Building CommunityCapacity in Oregon

Everything Matters for Babies! September 23, 2014

PRESENTED BY
+DAVID MANDELL
[Director of Policy, ELD/ODE]
+DANA HARGUNANI
[Child Health Director, OHA]

Triple Aim: A new vision for Oregon.

- 1 Better health.
- 2 Better care.
- 3 Lower costs.

Coordinated Care Model

Benefits and services are integrated and coordinated

One global budget that grows at a fixed rate Metrics: standards for safe and effective care

Local accountability for health and budget

Local flexibility

Coordinated Care Organizations (CCOs): local networks of all types of health care providers working together to deliver care for Oregon Health Plan (Medicaid) clients.

Early Learning System Goals

- ENSURE ALL CHILDREN ARE READY FOR KINDERGARTEN & READING AT GRADE-LEVEL IN 3rd GRADE
- 2 CHILDREN RAISED IN STABLE AND ATTACHED FAMILIES

INTEGRATE RESOURCES AND SERVICES STATEWIDE

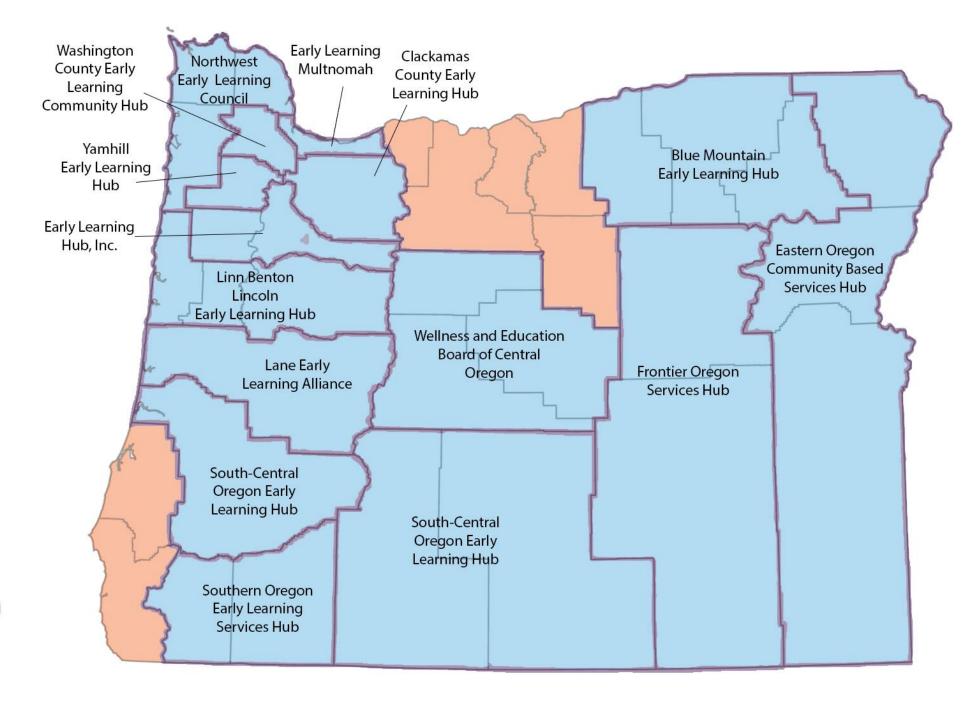
The Early Learning Division, which manages the day-to-day efforts to achieve the system goals, is overseen by the Early Learning Council, a 17-member public policy board appointed by the Governor.

Early Learning Hubs

Key

Early Learning Hub

Not Awarded - TA Being Provided



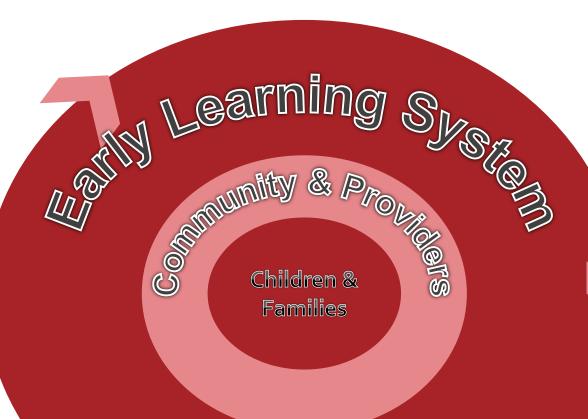
Oregon Early Learning Division: Our Work

Systems Coordination: Creating an Aligned & Effective System

- Early Learning Hubs
- OEIB Equity Lens
- Race to the Top

Ready for Kindergarten &
Reading at Grade Level in 3rd
Grade: Success in School &
Beyond

- Oregon Pre-Kindergarten
- Head Start
- Kindergarten Partnership & Innovation Grant
- Early Literacy Grant



Stable and Attached
Families: Getting Children &
Families the Supports They
Need

- Child Care Licensing & Subsidy
 Quality Rating and Improvement System (QRIS) & quality early learning environments
 - Relief Nurseries
- Home Visiting



Joint ELC/OHPB Committee

Chartered by the Early Learning Council and the Oregon Health Policy Board in 2012

•Focus:

- Assess areas for potential alignment and/or integration across health and early learning
- Build collective impact across OR's transformation efforts
- Provide opportunities to spread knowledge and best practices across CCOs and Hubs
- Address barriers to community level coordination and capacity-building
- Develop measures for shared success

Example: Building Community Capacity across Health and Early Learning

- CCOs required to complete a community needs assessment and a Community Health Improvement Plan (CHIP) to drive their work
- Example: Eastern Oregon Coordinated Care Organization
 - Largest service area including 12 counties (10 are considered "frontier")
 - Needs assessment: quantitative/qualitative data
 - Local CHIPS developed for each county
 - Regional prioritization informed final CCO CHIP
 - Ranking of priorities: Early Childhood #1
 - **Goal:** improve health outcomes for children ages o-5 through integrated services
 - **Strategy:** establish regular communication and strategic planning with each Hub in region; increase developmental screening & prenatal care
 - Evidence: Collective impact

Thank you.

david.p.mandell@state.or.us

dana.hargunani@state.or.us