“Creating a healthier Central Oregon.”

Central Oregon Council

- Rick Treleaven, Chair, LCSW
  Executive Director
  BestCare Treatment Services, Inc.
- Linda Johnson, Vice Chair,
  Community Representative
- Patti Adair, Commissioner,
  Deschutes County
- Eric Alexander, CEO
  Partners in Care
- Gary Allen (Interim)
  VP, Advantage Dental
- Paul Andrews, Ed.D
  Superintendent
  High Desert ESD
- Tammy Baney, Executive Director, Central Oregon Intergovernmental Council
- Seth Crawford
  Commissioner,
  Crook County
- Megan Haase, FNP
  CEO, Mosaic Medical
- Brad Porterfield, Community Representative, CAC Chair
- Divya Sharma, MD
  Central Oregon IPA Representative
- Kelly Simmelink
  Commissioner,
  Jefferson County
- Justin Sivill
  Executive Director,
  Summit BMC
- Dan Stevens
  Executive VP, PacificSource
- Jenn Welander (Interim)
  CFO, St. Charles Health System

COHC Virtual Board Meeting
September 10, 2020

Dial In – See calendar invite for Zoom details to join from a computer
Phones: 1(669) 900-6833, Code: 542240567#

Welcome – Rick Treleaven
12:30 – 12:35 Introductions, Public Comment, Introduce Brad Porterfield
  – Rick Treleaven
12:35 – 12:40 Action Items & Approve Consent Agenda

Governance
12:40 – 1:10 Health Equity Plan – Miguel Herrada

*Board Adjourns to meet CAC in closed Combined Meeting*

Consent Agenda
- August 2020 Board Minutes
- New CAC Membership – E. Barron/T. Olander

Written Reports
- Executive Director Update
- August 2020 CAC Minutes
- COVID Mini-Grant Report
- RHIP Quarterly Funding Report

The Central Oregon Health Council Board of Directors reserves the right to transition into an executive session at any point during the Board meeting.
MINUTES OF A MEETING OF
THE BOARD OF DIRECTORS OF
CENTRAL OREGON HEALTH COUNCIL
HELD VIRTUALLY VIA ZOOM

August 13, 2020

A meeting of the Board of Directors (the “Board”) of Central Oregon Health Council, an Oregon public benefit corporation (the “Corporation”), was held at 12:30 p.m. Pacific Standard Time on August 13, 2020, online via Zoom. Notice of the meeting had been sent to all members of the Board in accordance with the Corporation’s bylaws.

Directors Present:                      Rick Treleaven, Chair
                                          Linda Johnson, Vice Chair
                                          Patti Adair
                                          Eric Alexander
                                          Paul Andrews, Ed.D
                                          Gary Allen, DMD
                                          Justin Sivill
                                          Dan Stevens
                                          Jenn Welander

Directors Absent:                       Tammy Baney
                                          Seth Crawford
                                          Megan Haase, FNP
Divya Sharma, MD
Kelly Simmelink

Guests Present:
MaCayla Arsenault, Central Oregon Health Council
Rebeckah Berry, Central Oregon Health Council
Muriel DeLaVergne-Brown, Crook County Health Department
Miguel Herrada, PacificSource
Angela Jensen, Older Adult Behavioral Health Initiative
Gwen Jones, Central Oregon Health Council
Donna Mills, Central Oregon Health Council
Leslie Neugebauer, PacificSource
Kelsey Seymour, Central Oregon Health Council
Renee Wirth, Central Oregon Health Council

Mr. Treleaven served as Chair of the meeting and Ms. Seymour served as Secretary of the meeting. Mr. Treleaven called the meeting to order and announced that a quorum of directors was present and the meeting, having been duly convened in accordance with the Corporation’s bylaws, was ready to proceed with business.

WELCOME
Mr. Treleaven welcomed all attendees to the meeting; introductions were made.

PUBLIC COMMENT
Mr. Treleaven welcomed public comment. No public comment was made.

CONSENT AGENDA
The consent agenda included the June minutes, the CCO Dashboard for June and July, the January-June COHC Financials (January-March revised post-2019 audit), ratification of CAC Consumer
Represents approval, COHC Staff PTO Cash Out, Quality Pool Distribution for CCO 2.0, and approval of new CAC Consumer Representative Theresa Olander.

MOTION TO APPROVE: Ms. Johnson motioned to approve the consent agenda; Mr. Andrews seconded. The motion was approved unanimously.

GOVERNANCE REPORT OUT
Ms. Johnson shared that the Governance Committee has begun an in-depth review of Senate Bill 648 and the bylaws. She noted they have scheduled an extra meeting to allow time for discussions. Ms. Mills noted that Ms. Baney is temporarily serving as Chair of the Governance Committee while Ms. Johnson serves as interim Chair of the Community Advisory Council.

CODEI REPORT OUT
Ms. Jones invited Board members to small groups to rate the COHC on Diversity, Equity, and Inclusion. The Board reported back on their discussions, noting that the exercise helped point out how much work is still required of the COHC. Mr. Herrada encouraged the Board to continue exploring opportunities.

OLDER ADULT BEHAVIORAL HEALTH INITIATIVE
Ms. Jensen shared that the Initiative has been in place since 2016, and is a joint effort with the Oregon Health Authority, who provides the resources for the program. She explained that funding has been secured through 2021. She noted they partner closely with Portland State University’s Institute on Aging.

Mr. Sivill thanked Ms. Jensen for her support of such a vulnerable population.

COST AND UTILIZATION STEERING COMMITTEE (CUSC) UPDATE
Mr. Treleaven noted that he and Dr. Sharma co-chair the CUSC. He explained that a letter has been submitted to PacificSource requesting specific data to assist the CUSC in identifying opportunities to improve cost. He noted that a more focused discussion among a small group of executives is being scheduled to clarify what data will be most helpful.

Mr. Treleaven noted the CUSC will be a standing part of the COHC Board agendas going forward. He expressed the importance of the timing of these conversations in relation to the impending budget cuts caused by the pandemic.
Mr. Sivill impressed the importance of financial transparency between providers to achieve actionable change.

**CCO 2.0 QUARTERLY PERFORMANCE METRICS**

Ms. Neugebauer shared that the ECQMs still need to be submitted for 2020 performance for Quarter 1. She noted that improvement targets will not be upheld. She shared that June performance reporting figures appear more like pre-pandemic figures. Mr. Stevens noted that membership is higher than usual and the State has suspended re-eligibility requirements to reduce churn.

**ADJOURNMENT**

There being no further business to come before the Board, the meeting was adjourned at 2:07 pm Pacific Standard Time.

Respectfully submitted,

_________________________
Kelsey Seymour, Secretary
Facilitate PEP meeting
Facilitate Finance meeting
Multiple stakeholder/community meetings
Steering committee for TRACES work (United Way)
EL Hub as ex-officio member
El Hub Investment Steering Committee
Central Oregon Suicide Prevention Alliance Leadership
COHIE Board Member – HIE
Fiscal agent for Social Services Steering UNITE US (CIE)
System of Care Executive Team member
Grant software management
Managing PDO, OHA and OCR grant funds
Managing OABHI contract
CCO 2.0 alignment and support and training
Board Governance Committee support
Childcare Accelerator steering committee
Cost & Utilization Steering committee
Maintain Central Oregon Resource Directory (CORD) in partnership with Joint Incident Command for Central Oregon
Maintain office closure and provide for minimal disruption to staff, committees, workgroups and community
Review, vet, approve and fund Mini-grants
Tax return prep with CPA (Form 990)
Activate Strategic Plan
Grant writing assistance for Behavioral Health Consortium

Coming up:
Soft launch of Community Data Dashboard 9.9.2020
Unite Us CIE platform go-live 9.29.2020
Present:
Linda Johnson, Interim Chair, Community Representative
Larry Kogosvek, Vice Chair, Consumer Representative
Rhonda Abbott, Consumer Representative
Elaine Knobbs-Seasholtz, Mosaic Medical
Lauren Kustudick, Consumer Representative
Jennifer Little, Klamath County Public Health
Tre Madden, Consumer Representative
Theresa Olander, Consumer Representative
Brad Porterfield, Chair, Consumer Representative
Elizabeth Schmitt, Consumer Representative

Absent:
Michael Baker, Jefferson County Health
Mayra Benitez, Consumer Representative
Jolene Greene, Consumer Representative
Tom Kuhn, Deschutes County Health Services
Vicky Ryan, Crook County Health Department
Mandee Seeley, Consumer Representative
Ken Wilhelm, United Way of Deschutes County
Cris Woodard, Consumer Representative

Others Present:
MaCayla Arsenault, Central Oregon Health Council
Elizabeth Batterson, Community Member
Rebeckah Berry, Central Oregon Health Council
Thomas Cogswell, Oregon Health Authority
Gwen Jones, Central Oregon Health Council
Donna Mills, Central Oregon Health Council
Tanya Nason, PacificSource
Leslie Neugebauer, PacificSource
Kristen Tobias, PacificSource
Renee Wirth, Central Oregon Health Council
Introductions

- Introductions were made and Linda Johnson welcomed all attendees.

Public Comment

- No public comment was made.

Approval of the Minutes

- Larry Kogosvek motioned to approve the minutes; Jennifer Little seconded. All were in favor, the motion passed unanimously.

Announcements

- Linda Johnson announced she will act as interim chair, and Brad will take on the role of Chair in September.
- Linda noted the CAC approved Theresa Olander as a member, which needs to be ratified by the Board of Directors at the September 10th meeting.
- Linda shared another membership application for the CAC has been received and it will be reviewed by the CAC Selection Committee before being submitted to the CAC.
- Linda shared the CAC is invited to participate in the Combined Meeting, September 10th, where there will be a training on advocacy.

Community Health Projects

- MaCayla explained that COHC staff changed the name of Community Benefit Initiative to Community Health Projects for the Request for Proposals (RFP) since it resonated more with the community.
- MaCayla gave an overview of the Community Health Projects and announced that the original budget of $250,000 has been expanded to $900,000. She reviewed the timeline since the creation of the RFP and upcoming schedule and due dates.
- MaCayla explained that 42 proposals have been submitted, totaling $1.6M in grants. She announced the CAC will be divided into teams, with each team reviewing 10-11 proposals and scoring them by September 7th. She noted that Gwen Jones will be joining her in online drop-in sessions over the next two weeks, creating an opportunity for members to ask questions about proposals.
- MaCayla reviewed the scorecard for proposals, the key definitions, and showed a preview of the survey.
- MaCayla invited the CAC into small group sessions to discuss how the COHC can best support them. The small groups reported back their findings.

COHC Board of Directors Strategic Plan

- For the sake of time, Donna abdicated her slot on this agenda.

Traditional Health Workers
• Tanya Nason gave a presentation on Traditional Health Workers (THWs). She asked the CAC about their experiences with THWs to help inform PacificSource’s processes.

Community Hot Topics
• Linda announced that “Hot Topics” will be implemented into meeting agendas going forward so key issues or happenings can be considered for future agendas. She invited the CAC to share “Hot Topics.”
  o The lack of mask-wearing in La Pine
  o Outreach to Spanish speakers/resources reaching them in a timely manner and culturally appropriate way
  o Water in Warm Springs
• Linda noted the topics and explained these will be considered with Brad, Larry and staff to prepare future agendas.

Closing
• Linda Johnson thanked the CAC for being willing to share their thoughts and for being engaged in the discussion.
Central Oregon Health Council
COVID-19 Mini-Grant Report

This report gives an overview of the status of all COVID-19 mini-grants funded by the Central Oregon Health Council (COHC).

There are two funding streams available for COVID-19 mini-grants. One is from the RHIP Workgroups, who elected to pool their money. Each workgroup contributed $25,000, for a total of $150,000. Grant applications for this funding stream directly impact a RHIP metric. See pages two and beyond for information on which measures have been impacted through COVID-19 mini-grants.

The second funding stream is provided from the COHC reserves in a matching amount of $150,000. This funding pool is drawn from when a COVID-19 mini-grant is submitted due to an emergent need, but does not align with a RHIP metric. See a complete list of these mini-grants on the bottom half of page one.

Non-RHIP COVID-19 Mini-Grants

<table>
<thead>
<tr>
<th>MARCH</th>
<th>April</th>
<th>May</th>
<th>June</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jefferson County Public Health Department Stay Home, Save Lives Outreach Campaign</td>
<td>Crook County Health Department COVID-19 Outreach Campaign</td>
<td>Ronald McDonald House Charities COVID-19 Virtual Family Supports</td>
<td>Healing Reins First Responder Fridays</td>
</tr>
<tr>
<td>Mosaic Medical COVID-19 Care Kits for the Homeless</td>
<td>NeighborImpact Homeless Services</td>
<td>REACH COVID-19 Services for Homeless</td>
<td>Crook County Health Department Regional Spanish Substance Abuse Messaging</td>
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</tbody>
</table>
## RHIP COVID-19 Mini-Grants

<table>
<thead>
<tr>
<th>Measure</th>
<th>Organization/Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decrease food insecurity</td>
<td>Bend Farmers Market Fresh Veggies for SNAP Participants</td>
</tr>
<tr>
<td>Decrease percent of individuals living at poverty level and income constrained</td>
<td>BestCare Treatment Services Expanding Telehealth Capacity for COVID-19 Needs</td>
</tr>
<tr>
<td>Decrease housing and transportation costs as a percent of income</td>
<td>Brightways Counseling Group Access to Care - Telehealth</td>
</tr>
<tr>
<td>Increase availability of behavioral health providers in marginalized areas of the region</td>
<td>Cascade Peer and Self Help Center COVID-19 Supports for Clients</td>
</tr>
<tr>
<td>Increase timeliness and engagement when referred from primary care to specialty BH</td>
<td>Central Oregon Veteran Outreach COVO COVID-19 Crisis Homeless Outreach</td>
</tr>
<tr>
<td>Standardize screening processes for appropriate levels of follow-up care</td>
<td>Council on Aging of Central Oregon Addressing Urgent Food Needs for Seniors</td>
</tr>
<tr>
<td>Decrease asthma, cancer, cardiovascular disease, and diabetes rates</td>
<td>DAWNS House COVID-19 Basic Needs Relief</td>
</tr>
<tr>
<td>Increase fruit/vegetable consumption and physical activity in youth</td>
<td>Deschutes County Health Services Expansion of Telehealth Services</td>
</tr>
<tr>
<td>Decrease risk factors for cardio-pulmonary and/or preventable disease</td>
<td>Friends of the Children COVID-19 Support for Youth and Family</td>
</tr>
<tr>
<td>Accurately measure Central Oregonians experiencing homelessness</td>
<td>Healthy Beginnings Continuity of Care During Covid-19</td>
</tr>
<tr>
<td>Decrease binge drinking among adults</td>
<td>High Desert Food and Farm Alliance Food Security for Vulnerable Residents and Farmers</td>
</tr>
<tr>
<td>Increase additional services for alcohol or drug dependence for individuals newly diagnosed</td>
<td>Jericho Road COVID-19 Food Services</td>
</tr>
<tr>
<td>Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs</td>
<td>La Pine Community Health Center The Behavioral Health COVID-19 Telehealth Project</td>
</tr>
<tr>
<td>Increase letter name recognition at kindergarten</td>
<td>Mountain Star Family Relief Nursery Providing Basic Necessities to At-Risk Families</td>
</tr>
<tr>
<td>Decrease binge drinking among adults</td>
<td>NeighborImpact Social Distancing Shelter Alternatives</td>
</tr>
<tr>
<td>Increase additional services for alcohol or drug dependence for individuals newly diagnosed</td>
<td>Redmond Senior Center Home Meal Services - Ensuring Food Security</td>
</tr>
<tr>
<td>Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs</td>
<td>Rimrock Trails Telehealth Counseling Amidst the COVID-19 Crisis</td>
</tr>
<tr>
<td>Increase letter name recognition at kindergarten</td>
<td>St. Charles Health System Purchase Frio Insulin Cooling Cases</td>
</tr>
<tr>
<td>Decrease binge drinking among adults</td>
<td>Still Serving Counseling Services COVID-19 Veteran Mental Health Telehealth</td>
</tr>
<tr>
<td>Increase additional services for alcohol or drug dependence for individuals newly diagnosed</td>
<td>Sunstone Recovery, LLC Telehealth</td>
</tr>
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<td>Increase letter name recognition at kindergarten</td>
<td>The Giving Plate, Inc. COVID-19 Food Relief</td>
</tr>
<tr>
<td>Decrease binge drinking among adults</td>
<td>Thrive Central Oregon Basic Needs Support to Low-Income Households</td>
</tr>
<tr>
<td>Increase letter name recognition at kindergarten</td>
<td>Treehouse Therapies Associates Telehealth Program</td>
</tr>
</tbody>
</table>

**April**
Without these funds, we likely would not have been able to feed all of the families at the same level we do during normal operations.

- Ronald McDonald House Charities

The availability of brand new outdoor kits, as they were exciting, finally made them feel that someone actually cared and saw them as people.

- NeighborImpact
2020-2023 RHIP Funding Report
Central Oregon Health Council

Address Poverty & Enhance Self-Sufficiency
- $1,570,000 Remaining
- $30,000 Spent

Behavioral Health: Increase Access & Coordination
- $1,560,000 Remaining
- $40,000 Spent

Promote Enhanced Physical Health Across Communities
- $1,565,300 Remaining
- $34,700 Spent

Stable Housing
- $1,565,000 Remaining
- $35,000 Spent

Substance & Alcohol Misuse Prevention & Treatment
- $1,575,000 Remaining
- $25,000 Spent

Upstream Prevention: Promotion of Individual Well-Being
- $1,575,000 Remaining
- $25,000 Spent

Report Published July 2020
Address Poverty & Enhance Self-Sufficiency

AIM

Individuals and families in Central Oregon experiencing poverty are provided equitable access and connected to appropriate resources that help them overcome obstacles to self-sufficiency and address health challenges.

$1,570,000 Remaining
$30,000 Spent

Increase high school graduation rates among economically disadvantaged students
Decrease food insecurity
Decrease percent of individuals living at poverty level and income constrained
Decrease housing and transportation costs as a percent of income

Funded Projects

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Project Description</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Various</td>
<td>COVID-19 POOL ($25K)</td>
<td>3/20</td>
<td>TBD</td>
</tr>
<tr>
<td>La Pine CHC</td>
<td>Equitable Transportation (Minigrant)</td>
<td>4/20</td>
<td>5/21</td>
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</tbody>
</table>

Central Oregon Health Council
Behavioral Health: Increase Access & Coordination

AIM

Increase equitable access to skilled and coordinated care between outpatient specialty behavioral health* and the larger health system, including primary care, while decreasing barriers (e.g. stigma, availability of appropriate mental health providers etc.) to ensure an effective and timely response.

*Specialty Behavioral Health includes mental health, substance abuse, and developmental services that are delivered in specialty settings (outside of primary care).

$1,560,000 Remaining
$40,000 Spent

MEASURES

- Increase availability of behavioral health providers in marginalized areas of the region
- Increase timeliness and engagement when referred from primary care to specialty BH
- Standardize screening processes for appropriate levels of follow-up care

FUNDDED PROJECTS

<table>
<thead>
<tr>
<th>GRANTEE</th>
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<tbody>
<tr>
<td>Various</td>
<td>COVID-19 POOL ($25K)</td>
<td>3/20</td>
<td>TBD</td>
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<tr>
<td>Weeks Family Medicine</td>
<td>Telehealth (Minigrant)</td>
<td>4/20</td>
<td>4/21</td>
</tr>
<tr>
<td>COCC Addiction Studies</td>
<td>Scholarships (Minigrant)</td>
<td>9/20</td>
<td>7/21</td>
</tr>
<tr>
<td>The Shield</td>
<td>Veterans Supports (Minigrant)</td>
<td>1/20</td>
<td>1/21</td>
</tr>
</tbody>
</table>
Promote Enhanced Physical Health Across Communities

**AIM**
Equitably and measurably ensure all Central Oregonians improve health behaviors and reduce risk factors that contribute to premature death and diminished quality of life related to preventable disease.

<table>
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<tbody>
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<td>La Pine CHC</td>
<td>3/20</td>
<td>3/21</td>
</tr>
<tr>
<td>Telehealth (Minigrant)</td>
<td>3/20</td>
<td>3/21</td>
</tr>
<tr>
<td>Stroke Awareness OR</td>
<td>4/20</td>
<td>1/21</td>
</tr>
<tr>
<td>Education (Minigrant)</td>
<td>4/20</td>
<td>1/21</td>
</tr>
</tbody>
</table>

**MEASURES**
- Decrease asthma, cancer, cardiovascular disease, and diabetes rates
- Decrease obesity rates in adults
- Increase fruit/vegetable consumption and physical activity in youth
- Decrease risk factors for cardio-pulmonary and/or preventable disease
- Decrease sexually transmitted infections
- Increase individuals receiving both an annual wellness visit and preventative dental visit

Remaining: $1,565,300
Spent: $34,700

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Central Oregonians experiencing homelessness and those most at-risk of homelessness will have increased and equitable access to housing and supports to provide them with opportunities for housing stability and individual well-being.

**MEASURES**
- Decrease severely rent and mortgage-burdened households
- Increase Housing Choice Voucher holders able to find and lease a unit
- Accurately measure Central Oregonians experiencing homelessness

**FUNDED PROJECTS**

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<tr>
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<td>TBD</td>
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<tr>
<td>Kōr Land Trust</td>
<td>Housing Costs (Minigrant)</td>
<td>6/20</td>
<td>6/21</td>
</tr>
<tr>
<td>REACH</td>
<td>HMIS Data (Minigrant)</td>
<td>7/20</td>
<td>7/21</td>
</tr>
</tbody>
</table>

$1,565,000 Remaining
$35,000 Spent
**AIM**

Create and enhance cross-sector collaborations and programming so that all Central Oregonians have equitable access to skilled, evidence based substance (licit and illicit) and alcohol misuse prevention, as well as evidenced based intervention, treatment, and recovery services that are culturally responsive and trauma-informed.

$1,575,000 Remaining
$25,000 Spent

### FUNDED PROJECTS

<table>
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</tbody>
</table>

### MEASURES

- Decrease **binge drinking** among adults
- Decrease **vaping or e-cigarettes among youth**
- Increase **additional services for alcohol or drug dependence** for individuals newly diagnosed
- Reduce **mental health/substance abuse emergency department visits** in Madras, Prineville and Warm Springs

---

Central Oregon Health Council

6

18
Upstream Prevention: Promotion of Individual Well-Being

**AIM**
All communities in Central Oregon have equitable access and opportunities to health, education, healthy relationships, community support, and experiences necessary to thrive at every stage of life from prenatal to adulthood.

### FUNDED PROJECTS

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</tbody>
</table>

### MEASURES

- Increase *letter name recognition* at kindergarten
- Increase *3rd-grade reading proficiency*
- Increase proportion of *pregnancies that are planned*
- Increase *two-year-old immunization rates*
- Establish a *resiliency measure*