



## Operations Council

December 5, 2024 11:30 am to 1:00 pm

### Virtual Meeting

<https://us02web.zoom.us/j/82062544065pwd=ZHJvd2JuZUJyQ0wvQTNHaHczaVpYZz09>

1.669.900.6833

Meeting ID: 820 6254

4065 Passcode: 787646

11:30 - 11:40	Welcome: Introductions & brief announcements
11:40 - 11:45	Grounding in our shared purpose
11:45-1:00	Action Planning Workshop: developing your work plan-creative access and upstream prevention for children's mental health.

## Land Acknowledgment

*We recognize and acknowledge the indigenous land on 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 that 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."*

## COHC Operations Council

Virtual Meeting

# Operations Council

## Guiding Principles

### **Shared Focus**

We come together to improve the health and well-being of individuals living in various and diverse communities throughout Central Oregon region. We develop agreed-upon actions to solve the issues and keep the needs of our communities as the main focus.

### **Shared Metrics**

We measure progress, process, and outcomes through a shared lens. Success is defined by the issue, those most impacted, and those closest to the work.

### **Partner with Priority Populations**

The individuals living in our diverse Central Oregon communities are the center of our work. We make every effort to include people from every part of the region in our discussions, processes, and decisions.

### **Collaborate to Solve Complex Issues**

Inviting diverse perspectives from throughout the Central Oregon region deepens our shared understanding of complex issues and propels us toward better progress and outcomes. We practice frequent, structured, open communication to build trust, assure shared objectives, and create common motivation. We respect the privacy and sensitivity of information partners share.

### **Coordinate Collective Efforts**

We are made up of diverse partner organizations and individuals with unique strengths, skills, and resources. We coordinate our efforts and use our unique strengths and skills to meet our shared goals.

### **Learn and Adapt Together**

We embrace shared learning and a growth mindset. We create a space that allows for mistakes, failures, second chances, and a celebration of brave attempts. We adjust and apply our learnings to the complex and changing landscape of health and well-being in Central Oregon.



## **CHARTER: Central Oregon Health Council Operations Council**

The Central Oregon Health Council (COHC) was created to improve the well-being of all residents across Central Oregon.

The Operations Council serves as a place to coordinate collective efforts among the Central Oregon Health Council's community partners, committees, workgroups, community members and the Board of Directors.

The Operations Council will address and actively support:

- regional efforts advancing the shared mission and vision of the Central Oregon Health Council
- regional issues escalated from the committees, workgroups, and community partners
- broad, cross-sectoral, regional initiatives

Partners include:

- Organizational leaders who have delegated authority to make operational decisions
- Impacted community members and leaders who have influence to impact change

Partners Roles and Responsibilities:

- Communicate information within their organization, partner organizations and communities
- Provide individual, community and organizational support of agreed upon initiatives and workplans

### ***Definitions:***

#### **Partner, Community Partner, Partner Organization. Terms may be interchanged.**

Individuals and organizations who purposefully work together within the Central Oregon Health Council (COHC) structure to share information, resources, services and other types of support to understand and address the regional priorities identified by communities throughout the Central Oregon region.

**Community** can be defined by describing the social and political networks that link individuals, community organizations, and leaders. Some communities fall within geographically mapped physical



### **What has the Operations Council been up to?**

Across August and September, a small group of interested members of the Operations Council met to discuss how the council could collaborate on a plan to positively impact mental health care for children in our region.

Through a structured consensus-building process, the group worked to find answers to the following question: How can we work together, with our diverse resources and sectors, to remove barriers and improve access to mental health supports for children?

### **Did they answer that question?**

Five key themes emerged from their answers:

1. Develop a Reliable tool to get child-friendly resources
2. Expand people and places to effectively serve kids
3. Center Children & Families in the Design of Services
4. Expand doorways of access beyond mental health settings
5. Work Upstream to Address Root Causes

A detailed list of examples that fell within each theme can be accessed here:

[☰ Mental Health Supports for Children\\_Detailed List](#)

### **What else was discussed?**

- This list of ideas looks like the lists generated ten years ago. Can the Operations Council do something differently to have an impact today?
  - Historically, many have tried to invest first in the most expensive and hardest-to-move components, such as workforce and facility development.
- We should explore collaborations with folks already “doing the work” on themes 1-3.
- We may need to invite others to support this work, even temporarily, to achieve our goals.

### **What are we recommending?**

- We recommend the Operations Council focus on innovative and preventative measures to address mental health issues for children.
  - We want to focus on creative access to positive mental health supports
  - We want to be focused in our actions; by narrowing our scope, we will be

more likely to succeed.

- We want to focus on upstream prevention and addressing root causes.

**What is next?**

- Interested Operations Council members would collaborate to develop a one—to two-year action plan focused on creative access and upstream prevention for children’s mental health.



**Summary:** The following document outlines the results of a consensus workshop conducted on 8/22/24 and 9/26/24. During these sessions, participants addressed how the Operations Council could answer the following question:

How can we work together, with our diverse resources and sectors, to remove barriers and improve access to mental health supports for children?

The bold text indicates the key “theme” of the actions identified. The bulleted items are examples of activities the group identified.

#### **Develop a reliable tool to get child-friendly resources**

- Centralized scheduling and functional referral pathways
- Regional database for competent providers by payor
  - *Key to define competency vs. competent - these are not the same. What would the criteria be?*
- Universal database for ages, services etc
  - *There are many people already doing this; it's just siloed historically. A whole group of people at Pacific Source are working toward this.*
- Map out where screenings occur and share it broadly
- Elevate learnings to internal stakeholders
- Share expertise from your agencies' perspective

#### **Expand people and places to effectively serve kids**

- Workforce investment, especially agency
- Train providers and non-clinical to expand access
- Psychology internship
- Value based payment, incentivize providers who care for youth
- Roll up your sleeves, increase comfort level. Be flexible!
  - *Even if you're not working in the mental health field, what work can you do from where you are*
- Increase workforce
- Invest in acute care infrastructure
  - *Does this mean right now or upstream, consensus was a right now problem, not upstream?*

- Inpatient support with pediatric-friendly environments

### **Expand doorways of access beyond mental health settings**

- Expand doorways of access beyond healthcare settings
- Embed services where kids already are
- Training non-clinical programming about clinical need
  - *Ex: working with law enforcement*
- Train to allow mental health screenings in dental offices
  - *This is already happening in another CCO region, there may be existing learnings to pull from*

### **Center Children & Families in the Design of Services**

- Listen to expertise, those in the room & with lived experience
- Center children in the design and discussion of services
- Seek information from unique sources
  - draw from personal experiences, family experiences, school reports, ect.

### **Work Upstream to Address Root Causes**

- Prevention & lifestyle optimization focus
- Work upstream - identify root causes