

Council Members

- Brad Porterfield, Chair,
Consumer Representative
Latino Community
Association
- Mayra Benitez
Consumer Representative
- Conor Carlsen
Consumer Representative
- Natalie Chavez
Jefferson County Health
Department
- Miranda Hill
Klamath County
Representative
- Linda Johnson
Community
Representative
- Elaine Knobbs-Seasholtz
Mosaic Medical
- Larry Kogovsek
Community
Representative
- Tom Kuhn
Deschutes County Health
Services
- Lauren Kustudick
Consumer Representative
- Theresa Olander
Consumer Representative
- Regina Sanchez
Crook County Health
Department
- Elizabeth Schmitt
Consumer Representative
- Mande Seeley
Consumer Representative
- Ken Wilhelm
United Way of Deschutes
Co.



December 16, 2021

VIRTUAL

Video Conference Link In Calendar Invite

Conference Line: 1.669.900.6833

Meeting ID: 861.0355.0703#

Passcode: 492445#

- 12:00-12:20 Welcome – Brad Porterfield (CAC)**
- Land Acknowledgement
 - Introductions
 - Welcome New CAC Members
 - Update of Board of Directors / CAC Actions from the Combined Meeting
 - Public Comment & Patient Story
 - Approval of Meeting Notes – October & November
- 12:20-12:30 CAC Members Small Group Breakout Session**
- 12:30-12:40 Vice-Chair Roles & Responsibilities & Selection Process – Brad Porterfield (CAC)**
- PacificSource Community Solutions OHP vs “Open Card” – Kristen Tobias (PacificSource)
- 12:40-1:15 Community Health Projects LOI Selection – MaCayla Arsenault (COHC)**
- 1:15-1:30 Emerging Issues Follow Up – Gwen Jones (COHC)**
- Periodontal Care

Five Finger Voting:

0: No go! Serious concerns

1: Serious reservations, prefer to resolve concerns before supporting it

2: Some concerns but will go along with it

3: Support the idea

4: Strong support but will not champion it

5: Absolutely! Best idea ever, willing to champion it

“The overarching purpose of the CAC is to ensure the COHC remains responsive to consumer and community health needs.”—COHC CAC Charter

The Central Oregon Health Council encourages persons with disabilities to participate in all programs and activities. This event/location is accessible to people with disabilities. If you need accommodations to make participation possible please call (541) 306-3523 or email macayla.arsenault@cohealthcouncil.org

Land Acknowledgement

We recognize and acknowledge the indigenous land of which we live, work, learn, play, and grow. This is the land of the Warm Springs, Wasco, Northern Paiute, Tenino, Klamath, Molalla, and Yahooskin. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land where we partner to improve the health and well-being of Central Oregonians. We aspire to be good guests honoring the concept in the Warm Springs culture: “This land is for you to know and live upon and pass on to the children.”



Community Advisory Council (CAC) Meeting Changes: What to Expect

We want the CAC to be a warm and welcoming place for all. We want to ensure all CAC members feel comfortable to fully participate and contribute. To do this we are making some adjustments to how our CAC meetings are run. These changes are:

- Making the meetings less institutional and formal to create a warmer and more welcoming atmosphere. Examples are using more plain language, having more conversations and less presentations, and simpler voting instead of motioning.
- Renaming each attendee in Zoom with their role; either a CAC Member, Support Staff, or Guest. This will help easily identify who's who in the virtual space especially for guests and those members who are new.
- Asking all supporting staff from COHC, PacificSource, and the OHA to share why they are attending and what their role is in supporting the Community Advisory Council.
- Inviting all CAC members in attendance to share input during discussions and before decisions are made. We want to prioritizing Consumer Representatives and make sure all voices are heard. Guests in attendance are invited to contribute to the conversation when requested by the CAC Chair or Vice Chair.
- Building relationships between CAC members. We will be setting aside time at each meeting for CAC members to go into a virtual break out room, answer icebreaker questions or chat about anything they'd like.

PATIENT STORY

One of the challenges we've seen for our WIC participants on OHP is that they can't get their toddlers in to see the dentist. We have had client try to get their child seen at Advantage dental in Prineville. They will not see them. They will not even schedule them that young. If they are not staffed to see children that young, we need to see what we can do to get these children assigned to a pediatric dentist. We also see that parents find it very hard to figure out what provider they are assigned to. I have a client that had been trying to get a referral approved by OHP to get her child in for oral surgery. This child has been in pain for several months. In the mean while when this referral is going back and forth with what ever loops need to be closed or appointments that need to be scheduled this child's mouth is becoming worse and more painful. We need to see an easier way to get these types of situations handled. It is challenging for us community health workers to navigate these situations for our clients. I can't even imagine someone trying who has know idea were to start.



COHC Community Advisory Council

Held virtually via Zoom

October 21, 2021

CAC Members Present:

Brad Porterfield, Chair, Consumer Representative
Regina Sanchez, Crook County Health Department
Tom Kuhn, Deschutes County Health Services
Elaine Knobbs-Seasholtz, Mosaic Medical
Elizabeth Schmitt, Consumer Representative
Mandee Seeley, Consumer Representative

CAC Members Absent:

Larry Kogosvek, Vice Chair, Consumer Representative
Natalie Chavez, Jefferson County Health
Lauren Kustudick, Consumer Representative
Jennifer Little, Klamath County Public Health
Ken Wilhelm, United Way of Central Oregon
Theresa Olander, Consumer Representative
Mayra Benitez, Consumer Representative
Conor Carlsen, Consumer Representative
Jolene Greene, Consumer Representative
Linda Johnson, Community Representative

COHC Staff Present:

Donna Mills, Central Oregon Health Council
MaCayla Arsenault, Central Oregon Health Council
Gwen Jones, Central Oregon Health Council
Renee Wirth, Central Oregon Health Council
Kelley Adams, Central Oregon Health Council
Camille Smith, Central Oregon Health Council

Guests Present:

Kristen Tobias, PacificSource
Tricia Wilder, PacificSource
Miguel Herrada, PacificSource
Buffy Hurtado, Tribal Liaison, PacificSource
Rebecca Donell, Oregon Health Authority
Tania Curiel, Oregon Health Authority
Carolyn Black, Oregon Health Insurance Marketplace
Federico Corzo Fernandez, Oregon Health Insurance Marketplace
Stacy Shaw, Community Member

Land Acknowledgement

- Brad Porterfield read the Land Acknowledgement (see October packet for statement). He suggested having a different CAC member read this every month.

Meeting Practices

- MaCayla Arsenault shared some of the changes that will take place during the monthly meetings. These changes are being made to create a warmer and more welcoming meeting atmosphere.

Introductions

- Introductions were made and Brad Porterfield welcomed all attendees.

Public Comment

- Brad welcomed public comment.
- No public comment.

Approval of September Meeting Notes

- One change to the meetings is using the 5 Finger Voting method for making decisions. Brad Porterfield asked the CAC members in attendance to vote on approving the notes from September. All 6 members who attended the meeting voted to approve.

CAC Member Small Group Breakout Session

- Another change to the meetings is to include time for CAC members to get to know each other better. 10 minutes will be set aside at each meeting for CAC members to go into a virtual break out room, answer icebreaker questions or chat about anything they'd like.

Emerging Issues Process Follow Up

- Gwen Jones reviewed the emerging issues spreadsheet and process details.
- Periodontal care was discussed, and Rebecca Donell from Oregon Health Authority provided some follow up from last meetings concerns. The member materials do not have a lot of specific detail. She has reached out to the new Dental Director asking for more specific information on periodontal coverage.
 - **ACTION:** Rebecca Donell reach out to the Dental Director to ask for more specific information on periodontal coverage. Also, set up a meeting with the DCO's along with Kristen Tobias to get information on the 3 dental plans and what are the steps to accessing care through each organization.
 - **ACTION:** Kristen Tobias will check into the ID card listing of the DCO.

Combined Board and CAC Meeting Debrief

- Donna Mills reported to the group some of the ways that the COHC Staff is beginning to put in place all the things that both the BOD and CAC heard in the combined meeting.
 - Emerging Issues –CAC representative to inform the Board on the emerging issues each month.
 - Patient Story – The Board welcomes a CAC member or member of the community to share a story on a monthly basis.

- Combined meetings – The Board and CAC will have some sort of interaction with each other to continue to build the relationships every 4 months (January, May, and September).
 - To continue to evaluate where BOD and CAC are in their relationship, everyone will take the survey again next year.
- CAC members were asked to vote on the changes – 5 finger vote, full support for changes.

Culturally and Linguistically Appropriate Services (CLAS) Standards

- Miguel Herrada from PacificSource presented an update on Health Equity Plan Progress and assessing the Culturally and Linguistically Appropriate Services (CLAS) Standards. He reported on the progress of 2 focus areas, language access and member education and accessibility.
- Miguel opened the discussion to the CAC members for suggestions or advice on improving the member handbook and materials.
- Suggestions included working with the local community colleges, provide more visuals, format for cell phones, and having a quick guide available.

Diversity, Equity, Inclusion & Justice (DEIJ) Statement

- Gwen Jones discussed COHC's commitment to diversity, equity, inclusion and justice in their work culture, grant making, and community partnerships.
- BOD has prioritized formalizing the statement in their strategic plan.
- Look for an email with a survey link to provide your feedback, support, and concerns of the Diversity, Equity, Inclusion & Justice statement.

2021 Community Health Projects Application Review

- All CAC members will receive an email with links to view all 10 Community Health Projects applications. You are asked to submit your feedback by November 8th.

Cover All People

- Brad Porterfield provided information on the Cover All People legislation that passed this year. It addresses a segment of the community, undocumented individuals / immigrants who do not have access to the benefits of OHP. Cover All People will include them for Oregon Health Plan benefits.
- Rebecca Donell from Oregon Health Authority explained that Cover all People will be part of the waiver and will be submitted to the federal government to look over the requests in December 2021 or January 2022. If approved, state will be notified in the spring and go into effect in June or July 2022.



COHC Community Advisory Council

Held virtually via Zoom

November 18, 2021

CAC Members Present:

Brad Porterfield, Chair, Consumer Representative
Elizabeth Schmitt, Consumer Representative
Mandee Seeley, Consumer Representative
Ken Wilhelm, United Way of Central Oregon
Theresa Olander, Consumer Representative
Mayra Benitez, Consumer Representative
Conor Carlsen, Consumer Representative
Linda Johnson, Community Representative

CAC Members Absent:

Larry Kogosvek, Vice Chair, Consumer Representative
Natalie Chavez, Jefferson County Health
Lauren Kustudick, Consumer Representative
Jennifer Little, Klamath County Public Health
Regina Sanchez, Crook County Health Department
Tom Kuhn, Deschutes County Health Services
Elaine Knobbs-Seasholtz, Mosaic Medical

COHC Staff Present:

Donna Mills, Central Oregon Health Council
MaCayla Arsenault, Central Oregon Health Council
Gwen Jones, Central Oregon Health Council
Renee Wirth, Central Oregon Health Council
Kelley Adams, Central Oregon Health Council
Camille Smith, Central Oregon Health Council

Guests Present:

Kristen Tobias, PacificSource
Tricia Wilder, PacificSource
Buffy Hurtado, Tribal Liaison, PacificSource
Rebecca Donell, Oregon Health Authority
Tania Curiel, Oregon Health Authority
Carolyn Black, Oregon Health Insurance Marketplace
Stacy Shaw, Community Member

Land Acknowledgement

- Brad Porterfield read the Land Acknowledgement (see November packet for statement). He suggested having a different CAC member read this every month.

Introductions

- Introductions were made and Brad Porterfield welcomed all attendees.

Public Comment/Patient Story

- Brad welcomed public comment or a patient story.
- Theresa Olander thanked Brad and MaCayla for reading her story at the last Board of Director's meeting. She shared her story with the CAC members.
 - **ACTION:** MaCayla to email the written story to all members.

Vice-Chair Nominations

- Brad Porterfield thanked Larry Kogosvek for his service and time as the CAC Vice-Chair.
- Brad opened and welcomed any nominations.
- Elizabeth Schmitt said that she was interested in the position.
 - **ACTION:** Kelley Adams to email the CAC members about sending in nominations.

Review of Board of Directors and CAC Actions from the Combined Meeting

- Donna Mills reported the next steps of prioritization of the action items from the Combined meeting.
 - There is a plan to have joint meetings every 3-6 months with meaningful, purposeful agenda and dialogue. The first one will be scheduled for January and there will be more to report next time at the December CAC meeting.
 - CAC Members are encouraged to share their own patient stories at monthly Board meetings to focus on Consumer's reality. Donna commended Theresa on her courage and bravery on putting her story out there.
 - Enhance inclusion with increased quantity and quality of interactions, also known as, structure between the CAC and the Board.
- Donna Mills also announced her retirement by June 2022. She expressed that it has been a pleasure serving the CAC and its members.

Approval of October Meeting Notes

- October Meeting Notes were left out of the packet. Members agreed to vote at the next meeting.
 - **ACTION:** Kelley Adams to forward everyone via email the October Meeting Notes.

CAC Member Small Group Breakout Session

- Another change to the meetings is to include time for CAC members to get to know each other better. 10 minutes will be set aside at each meeting for CAC members to go into a virtual break out room, answer icebreaker questions or chat about anything they'd like.

2021 Community Health Projects Final Decision

- MaCayla Arsenault thanked everyone for their time in reviewing and ranking the 10 applications. There were 7 members that filled out the survey. The results from the survey were included in the packet along with summaries of all applications that Kristen Tobias from PacificSource put together.
- MaCayla also announced that there are additional funds from the Quality Incentive Measure that will cover all 10 applications plus \$61k extra.
- Brad Porterfield took a vote to approve funding of all 10 applications. All members in attendance voted to approve.
- Gwen Jones led the discussion on next steps for the additional \$61k and the CAC members voiced their opinions.
- The Health Council staff will pull all the information and suggestions together and present at the December meeting.

Emerging Issues Follow Up

- Brad Porterfield commented that the Periodontal emerging issue was addressed during the patient story.
- Due to lack of time, more follow-up to come in December.

Central Oregon Health Council

Community Advisory Council (CAC)

Chairperson and Vice-Chairperson Shared Roles and Responsibilities

The Chairperson and Vice-Chairperson share many responsibilities. See the Chairperson and Vice-Chairperson sections for responsibilities unique to each role.

Shared Job Description:

- Neutrally facilitate the identification, discussion, and ranking of issues of concern to members.
- Plan the meetings of the CAC to meet the minimum requirements of the most current CCO contract.
- Facilitate follow up discussions and votes held by email.

Shared Requirements of Prior and Current Service:

- Must be receiving benefits from PacificSource Community Solutions Oregon Health Plan or be a guardian of a dependent currently receiving benefits.
- Must have six months to one year of experience serving on the CAC before serving as a Chairperson or Vice-Chairperson.
- One term of service is two years. Can serve for up to two consecutive terms for a total of four years.

Shared Expectations of Personal and Professional Characteristics:

- Ability to listen, analyze, think strategically and creatively, and work well with people both one on one and in a group.
- Ability to consider multiple viewpoints on sensitive issues and communicate the Community Advisory Council's perspective effectively with members and stakeholders.
- Ability to prepare for, attend, and participate in meetings and meeting agenda planning (including conference calls).
- Willingness to ask questions when you need more information, to take responsibility, to follow through on given assignments, and to evaluate oneself.
- Willingness to develop certain skills needed for the role if you do not already possess them.
- Commitment to honesty, sensitivity, and tolerance of differing views; a friendly, responsive, and patient approach; personal integrity; a developed sense of values; and concern for the CAC's development.
- Ability to facilitate discussions face-to-face and through electronic means among diverse partners.

Shared Primary Responsibilities:

- Attend and participate in all meetings of the Community Advisory Council (except during vacations and emergencies).
- Be informed about the CCO and COHC's mission, vision, policies.
- Work together with the Board of Directors Chairperson to create yearly CAC workplan.
- Get familiar with and review CAC agendas and supporting materials prior to meetings.
- Prepare and present information at other meetings on behalf of the CAC as needed.
- Support the development of processes for meaningful partnership between the CAC and Board of Directors.
- Support the coordination of the yearly joint meeting between CAC and the Board of Directors.
- Initiate and facilitate communications among the members of the Community Advisory Council.
- Work with staff and current CAC members to develop a new CAC member recruitment plan and assist with recruiting activities.

Shared Resources and Support:

- A stipend and internet (or mileage reimbursement) is offered for meetings.
- COHC staff support is available for work related to the CAC.
- Opportunity to participate in yearly Oregon CCO conference.
- Oregon Health Authority CAC Support:
 - <https://www.oregon.gov/oha/OEI/Pages/cac.aspx>
 - <https://www.oregon.gov/oha/HSD/OHP/Pages/CCO-Community-Advisory-Councils.aspx>

Chairperson Roles & Responsibilities

Beyond the shared responsibilities above, the CAC Chairperson has individual responsibilities they must fulfill.

Chairperson Additional Job Requirements

- Serve on the COHC Board of Directors as a full member (see Board Policy Book for complete description).
- Inform the Board of Directors about any recommendations from the CAC.

Chairperson Additional Responsibilities

- Attend and participate in all meetings of the Board of Directors (except during vacations and emergencies).
- Draw attention to priorities in the Board of Directors' Strategic Plan to the CAC.

- Serve as the liaison between the Community Advisory Council and the Board of Directors. Prepare and present information at both meetings on behalf of each group, including feedback about performance of the Oregon Health Plan (OHP) and how the CAC is addressing CCO contract requirements.

Chairperson Time Commitment:

- Anticipate a minimum of 5 hours a month for meetings plus emails, work outside of meetings, and additional time for initial learning and orientation.

Vice-Chairperson Roles and Responsibilities

Beyond the shared responsibilities above, the CAC Vice-Chairperson has individual responsibilities they must fulfill.

Vice-Chairperson Roles & Responsibilities

The CAC Vice-Chairperson will not be called upon to stand in for the CAC Chairperson at the COHC Board of Directors. They may attend as a guest but will not be asked to join the Board of Directors in the absence of the CAC Chairperson.

Vice-Chairperson Additional Job Requirements

- Step in to fill the CAC Chairperson role when the Chairperson is absent.

Vice-Chairperson Time Commitment:

- Anticipate a minimum of 3 hours a month for meetings plus emails, work outside of meetings and additional time for initial learning and orientation.

Organization Name	Project Name	Budget	DEI	SDOH	Tribal Service	Descr.	System Barriers	Rural	TOTAL	Amt. Requested	Yrs	Amt per year	Warm Springs	Northern Kl.	Jefferson	Crook	Deschutes
Thrive Central Oregon	Thrive Central Oregon- Housing Support	4.0	5.0	4.0	3.5	4.0	4.0	4.0	28.5	\$ 76,259	1	76,259.00	x		x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Thrive-Central-Oregon-Housing-Support-Packet.pdf Thrive services target individuals and families living in poverty. Recognizing that access to services is a primary reason individuals are unable to connect to resources, Thrive is located where people already are, utilizing meal sites and public spaces, like libraries, to come in from the outdoors. Funding from COHC would provide a full-time Community Outreach Advocate to increase wrap around supports to the households that are receiving assistance in Jefferson, Deschutes and Crook Counties, to better learn how to meet their housing and financial needs in the future.																	
Central Oregon Environmental Center	Garden for Every School - Redmond	4.5	4.5	4.0	3.3	4.5	3.5	3.5	27.8	\$ 11,600	1	11,600.00	x		x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Garden-for-Every-School-RedmondPacket.pdf The Garden for Every School program increases fruit and vegetable consumption among youth with garden-based lessons and fruit and vegetable tastings. Research shows that kids who grow fruits and vegetables in a garden are more likely to eat fruits and vegetables. Unfortunately, research also shows that schools need added resources to create and sustain gardens for this purpose. In 2022 we hope to add value and improve programs in three ways: field trips for Redmond students, listening session with garden educators, and increasing the available funds for grant awards. *Has applied for Improving Youth Physical Activity (9/1/21) and the Impact Incentive Fund (10/19/21)																	
NeighborImpact	Mobile Food Pantry Coordinator	3.4	4.7	4.0	1.8	4.7	4.7	4.3	27.6	\$ 80,000	10	8,000.00	x		x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Mobile-Food-Pantry-CoordinatorPacket.pdf NeighborImpact's Food Program has designed direct food distribution events as permanent services with no end dates. We expand upon all of our projects to address identified, current and growing needs. This proposed expansion, which creates a new position, results from demand for our Mobile Food Pantry. The Mobile Food Pantry has grown to the point that it requires dedicated staff. It holds great promise for replication throughout the region. NeighborImpact's Food Program chose to create a new position of necessity. Providing food to underserved residents is always critical, and food insecurity has surged. We must respond with dedicated staff for this vital service. *Has applied for the Impact Incentive Fund (10/15/21)																	
Treehouse Therapies Associates	Physical, Occupational and Behavioral Health Therapeutic Group Services	3.5	4.5	4.0	3.5	4.0	4.5	3.5	27.5	\$ 45,000	1	45,000.00	x		x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Physical-Occupational-and-Behavioral-Health-Therapeutic-Group-ServicesPacket.pdf Create group therapy services to address health inequities for children with disabilities and children in the foster care system in several ways. First, this project will increase access to multiple therapies at one time, for clients currently in one-on-one therapy and those still on our waitlist. Second, we provide compassionate, comprehensive, and affordable therapy programs regardless of insurance or financial limitations. Third, group therapy services will direct resources to children with diagnoses and family situations that usually cause them to be marginalized and overlooked in our community.																	
Central Oregon Community College	Paving the Path to Healthier Communities	4.0	4.2	3.8	2.4	3.8	4.2	4.2	26.6	\$ 65,955	2	32,977.50	x	x	x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Paving-the-Path-to-Healthier-CommunitiesPacket.pdf This project will be based in the COCC Public Health Program and will align with its recently approved Oregon Health Authority CHW training. The CHW training will provide college transferable credits with a focus on the needs of Central Oregon communities. The project will address health inequities by 1) strengthening the community health worker pipeline and 2) empowering individual voices to address concerns and seek solutions in their respective communities through Photovoice and Poster projects.																	

Organization Name	Project Name	Budget	DEI	SDOH	Tribal Service	Descr.	System Barriers	Rural	TOTAL	Amt. Requested	Yrs	Amt per year	Warm Springs	Northern Kl.	Jefferson	Crook	Deschutes
Central Oregon Community College	Connecting COCC students in need to basic resources	2.3	5.0	3.5	3.0	4.5	4.0	3.5	25.8	\$ 51,470	1	51,470.00	x	x	x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Connecting-COCC-students-in-need-to-basic-resourcesPacket.pdf To reduce health inequities, this project will fund a coordinator from Thrive Central Oregon to help COCC students get access to subsidized housing, subsidized healthcare, food, emergency shelter, clothing, emergency funding sources, and other services. Connecting COCC students to an on-campus or remotely accessed Thrive coordinator is an excellent opportunity to connect at-risk students to vital resources at an easy-to-access, public location. They will rotate among the four COCC campuses in Bend, Redmond, Madras, and Prineville, and will also be available for online meetings.																	
Lifetime Vision Care	Vision Learning and Vision Success	3.3	4.5	4.0	2.3	3.5	3.5	3.5	24.5	\$ 7,200	1	7,200.00	x	x	x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Vision-Learning-and-Vision-SuccessPacket.pdf Our project will provide resources to patients in need so they may function at the highest level within their education or jobs. The barriers that patients face with access to our resources include mainly access to health care services. Typically these patients may even have access to OHP however the services may still be not covered. Lifetime will provide access to health care services by allowing patients who do not have insurance coverage to receive benefits. Patients will have quality of education and job training by supporting best vision and vision function to perform at optimal levels of education and jobs. Improve language and literacy by seeing optimally to improve visual function such as reading and comprehension.																	
New Priorities Family Services	Funding Assistance to Attract and Retain Skilled Counselors	2.7	4.7	3.0	2.1	3.6	3.0	2.7	21.8	\$ 80,000	1	80,000.00	x	x	x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Funding-Assistance-to-Attract-and-Retain-Skilled-CounselorsPacket.pdf Our project involves providing the training, wages, and benefits to hire and retain counselors that are qualified to serve Central Oregon clients. For the first time since NPFS opened its doors in 2008, we have a waiting list of over 40 clients/families and have had to recently stop accepting new clients for our waiting list. This is against our mission. With this project we can hire additional counselors and a mental health supervisor. This would allow us to reduce the waiting list and be able to accept the ever increase needs of the incoming clients.																	
Habitat for Humanity La Pine Sunriver	Housing is Health: Health and Safety Repairs and Well Rescue in La Pine	2.3	5.0	1.8	0.3	3.3	3.0	5.0	20.5	\$ 42,000	1	42,000.00		x			
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Housing-is-Health-Health-and-Safety-Repairs-and-Well-Rescue-in-La-PinePacket.pdf Habitat La Pine Sunriver's Critical Home Repairs and Health Data Program provides key health and safety repairs, ensuring that South County and North Klamath County households living below the poverty level can retain access to safe and stable housing and make needed repairs to improve accessibility and safety in order to age in place. Habitat will identify 15-20 homeowners/households with health needs requiring health and safety repairs, and 3-5 households requiring costly well repairs, as part of a larger partnership with regional health care/emergency providers (La Pine Community Health, St. Charles, Red Cross)) to design home repairs to meet specific health and mobility needs, and to engage vulnerable adults and families in ongoing support.																	
The 1017 Project	Beef for food banks	1.2	4.6	3.4	2.2	3.0	3.0	3.0	20.4	\$ 36,000	1	36,000.00	x	x	x	x	x
https://cohealthcouncil.org/wp/apps/uploads/2021/08/Beef-for-Food-Banks-in-Central-OregonPacket.pdf The 1017 Project is a one-of-a-kind non-profit that has donated 80+ tons of beef to over 40 food banks throughout Central Oregon since 2014. The strategic partnerships that The 1017 Project has cultivated with food banks, shelters, local schools and USDA butchers has fostered a complete farm to family protein delivery system that delivers fresh, high quality beef to central Oregon's most vulnerable citizens. Virtually bypassing all of the barriers to equitable nutrition that a foodinsecure person might face. Many of the food-insecure families that receive beef from The 1017 Project live more than 10 miles from a population center of more than 40,000 people. The communities of LaPine, Christmas Valley, Prineville, Madras, Mitchell and Sisters all have food banks or pantries that distribute beef from The 1017 Project.																	

News Release

Date: Dec. 8, 2021

Contact: Jake Sunderland, Jake.Sunderland@dhsosha.state.or.us, and Communications.DHS@dhsosha.state.or.us

Oregon Department of Human Services taking steps to meet historic demand for supports and services

Need to know:

- Oregonians are applying for health and human services assistance at historic levels
- Approximately 1.4 million Oregonians are receiving these supports and services from ODHS and OHA
- 38% of applications for benefits are processed within two business days
- About 31,000 applications are experiencing delays past their processing deadline

(Salem) – As Oregonians continue to experience economic hardship due to the COVID-19 pandemic, they are applying for medical, food, cash, and child care assistance at historic levels.

The Oregon Department of Human Services (ODHS) is taking a variety of steps to meet this demand. These steps include increasing hiring efforts to fill existing positions, hiring contract workers, and temporarily shifting existing ODHS and Oregon Health Authority (OHA) workers to process eligibility applications.

These short-term strategies will help ODHS process applications and reduce the backlog while it works with the Oregon Legislature to increase front-line staffing levels to meet this historic increase in need.

ODHS and the OHA collectively serve more than 1.4 million Oregonians through the ONE integrated eligibility system. The [ONE system](#) fully launched in early 2021 and allows Oregonians to, for the first time, apply for medical, food, cash, and child care assistance in one place.

Since the beginning of the COVID-19 pandemic:

- Oregon Health Plan (OHP) enrollment has increased by approximately 270,000 Oregonians, or 26%.
- Enrollment in Supplemental Nutrition Assistance Program (SNAP) has increased by approximately 60,000 Oregonians, or 10%.

- Enrollment in Employment Related Day Care (ERDC) has increased by approximately 1,900 households, or 25%.

This increase in need created by the COVID-19 pandemic has exceeded the State's ability to serve Oregonians with its current staff, making it difficult to process applications in the timely manner Oregonians may be accustomed to. As a result, many Oregonians are experiencing delays in getting their applications processed and extended call wait-times.

Approximately 38% of applications for benefits are processed within two business days, some Oregonians however are experiencing delays.

As of Dec. 8, of the approximately 72,000 pending applications in the ONE system, about 31,000 were open past their processing deadline. Note: Deadlines vary depending on the benefit, from 24 hours to 45 days. Call wait times average up to 62 minutes, depending on the type of call.

"Coming into the COVID-19 pandemic life was difficult for many of our clients, especially people of color, Oregon Tribal Nations, people with disabilities and older adults," said ODHS Director Fariborz Pakseresht. "We know that delays in processing applications for supports and services can cause more hardship and trauma for the people we serve. That is why we are committed to doing everything we can to process applications and the backlog in cases as quickly as possible."

ODHS is preparing a staffing request for the February 2022 legislative session, specifically to address the increase in OHP caseloads. The national standard for funding of eligibility work is a ratio of 1 eligibility worker to 800 cases. With the recent increase in OHP cases, Oregon is currently operating at 1 eligibility worker to more than 1,600 cases.

ODHS also is sharing guidance for Oregonians who may need to apply for benefits or who may be waiting to hear back from the state about the status of their benefits.

ODHS offers these tips to Oregonians to help them as they apply for benefits:

- Before you begin an application, compile all documents you think you might need ahead of time. This can prevent your application from being held up and taking additional time. These documents could include: Identification, proof of income, social security numbers or other documents to determine eligibility for anyone in the household who is applying for benefits.
- If you have already submitted an online, in person or over the phone application you do not need to reapply. ODHS has your application and will process it as quickly as possible.
- If you applied through the ONE online application, you can track your application's status using the same system you used to apply. Log in to

one.oregon.gov to start tracking. Note: This website is accessible on computers, tablets and phones, but it is not optimized for mobile viewing.

- If you prefer to apply over the phone, the ONE Customer Service Center is open Monday-Friday 7 a.m. to 6 p.m. Currently hold times are lowest in the morning from 7 until 8 a.m.
- If you are only applying for medical benefits, you can get free application help from an OHP-Certified Community Partner. Community Partners are trained and certified to help clients understand and use their health coverage options, including helping them complete eligibility and enrollment forms. Find a Community Partner at <https://healthcare.oregon.gov/Pages/find-help.aspx>

Resources to help meet basic needs

- Find a food pantry: foodfinder.oregonfoodbank.org
- Dial 2-1-1, or text your zip code to 898-211
- www.211info.org
- [Aging and Disability Resource Connection](#)
- [Oregon Department of Human Services Resources](#)

Oregonians in need can apply for benefits, including SNAP, child care, cash assistance and Medicaid. Learn more at <https://govstatus.egov.com/or-dhs-benefits>. For local resources in your area, such as food or shelter, please call 2-1-1 or reach out to the state's Aging and Disability Resource Connection (ADRC) at 1-855-ORE-ADRC or 1-855-673-2372.

Visit https://oregon.wd5.myworkdayjobs.com/SOR_External_Career_Site to find job opportunities with the Oregon Department of Human Services.

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Tips for applying for benefits

Oregonian residents are applying for medical, food, cash, and childcare assistance at near historic levels. Here are some tips for Oregonians who may need to apply for benefits or who may be waiting to hear back from the state about the status of their benefits.



Collect documents ahead of time

Before you begin an application, compile all documents you think you might need ahead of time. This can prevent your application from being delayed and taking additional time. These documents could include: Identification, proof of income, social security numbers or other documents to determine eligibility for anyone in the household who is applying for benefits.



Track your online application status at **ONE.OREGON.GOV**

If you applied through the ONE online application, you can track your application's status using the same system you used to apply. Log in to <https://one.oregon.gov/> to start tracking. Note: This website is accessible on computers, tablets and phones, but it is not optimized for mobile viewing.



Submitted an application? No need to reapply

If you have already submitted an online, in person or over the phone application you do not need to reapply. ODHS has your application and will process it as quickly as possible.



Lowest wait times are in the morning

If you prefer to apply over the phone, the ONE Customer Service Center is open Monday-Friday 7 a.m. to 6 p.m. Currently hold times are lowest in the morning from 7 until 8 a.m.

Consejos para solicitar beneficios

Los habitantes de Oregon están solicitando asistencia con alimentos, efectivo, servicios médicos y con el cuidado de niños en niveles casi históricos. A continuación, ofrecemos algunos consejos para los habitantes de Oregon que pueden necesitar beneficios o que estén esperando recibir noticias sobre el estado de sus beneficios.



Recoger sus documentos con anticipación

Antes de comenzar una solicitud, junte todos los documentos que crea que puede necesitar. Hacer esto puede evitar que su solicitud se retrase y se lleve más tiempo. Estos documentos podrían incluir: Identificación, comprobante de ingresos, números de seguro social y otros documentos para determinar la elegibilidad de cualquier miembro de su hogar que solicite beneficios.



Revise el estatus de su solicitud en línea en ONE.OREGON.GOV

Si presentó su solicitud a través del sistema ONE, puede ver el estatus de su solicitud utilizando ese mismo sistema. Inicie sesión en <https://one.oregon.gov/> y seleccione español en la parte derecha superior de la pantalla. Nota: Puede entrar a este sitio web en computadoras, tabletas y teléfonos, pero no está optimizado para verse en teléfonos.



¿Ya envió una solicitud?

No es necesario que vuelva a aplicar.

Si ya ha enviado una solicitud en línea, en persona o por teléfono, no es necesario que vuelva a presentar la solicitud. El Departamento de Servicios Humanos de Oregon tiene su solicitud y la procesará lo más rápido posible.



Los tiempos de espera más bajos son en la mañana.

Si prefiere presentar su solicitud por teléfono, el Centro de Servicio al Cliente del Sistema ONE está abierto de lunes a viernes de 7 a.m. a 6 p.m. Actualmente, los tiempos de espera son más bajos por la mañana de las 7 hasta las 8 a.m.