments to the NY State Committee on Open Government and the Northern New York Healthcare Redesign Commission. The common thread throughout her career is building community.

