



CURRY COUNTY
COMMUNITY HEALTH
IMPROVEMENT PLAN
PROGRESS REPORT

July 2020 through June 2021

CURRY CHP PROGRESS REPORT – JULY 2020 THROUGH JUNE 2021

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Introduction to the Curry CHP Progress Report

Foundations for Progress: The *2019-2022 Curry County Collaborative Community Health Improvement Plan* (CHP) is a community level plan that aims to improve the health of individuals, families and the community at-large. The plan is community informed and focused on making meaningful changes through collective impact across many sectors and organizations. It is intended to address significant issues that influence overall health in Curry County.

The CHP is based on data reviewed, collected and analyzed from the *2018 Community Health Assessment* (CHA) and meets the mandates of several participating organizations. The 2018 CHA was led by a large collaborative of many organizations from multiple sectors, several community members, and consumers. The Curry CHA Steering Committee also led and created the 2019-2022 CHP. They reviewed the CHA, set planning values and vision, gathered and reviewed community input and prioritized three broad focus areas.

Vision, Values and Priorities: The CHA process followed a modified Mobilizing for Action through Planning and Partnerships (MAPP) model and continued this national best practice for health planning as the collaborative moved into the CHP process. The CHP process was rooted in the planning vision and values established in the beginning of the CHA:

- We believe health is very connected to the social determinants of health such as education, employment, housing and food;
- We believe in building on our strengths, not only looking at barriers and needs in our assessment process;
- We believe it is important to focus on health equity and address inequities data when we are able to while also remembering our rural county has inequities to urban counties in the state;
- We believe there is value in building on previous assessment work while not duplicating effort;
- We recognize that this assessment cannot focus on all things related to health but it does identify areas we can impact;
- We believe that the process we go through engages consumers of health services and incorporates the voices of those we serve;
- We believe addressing poverty as a root cause of poor health is important; and
- We believe reducing child abuse and chronic stress in families improves health.

We have sought Collective Impact on the three community-identified Focus Areas related to health and well-being:

- **Health Systems & Capacity:** Behavioral Health, Oral Health, and Access to Healthcare
- **Health Equity:** Housing & Homelessness and Food & Nutrition
- **Communities & Families:** Youth & Seniors and Workforce & Economic Development

Organizing for Success: The Steering Committee assessed integration of services across domains such as physical, behavioral, and oral health and identified what programs and services were going well in the community and opportunities for improvement in each of the three broad focus areas. The resulting document is intentionally broad as it is intended to be a map for the collaborative to continue to support local efforts in the focus areas. The CHP document also presents opportunities for individual organizations to incorporate their individual CHPs and CHP activities into the larger community level CHP.

The Curry CHA collaborative began the CHP process in August 2018. Partners of the collaborative included the local hospital, the local federally qualified health centers, public health, early learning and child/youth focused groups, both local Coordinated Care Organizations (CCOs), tribal representation, dental organizations, education, behavioral health and addictions services and many other vital health and human service organizations

Overview of Progress Report: Much like our foundations of the CHA and CHP, this Progress Report has been built on the collaborative efforts of countless community partners. This report has been completed through a partnership of team members at Advanced Health and AllCare Health, realizing a collaborative CHP requires a collaborative CHP report.

For each Priority Area of the CHP, we have worked to include information on:

- **Priority Area Overview:** A summary of high-level findings from the CHA and CHP, connections to *Healthier Together Oregon*, high-level strategies, as well as baseline vs. current data (as available);
- **Changes in Community:** Summary details on shifts in local and regional health priorities, goals, strategies, resources and/or assets;
- **Contributing Community Partners:** A list of community partners that have contributed to progress;
- **Efforts and Progress Made:** Overview descriptions of projects or coordination that have moved forward during the reporting period that highlight examples of community collaboration;
- **Stakeholder Feedback:** Direct reflections from local and regional community partners about their engagement in and work on CHP Priority Areas or progress made through projects and coordination efforts;
- **Challenges and Barriers:** Summary of the major challenges and barriers experienced during the reporting period that affected our community's ability to progress; and

- **On the Horizon:** Overview of opportunities and innovations on the horizon that we believe will positively impact this important work.

This process has reminded us that improving community health is a massive undertaking and that meaningful and measurable systemic change takes time to accomplish. It has also provided us the opportunity to reflect on the remarkable events that took place during the reporting period. Through this, we have been able to celebrate how our history of local and regional collaboration prepared us to work together to support communities as they navigated the COVID-19 pandemic.

Pulling together this report has also provided us with an insightful view of where we are thriving in this work and where we might make improvements in the future to ensure that each component needed to ensure effective Collective Impact is addressed well. The beauty of this past year is that it has magnified the urgency of this work. Ideas and innovations that have long been dreamed of found their roots and we moved quickly from strategy to tactics and action. As partners, Advanced Health and AllCare look forward to moving into this future work with renewed intention to hold the community at the center of our work.

RESOURCE DOCUMENTS:

[Curry County Community Health Assessment](#)

[Curry County Community Health Improvement Plan 2019](#)

Curry County CHP Website: <https://www.currycountyCHIP.org/>

PRIORITY AREA 1: HEALTH SYSTEMS & CAPACITY – BEHAVIORAL HEALTH & ADDICTIONS

[Curry County Community Health Assessment](#) - pp. 47-62

[Curry County Community Health Improvement Plan 2019](#) - pp. 6-7

Priority Area Overview

Behavioral Health, depression, suicide and substance use were top concerns in the 2018 *Community Health Assessment (CHA)* focus groups and surveys of community members. Notable data points in the CHA related to behavioral health and addictions include: Youth in Curry County have higher levels of suicidal ideation than the state average; the suicide rate for all ages has been on an upward trend since 2000 and is considerably higher than the state rate; Curry County has higher rates of binge drinking, opioid prescribing rates, and increased illicit drug use compared to state rates; and, tobacco use in Curry County is higher than neighboring counties and the state.

The regional Workgroup collaborating on this Priority Area has focused on improving access to mental health and addiction services across Curry County. This work has been built on the mutual understanding that there are not enough providers to meet the needs of all citizens in the rural communities of Curry County.

This regional Priority Area aligns with the *Healthier Together Oregon 2020-2024 SHIP* priority area of Behavioral Health and has the potential to positively impact issues related to mental health and substance use.

High level strategies developed by the community to impact this Priority Area included:

Behavioral Health Priority Area Goals
<p>Goal 1: Improve access, integration and delivery of behavioral health and addiction services; and,</p> <p>Goal 2: Support behavioral health and addiction prevention services.</p>

Key Data Point	Baseline Data	Current Data
8 th graders who seriously considered suicide	2017: 21.1%	2019: 15.7% (better)

SOURCE: Oregon Healthy Teens Vital Statistics

Changes in Community

Supporting efforts to mitigate trauma and increase resilience are priorities in the Curry County 2019 – 2022 Community Health Improvement Plan. The COVID-19 pandemic, resulting state of emergency declaration, and protective orders issued in 2020 have negatively impacted many of the indicators of behavioral health as they relate to social complexity and adverse childhood experiences (ACEs). There is still much we do not know about the long-term effects of the pandemic, but we continue to hear from our Community Advisory Councils, provider network, staff, care coordinators and case managers, and community partners that findings ways to mitigate and prevent trauma and build community resilience is a behavioral health priority for us all. Therefore, we have placed an even greater emphasis on supporting trauma-informed work in Curry County.

In anticipation of the behavioral health landscape changes in 2021, with Curry Public Health oversight transitioning back to the Oregon Health Authority, we have contracted with available local behavioral health providers in Curry County, expanded telehealth opportunities and are bringing on additional providers and services that are accessible to our members.

Contributing Community Partners

The Curry CHP Coalition's Behavioral Health & Addictions Workgroup partners are invested in normalizing the use of mental health services, educating the community on the long-term impact of the ACEs and seeing their community make strides towards mental wellness. Contributing partners are listed at the end of this report.

Efforts and Progress Made

The Curry CHP Behavioral Health & Addictions workgroup is working to destigmatize mental illness, increase suicide awareness, create a common understanding of Adverse Childhood Experiences (ACEs), and educate the Curry community about available resources. Free trauma-informed trainings, as well as suicide prevention trainings, have been provided to the community at large, as well as to partners, such as Rotary Club, law enforcement, medical providers, non-profits and the schools. Education about the mental health and addiction services offered throughout the county, and how to best access those services have also been provided during the training. We have also shared information with stakeholders and the community at large about other training opportunities available in Coos and Curry counties.

Suicide Prevention and Awareness Council

In December of 2019, the Suicide Prevention and Awareness Council was formed under Curry County and has been hard at work, distributing thousands of 'Are You Okay?' 24/7

crisis text line 741741 wallet cards, a county-wide distribution of suicide prevention and resource magazine and brochures. They also distributed a flyer on "How to have a conversation about Mental Health" to all parents picking up lunch bags at Gold Beach High School and Brookings-Harbor High School during the last week of school in June of 2020.

Curry Community Health has had three staff members trained as Question/Persuade/Response (QPR) trainers. As of April, 2021, the Brookings/Harbor School District (BBHS) has now participated in 5 (five) QPR trainings with more than 50 school staff trained in suicide response. QPR Training for Mentor Students at BBHS and Cohort Drop-In Prevention Discussions with Mobile Crisis Team are currently being scheduled. Our hope is that the Suicide Ideation rates of youth/teens will continue to decrease as more school district staff and community members become trained.

South Coast Together (SCT)

South Coast Together, the ACEs and Resiliency initiative along the south coast, continued its work in 2019, with efforts focused on leadership expansion, increasing community training and launching Family Cafés. Amidst the COVID crisis in 2020, SCT hosted two county-wide community impact events and 19 trainings online to help unite community members, provide an outlet for dialogue, and continue educating community members about the ACEs.

Leadership expansion is one of the core principles of building a Self-Healing Community. To accomplish this, SCT trained multiple new "Presenters," supported training for 40 Family Café facilitators, and hosted dozens of Family Café events, including two virtual Community Resilience events during the pandemic, and has completed strategic planning for the initiative by a Core Group of multi-sector participants. To date, SCT has trained over 1,400 community members between Coos and Curry Counties in Adverse Childhood Experiences (ACEs), and 50 Student Support Specialists have been trained in the Curry School Districts in a Trauma-Informed Schools initiative. ACEs have a lifelong impact on the mental health and wellbeing of children. By strategically working on trauma-informed schools and communities, we believe the benefits will have positive impacts for generations to come.

Stakeholder Feedback

Family Cafés hosted by South Coast Together & Pathways For Positive Parenting are part of the Youth & Seniors Workgroup initiatives.

- *I felt so encouraged and supported during the (first) Family Café. (This was stated as the reason she was so eager to return to the follow-up Café.)*
- *I've been waiting for something like this to come together.*

- *This is hard (raising grandchildren). We are so grateful for this Café and connection.*
- *I can't talk to my friends- they don't understand since they're not in the same position. To meet with others doing this same work is just what I needed.*
- *We've all been in the same situation where we've needed a shoulder to cry on...that's why we're here- to be there for one another.*
- *This is the most important thing this community has done.*
- *I wish we would've had a group like this when I first took custody of my grandson. There were so many tears and so much guilt...I'm so thankful to be here tonight.*

Quotes from attendees of the first two rounds of Family Cafés for 'Grandparents Raising their Grandchildren' in 2019

Challenges and Barriers

Transition of Curry Public Health to Oregon Health Authority: There will likely be growing pains as the behavioral health landscape continues to transform in 2021 in Curry County. As oversight of Curry Public Health and Behavioral Health transition to the Oregon Health Authority, we will diligently and collaboratively work with all Curry CHP partners to make the transition as smooth as possible. We are hopeful that our community members will receive new opportunities to aid them in the behavioral health programs and services they receive, and we are very hopeful for improved access, integration and delivery of behavioral health and addiction services through ADAPT in Curry County.

On the Horizon

Our Curry CHP will continue to support the impactful work of SCT as they provide ongoing training and workshops free of charge to the community in Curry County, across all sectors, including health care, education, law enforcement, social services, parent groups, communities of faith and local tribes. We will also continue to support trauma-informed school initiatives that present to all school districts in the region and provide follow-up sessions to support implementation of trauma-informed strategies during the 2021-2022 academic year. Implementing Trauma Informed School Systems with Student Support Specialists (SSS) and provided training support for the 50 SSS (at least one in every K-12 school along the south coast, pilot schools and districts implement systems) will be an ongoing priority for our Curry CHP over the next five years.

We will also continue to work collaboratively to support the new behavioral health and addiction prevention services provided through ADAPT in Curry County, and will work with

our Intensive Care Coordination teams to help ensure that our high-risk members are provided with the most comprehensive wraparound services possible.

PRIORITY AREA 2: HEALTH SYSTEMS & CAPACITY – ORAL HEALTH

[Curry County Community Health Assessment](#) - pp. 60-62

[Curry County Community Health Improvement Plan 2019](#) - pp. 22-25

Priority Area Overview

The availability of quality Oral Health in Curry County has been a continuous concern of both providers and patients for years. According to the *Curry County Community Health Assessment*, a third of the population of adults in the county indicate they are experiencing poor dental health, which is twice that of the state percentage. Similarly, youth in Curry County are less likely to have seen a dentist or dental hygienist for a check-up in the last 12-months than youth statewide.

The Oral Health Workgroup focused on improving access to dental care in Curry County. We want to support increasing access to dental services, whether that be in Brookings, or as far north as Langlois! Currently, we are working with many partners, such as Coast Community Health, the Oregon Health Authority, AllCare CCO, and Advantage Dental to support bringing dental services to Port Orford, where there hasn't been a dentist in over 12 years. Advantage Dental will have a hygienist in the clinic, and hopefully soon we will have a dentist there. The hygienist will see all people - regardless of ability to pay - and in cooperation with Coast Community Health will have a voucher program. We are also looking at ways to increase dental access in different settings, and exploring bringing in a hygienist to a physical health clinic in lower Curry County as well as a new workforce model of oral health provider called a Dental Therapist.

This regional Priority Area aligns with the *Healthier Together Oregon 2020-2024* SHIP priority area of Access to Equitable Preventive Health Care and has the potential to positively impact issues related to provider shortages, transportation barriers, or health care costs. Further, this Priority seeks to ensure increased equitable access to and uptake of community-based preventive services; an increase equitable access to and uptake of clinical preventive services; and, to implement systemic and cross-collaborative changes to clinical and community-based health-related service delivery to improve quality, equity, efficiency and effectiveness of services and intervention.

High level strategies developed by the community to impact this Priority Area included:

Oral Health Priority Area Goal
Goal 1: Identify and support increased access to oral health services and integration with behavioral and physical health services

Key Data Point	Baseline Data	Current Data
11th graders who had seen a dentist or dental hygienist for a check-up, exam, teeth cleaning in the last 12 months	2017: 59.8%	2019: 20% (better)
SOURCES: Oregon Healthy Teens Survey 2017 and 2019 https://www.oregon.gov/oha/PH/BIRTHDEATHCERTIFICATES/SURVEYS/OREGONHEALTHYTEENS/Documents/2019/County/Curry%20County%20Profile%20Report.pdf pg. 23		

Changes in Community

Many partners contributed to the focus on increasing access to Oral Health care in Curry County during the reporting period. The COVID-19 pandemic, resulting state of emergency declaration, and protective orders dramatically decreased access to these services as dental offices throughout the State of Oregon were mandated to close to increase access to Personal Protective Equipment for hospitals. As a result, dental offices were only seeing patients on an emergency basis.

Contributing Community Partners

There were many contributing partners in this effort to increase access to oral health care in Curry County including. Contributing partners are listed at the end of this report.

Efforts and Progress Made

During the reporting period, continuing progress was made on a dental project in Port Orford and have now completed the necessary arrangements with the partners and completed training. Coast Community Health and Advantage Dental had a series of setbacks due to COVID but has remained steadfast and committed to this much-needed service. We have also been researching other potential sites for dental services to include the hospital system in Gold Beach.

Stakeholder Feedback

The Expanded Practice Dental Hygienist and a Dental Assistant in Port Orford are part of the Oral Health initiative serving upper Curry County.

This is so needed in Port Orford for all the members of the community! We are so excited for this new provider at Coast Community Health!

Linda Maxon, Coast Community Health

Challenges and Barriers

Provider Shortages: There have been no dental providers in Port Orford for over 20 years. 2019 and early 2020 presented many challenges as stated above due to a workforce shortage and then COVID-19 hit. Efforts to increase access in Port Orford were put on hold due to the Governor's Executive Order to close down dental offices to preserve PPE. Once the offices were opened back up, there was an enormous backlog of patients that needed to be seen. Continued efforts are being pursued to make services in this area a reality, and not just preventive services, we would like to pursue having a dentist come to Port Orford as well. This will happen with cooperation from all the partners involved.

On the Horizon

We have begun a soft start in Port Orford with the Expanded Practice Dental Hygienist and a Dental Assistant and are implementing some patient appointments that include warm handoffs and scheduled appointments. The first day the EPDH was on site she saw 10 people and we expect this to grow and continue to grow as we expand. In the future as the services available to people in the community continue to grow we are hopeful that the partnerships will grow as well. We are also in the beginning stages of exploring a partnership with a clinic and hospital system/urgent care in the County.

PRIORITY AREA 3: HEALTH SYSTEMS & CAPACITY – ACCESS TO HEALTHCARE

[Curry County Community Health Assessment](#) - pp. 38-46

[Curry County Community Health Improvement Plan 2019](#) - p. 8

Priority Area Overview

Access to providers and specific health services has improved since 2008 but remains a significant issue related to access to healthcare in the county. Curry County continues to experience a health care provider shortage. Focus groups and survey data during the CHA

indicated that both recruitment and retention were issues for providers. Housing affordability and availability are barriers for both members and potential recruits. Notable data points in the CHA related to access to healthcare include: Access to primary care has been lower in Curry County than the state; and close to 50% of the entire county population is enrolled in some type of government-sponsored insurance (Medicaid, VA or Medicare).

This regional Priority Area aligns with the *Healthier Together Oregon* 2020-2024 SHIP priority area of Access to Equitable Preventive Health Care and has the potential to positively impact issues related to equitable access to and uptake of community-based preventive services.

High level strategies developed by the community to impact this Priority Area included:

Access to Healthcare Priority Area Goal
Goal 1: Support efforts to recruit and retain providers and increase needed services

Key Data Point	Baseline Data	Current Data
2-year olds immunized	2017: 48%	2019: 54% (better)
FTE primary care providers in Curry	2016: 18	2021: 19 (better)
Source: ALERT Immunization Information System, Oregon Immunization Program and Advanced Health- Member Services provider list		

Changes in Community

The COVID-19 pandemic has greatly impacted the health priorities, resources and high-level goals of the Curry CHP Access to Healthcare Workgroup, which are to support efforts to recruit and retain providers and increase needed services and access to healthcare overall in Curry County. With “all hands on deck” needed to support COVID coordination for testing, education and information sharing, and vaccination clinics, and the significant decline in non-emergent care visits throughout the pandemic, providers in Curry County have been intermittently furloughed or laid off at Curry Health Network (Curry’s largest provider health network) resulting in decreased staffing capacity. Over the past year, Public Health in Curry County also transitioned from Curry Community Health to the County, and most recently, the decision was made to transition Curry Public Health back to the OHA.

Contributing Community Partners

The Curry CHP Workgroup includes representatives from many organizations. Collectively, they are striving to ensure equitable access to needed services and recruit and retain providers in Curry County. Contributing partners are listed at the end of this report.

Efforts and Progress Made

The Curry CHP Access to Healthcare Workgroup strives to help ensure that better overall health outcomes are achieved for Oregon Health Plan members in Curry County and for all Curry residents, by addressing issues associated with barriers to care, including gaps in care for medical and dental health. Trauma informed care trainings and suicide prevention trainings have been offered to Curry providers and efforts have been made through intentional collaboration to help develop better communication and information sharing between Curry CCOs, providers, and members through the monthly Curry Care Coordination and CHP Coalition meetings.

Most recently, the Curry CHP Access to Healthcare Workgroup has been actively engaged in helping local health systems with vaccination clinics through volunteerism, promotional efforts, collaboration calls and has supported St. Timothy's Episcopal Church with multiple vaccination clinics for high-risk populations, including the unhoused population and local Veterans. This Workgroup has also made an effort to reach out to families in distress, especially when health issues make home situations more complex, including assisting individuals with online vaccine registration, helping to arrange medical transportation when needed, and helping provide tangible needs such as shower chairs, thermometers, pulse oximeters, masks, sanitizer, bleach, etc. upon request from families and individuals.

We are seeking Brookings VA Clinics' involvement in CHP planning efforts. We have plans to develop supportive efforts for providers, such as trauma informed care and suicide prevention trainings, and to develop better communication between Oregon Health Plan's "Coordinated Care Organizations" (CCOs), providers, and members. (Source: <https://www.currycountyCHIP.org/access-to-healthcare>)

COVID-19 Relief

When COVID hit, both Curry CCOs participated in bi-monthly Essential Needs Curry Collaboration virtual meetings open to the community, health systems, and social services organizations to help ensure that essential needs of our most vulnerable populations were being met. Coordinated efforts were made between both CCOs and other funders to ensure that Coastline Neighbors was fully funded by both CCOs in order to help provide food and medicine delivery to homebound community members and those impacted by COVID-19 in Curry county, and they received a grant to help cover co-pays for prescriptions of low-income community members.

COVID-19 Vaccine Rollout

The Curry CHP Access to Healthcare workgroup has been actively involved in the COVID-19 Vaccine Rollout for High-Risk Populations in Curry County, as well as coordination and support efforts of Veterans through the Brookings VA Clinics. Both Curry CCOs, area Foundations and health systems have been working together to help with vaccine clinic coordination efforts across the county. Approximately 150 High Risk community members were vaccinated against COVID-19 at St. Tim’s Episcopal Church in Brookings from April-May 2021.

Stakeholder Feedback

COVID-19 Vaccine Roll-Out was supported by the Access to Healthcare Workgroup.

We have a volunteer story that is about Army Desert Storm Combat Medic and Nurse Loren Farmer who has helped give inoculations at all three cities and for three different providers. He will be honored for his military service and his service during the Vaccination rollout by the Curry County Board of Commissioners. Numerous people (usually seniors) wept with relief after getting vaccinated.

Connie Hunter, Advanced Health Community Advisory Council Member

Challenges and Barriers

Faith-Based Organization Delivers Vaccinations in a rural Curry County: Workgroup member Connie Hunter and Curry County Suicide Awareness and Prevention Council’s Veterans Task Group members Loren Farmer, nurse and Army Desert Storm combat medic, and his son Jason met with Father Bernie of St. Timothy’s Episcopal Church, to make sure that they had everything in order so that St. Timothy’s could be approved to provide vaccinations for people who are unhoused or Curry County’s Frontline service workers-- becoming the first faith-based organization approved by OHA to be able to give vaccinations. This challenge was overcome because the Farmers, Father Bernie Lindley and others did all the necessary online training that was needed to get approved by OHA. They did all of this while working through kinks in operations, scheduling, and revitalizing an onsite medical clinic.

Addressing barriers to care while trying to reach underserved populations coupled with addressing vaccination hesitancy: It took teamwork and innovation to reach our unhoused citizens, veterans who don’t like to work with the VA, and arrange for those front-line workers while addressing vaccine hesitancy in an effort to manage community spread during tourism season. Our workgroup saw that this is an unmet need for Curry County that should be addressed to save lives, provide optimal health outcomes, and help our economic

recovery since many of our county's businesses and local workers depend on the tourism season.

Defining Community Partners' Roles: During the pandemic, many new relationships were formed to address the needs of our rural area during the pandemic. In building relationships in a short period of time, Community Partners sometimes forgot to keep partners informed of activities. Organizations controlling the flow of information rather than distributing to stakeholders made it difficult to keep track of both what the right hand and left hand were both doing. Some Community Partners used volunteers without asking if those volunteers had other obligations. So learning to work with volunteers from partner organizations was a challenge. Communications in order to keep partner organizations informed when utilizing volunteers was an ongoing challenge.

Getting the word out in enough time to increase the number of people getting vaccinated: It seems like there was never enough lead time to get the word out.

On the Horizon

The follow up for Curry County FEMA event will be happening June 11th through the 16th in Brookings. We will continue to promote vaccinations in our Curry County and do our best to host ongoing clinics. As referenced in the article below, the Roseburg VA hopes to become a "High Reliability" organization and partner to serve Curry County. This partnership and development is one of importance to our Curry CHP Access to Healthcare workgroup. We will also continue collaborating with Curry Health Network as they develop and implement their new Community Health Needs Assessment. *High-Reliability Organizations in Healthcare: Framework:*

<https://www.healthcatalyst.com/insights/high-reliability-organizations-in-healthcare-framework>

PRIORITY AREA 4: HEALTH EQUITY – HOUSING & HOMELESSNESS

Priority Area Overview

Homelessness was listed as a significant concern in the 2018 CHA focus groups and surveys. Housing availability and quality was also a very common concern listed in the CHA. Notable data points in the CHA related to homelessness and housing include: The number of homeless adults is increasing in the annual point in time count; the number of homeless students by district is increasing; and almost a quarter of residents in the county are experiencing housing problems such as overcrowding, incomplete facilities or cost burdened.

(Source: <https://www.currycountyCHIP.org/housing-and-homelessness>)

This regional Priority Area aligns with the *Healthier Together Oregon 2020-2024* SHIP priority area of Economic Drivers of Health and has the potential to positively impact issues related to housing, living wage, food security, and transportation.

High level strategies developed by the community to impact this Priority Area included:

Housing Priority Area Goals
Goal 1: Increase housing availability, affordability and increase quality of housing and support projects that address homelessness.

Key Data Point	Baseline Data	Current Data
Vacant housing	2011-2015: Owned: 359 Rental: 242 Other: 1567	2015-2019 Owned: 248 Rental: 342 Other: 1812
Point In Time Homeless Count	2017: 161	2019: 118 (better)
Homeless students by district	2016-2017: Central Curry: 55 Brookings Harbor: 102 Port Orford/Langlois: 43 All Curry: 200	2019-2020 (better) Central Curry: 21 Brookings Harbor: 70 Port Orford/Langlois: 35 All Curry: 126
Source: US Census, American Communities Survey , Point in time homeless count 2017, Point in time homeless count 2019, Oregon Department of Education		

Changes in Community

In general, the needs and priorities of Curry County related to homelessness have remained the same or have intensified. Curry County still has a high rate of unsheltered homelessness, an elderly homeless or marginally housed population (as well as struggling families and youth), a lack of shelter and transitional housing services, a housing burdened population, and long distances between social services and population centers. These problems have been intensified due to the loss of a fixed homeless service hub, which has been replaced by a well-networked mobile service program, as well as a loss of local economic vitality due to COVID.

Contributing Community Partners

The Curry CHP Coalition's Housing & Homelessness Workgroup partners are striving to increase accessible housing availability, affordability, and quality, and to support projects that reduce homelessness. Contributing partners are listed at the end of this report.

Efforts and Progress Made

Formation of a mobile service program by the Curry County Homeless Coalition mitigated the loss of the fixed service center. This offers an advantage to the community in that it helps to address transportation barriers faced by our community. The mobile services program aided the community during COVID by providing low-barrier COVID testing throughout the county, as well as partnering with the HIV Alliance for hepatitis testing.

St. Timothy's Episcopal Church and the Brooking Homeless Task Force partnered to conduct street outreach to homeless persons to help connect people to both local services and state/federal programs (such as SNAP and Medicaid).

There was also an interagency effort by several local and regional partners to develop a shelter/housing program under Project Turnkey. Due to local barriers, this effort was unsuccessful but it did develop stronger working relationships that we anticipate will yield positive results for the community in the future.

Formation of a Joint Behavioral Health/Housing and Homeless workgroup, meeting quarterly to discuss the intersections of housing and homelessness as it relates to Behavioral Health. As we work to rebuild mental and behavioral health services in Curry County we are targeting improved relationships between MH/BH providers and NGO social service providers in Curry County. We feel this is pertinent to establishing comprehensive, impactful service provision to those in need of supportive and transitional housing.

COVID-19 EFFORTS:

The Curry County Homeless Coalition, a contracted CBO with Oregon Health Authority, has provided wrap-around support for households in central and north Curry County impacted by COVID. Support includes grocery shopping and delivery of over-the-counter medicines, cleaning products and food, rental and/or mortgage assistance, utility and other financial obligations to assist in securing safe, stable housing throughout the pandemic and to encourage full participation in isolation and quarantine. The Curry Homeless Coalition has worked to increase access to health care in the form of both COVID-19 testing and vaccine availability to unsheltered or hard-to-reach community members by partnering with OHA and FEMA to provide walk-drive-through testing and vaccine clinics throughout Curry County.

The Curry Homeless Coalition's Mobile Outreach program was employed to increase interest among our unsheltered community members. Through March of 2021, give-away items such as Fred Meyer gift cards, 20L dry bags, masks, hand sanitizer, COVID education materials from Safe & Strong were distributed as encouragement to participate in testing. Homeless service providers assisted with test registration and follow up results for participants that do not have access to a working email account. We are discussing use of the Mobile outreach Unit to support vaccine roll-out to our hard to reach community members, following OHA's vaccine sequencing plan.

We are meeting people where they are, delivering services with dignity and with trauma informed techniques proven to be more engaging for the target population. Staffing is needed to continue with a level of support the community demands. We use Kintone, a user-friendly customizable software program, tracking daily services, CCO assignment, referrals to partner agencies, and special program services like Homeward Bound. Through this effort, hot meals, supplies for people sleeping rough, hygiene supplies, and clothing vouchers were provided.

Street Outreach: Street Outreach was delivered 9 hours/week at the drop-in center (St Timothy's) and 10 hours/week doing street outreach. Activities included assisting with obtaining documentation for work, housing, income, and assisting with applying and receiving benefits. Also offered were financial support for housing needs, when appropriate, referrals and coordination to/with other organizations, and legal agencies (Oregon Law Center and Fair Housing Council of Oregon). We practice Harm Reduction, Trauma Informed Care, and Motivational Interviewing. Our barriers include a lack of housing inventory, shelter, transitional housing, medical support, and APS/SPD support, and city and police laws and ordinances regarding homelessness.

Project Turnkey: As of March, Project Turnkey in Brookings has moved into Phase 2 with the primary applicant as Rogue Retreat with Brookings Harbor Task Force in support locally. Workgroup activities included implementation of regular coordination meetings between agencies, numerous necessary documents provided to community members to obtain housing, communication established for members via Assurance Wireless, treatment obtained for several members with SUD, PCP established for many members, Point In Time Count for Brookings completed for data purposes, hygiene and survival items distributed regularly, and COVID testing events facilitated by our team. This project supports Culturally Appropriate Health Education, Mediation and Advocacy, Coaching and Social Support, Building Individual and Community Capacity, Community Mapping and Assessments, Referrals, Basic Hygiene and Health Items and Resources, Navigating Resources Locally and Regionally. Over 400 hot meals served to our unsheltered and non-congregate shelter community members. We supported 9 COVID-19 impacted households with wrap around services, isolation and quarantine client services between 01/01/21 & 03/17/21.

Approximately 170 COVID-19 tests were conducted throughout Curry County, 40-50, 20L dry bags were provided and 400 hours of staff time were dedicated.

Stakeholder Feedback

Brookings Homeless Task Force is part of the Housing & Homelessness Workgroup initiative.

In the beginning of our program there was a woman in her 70's with no income, housing, support, or other resources. She was sleeping on the bench outside of our church. I was able to assist her in getting health insurance, access her income, obtain identification, and secure her a motorhome in a 55+ park for less than 1/2 of her income. It is near a store (across a parking lot) and we have visited her frequently. Before housing, she was struggling increasingly with her mental health. Since being housed, she is stable and living independently, with ongoing support from our team. There is a gentleman that also came into our office several months ago. He is 66 with no income, no insurance, and no benefits of any kind. Within the day we were able to get him approved for SNAP and set an appointment for SS retirement (his appointment is this Friday due to COVID delays). We suspect he suffers from dementia and have talked to him about this. He has changed his opinion from not wanting to see a doctor to wanting to get a full evaluation for his cognitive function. We take him grocery shopping weekly and have been teaching him to use his benefits, as well as supporting him while he is living in his vehicle and will be applying for housing once his benefits are approved.

Diana Cooper, Brookings Homeless Task Force

Challenges and Barriers

Lack of Services in the County: Ongoing challenges to housing development and program or project improvement in Curry County include a lack of services located in the county. Many services, such as the Community Action Agency and Housing Authority are located in adjacent Coos County. Other programs, such as NeighborWorks, are located even further away in Douglas County. While these programs offer benefits to Curry County programs and residents, the geography is a barrier and agencies' attention and resources are divided.

NIMBY: Additionally, there are barriers of political and social will to address low-income housing concerns or emergency shelter needs. This could be considered part of a “Not in my Backyard” or NIMBY attitude that also influences local decision-making and political bodies.

Shelter Needs: Curry County continues to have a high need for shelter, affordable housing, low-income housing, available market rate housing, and resources for permanent

supportive and transitional or case managed housing. In some cases, this is exacerbated by lack of access to behavioral health resources.

Loss of Revenue: All of this is underscored by revenue lost due to reductions in tourism and local economic activity due to COVID-19 and multiple years of wildfire smoke.

On the Horizon

Opportunities on the horizon in Curry County include renewed focus on housing issues led both by local collaborative groups (new and old) and community housing champions. Together, they have identified several properties which could be developed for combined service centers, inclement weather shelters, congregate or non-congregate shelter, veterans' village housing, or other beneficial community-oriented housing and service models. External groups from nearby counties are also willing to lend expertise, technical assistance, and adoptable service models.

Additionally, there are American Rescue Plan Act (ARPA) and Homeless Assistance and Supportive Services Program (HASSP) funds coming to the county that could be used for property acquisition and housing infrastructure development.

PRIORITY AREA 5: HEALTH EQUITY – FOOD & NUTRITION

[Curry County Community Health Assessment](#) - pp. 28 - 31

[Curry County Community Health Improvement Plan 2019](#) - p. 10

Priority Area Overview

Nearly one in four children in the county are food insecure; this is higher than the state average. Overall, residents of Curry County experience more food insecurity than the state as a whole. Notable data points in the CHA related to food include: Fewer than 6% of adults in the county consume at least 5 servings of fruits and vegetables a day, compared to 20% in the state as a whole; 24.5% of children under 18 are food insecure in the county; and sugar-sweetened beverage consumption is higher among youth and adults in the county than in the state.

Many of our work group members work with families who are unserved in our community and understand the need. Our work involves supplying free food to anyone in need. We partner with the schools on snack packs for youth, food boxes distributed at communities of faith, formula for babies and fresh produce through our 'Plant a Row' program.

Source: <https://www.currycountyCHIP.org/food-and-nutrition>

This regional Priority Area aligns with the *Healthier Together Oregon* 2020-2024 SHIP priority area of Economic Drivers of Health and has the potential to positively impact issues related to housing, living wage, food security, and transportation.

High level strategies developed by the community to impact this Priority Area included:

Housing Priority Area Goal
Goal 1: Support efforts to decrease food insecurity and increase availability of healthy, nutritious food for all ages

Key Data Point	Baseline Data	Current Data
Limited access to healthy foods	2014: 5%	2019: (worse) 13.8% all people 17.9% of children
SOURCE: USDA Food Security Survey, Feeding America Survey 2014; 2019 Feeding America - Map the Meal Gap; 2019 Status of Hunger in Curry County; Oregon Hunger Task Force, Oregon Healthy Teens Survey 2017		

Changes in Community

Although the need for healthy food was already determined as a need for residents, the pandemic has increased the number of those who are food insecure across Curry County. Agencies have quickly responded to the increase in need for emergency and consistent food boxes and provisions through new programs, unique collaborations, and increased capacity of existing programs. Some of this improvement includes language access partnerships between food programs and AllCare Health to offer in-person interpretation. Additionally, programs were continued at growers markets and partnerships were strengthened via CHIP workgroups between public programs such as schools and community programs such as food pantries, homeless service programs, and garden/education activities.

Contributing Community Partners

The Curry Collaborative CHP Food & Nutrition Workgroup’s goals are to identify vulnerable populations in our community with food insecurities and make nutritional foods available to all identified. Contributing partners are listed at the end of this report.

Efforts and Progress Made

The Curry Collaborative CHP Food & Nutrition Workgroup gathered partners and projects together monthly to address the food insecurity needs in Curry County. The strategies used

were/are Movie Night Snack Packs, Resource Guide for Food Resources in Curry County, Plant-a-Row, and Snack Packs. These engage multiple partners, community members, and areas of the county for providing and receiving needed services and goods.

Movie Night Snack Packs: In spring 2021, the Chetco Library launched a program to help lessen food insecurity by providing 20 weekly backpacks containing fun and nutritious food and high interest DVDs to the youths, families, adults, seniors in southern Curry County. We began planning for this program at the beginning of the year, and launched it at the beginning of March. We will continue this program for three months and then assess whether to continue or not with its implementation.

Through March 17, 2021, 200 backpacks with nutritious food were provided using 30 staff hours to serve 160 people. These data sources are from Brookings Harbor Food Bank food orders and Chetco Community Public Library circulation records.

Plant a Row: Community members are invited to plant a row of food in their gardens to donate to the food bank to address the lack of seeds in our community. The library used to have a seed bank, but due to COVID-19 the seed bank is closed. Resources needed included the ability to buy seeds in bulk. Progress has been achieved in promoting the program at the Farmer's Market on Saturdays in Brookings. In 2020, 21 growers produced 1,584 pounds of produce that was donated to those with food insecurity. This required 270 staff hours to complete.

Activity Bags and Snack Packs: "BOB" (Bites of Brookings) the Bus was a summer food project to expand the summer foods program. The name, design, and reconstruction were completely done by Brookings-Harbor School District students, ages 5-18. BOB is a school bus that now looks like a watermelon and allows about 20 children at a time to sit inside to eat a meal. When COVID-19 hit and the schools were shut down, BOB was in high demand to be put into play. For the summer of 2020 grant money allowed for a 3.5 hour route delivering snack packs and activity bags to each bus stop for the children. Collaborations included getting the "You Are Not Alone" and Coastline Neighbors Resource flyers included in the bags, and a Spanish interpreter at the Bus stop when the first round of activity bags/snacks were handed out. This strategy used BOB the Bus to reach 300 children ages 0-18 in high poverty areas of the community with 6,619 snack packs and activity bags during the 2020 summer. The data source is from Brookings Harbor Community Helpers.

Interpreters at Food Banks and Pantries: In 2020, AllCare created a program to help LEP individuals in the community to have access to the food banks. Five Interpreters were hired to work at Food Banks and Pantries in three different counties - including Curry County. The Interpreters spoke Spanish and were also equipped with VRI (Video Remote Interpreting) technology to assist those LEP members that spoke other languages. Overall, the Interpreters worked at 15 locations, worked a total of 375 hours and were able to help 447

LEP members of the community in five different languages. Curry County adopted a form of this program and continued it for the year of 2021.

Stakeholder Feedback

BOB the Bus is one of the Food Workgroup initiatives.

Every stop had not only children smiling, but community members coming up to the bus to ask questions or to take pictures of BOB.

Pamela Winebarger, Brookings Harbor Community Helpers

Interpreters at Food Banks and Pantries

A few months after the program started I spoke to the Director at Brookings Harbor Food Bank and she said that when AllCare came to her about it, she did not think they had a need for it. However, once she started seeing how many LEP families started coming in and getting food (some had lost their jobs early in the year and had no other source of income) Pam said she realized how much it was needed. Pam was so grateful and impressed with the program that the Brookings Harbor Food Bank applied for and was given another grant to keep this program going for most of 2021.

Kristina Espinoza, AllCare Language Access Manager

Challenges and Barriers

Consistent Funding: Consistent funding is always a barrier to sustainable programming. Currently, the funding is tied to annual CBI applications with local CCOs which is dependent on grant cycles and budgets of CCOs remaining when they apply.

Cost and Geography: Curry County is remote from major transportation lines inland to I-5 and from major food and resource hubs. This adds cost and time barriers to acquiring food resources from outside the area. Curry County also has relatively few local resources for food and funding, further burdening emergency food programs and low-income residents.

On the Horizon

BOB the Bus is back on the road again this summer, starting in June 2021. The Plant a Row goal for 2021 is to engage 30 growers planting a row. Understanding that food insecurity has dramatically risen during the pandemic, there is growing urgency to provide stable and nutritious food, especially in food deserts and rural populations.

Conversations are underway on how emerging funding streams could be used to co-locate food and homelessness programs for increased organizational efficiency and reduced

member barriers such as time to access resources and transportation. The American Recovery Plan Act funds may be a possible new resource that could support one or more initiatives of the Food Workgroup.

PRIORITY AREA 6: COMMUNITIES & FAMILIES – YOUTH & SENIORS

[Curry County Community Health Assessment](#) - pp. 32 - 37

[Curry County Community Health Improvement Plan 2019](#) - p. 11

Priority Area Overview

The CHA illustrated that many residents feel like religious and spiritual values are a strength of the county. Social isolation and “Opportunity Youth” (16-24 year olds not engaged in education or work programs) remain a concern. Notable data points in the CHA related to youth and seniors include: Curry County has the highest percentage of Opportunity Youth in the state; and the number of individuals without adequate social or emotional support is higher than the state percentage, nearly 1 in 4 Curry residents list not having adequate social or emotional support.

Our purpose is to help foster greater collaboration and communication in the work being done in Curry County to support youth and seniors. Through collaboration, we hope to enhance the social-emotional health of our community members, strengthen the protective factors that aid in family preservation and increase the coordination of services and systems aiding youth and seniors. We are passionate about increasing the social-emotional health of vulnerable youth and seniors in Curry County and we hope to better promote the existing various programs and services to support this population. (Source: <https://www.currycountyCHIP.org/youth-and-seniors>)

Our goals are based on improving data points from the 2018 Community Health Assessment that have to do with decreasing social isolation in youth and seniors, supporting youth in foster care and improving foster care stability rates, increasing school readiness opportunities for low income children and helping to ensure that the community and specific sectors have information about the free trauma-informed trainings on the ACEs/Resiliency and Parent Training are available to the community. (Source: <https://www.currycountyCHIP.org/youth-and-seniors>)

This regional Priority Area aligns with the *Healthier Together Oregon 2020-2024* SHIP priority area of Adversity, trauma and toxic stress and has the potential to positively impact issues related to abuse and neglect, living in poverty, incarceration, family separation, and exposure to racism and discrimination.

High level strategies developed by the community to impact this Priority Area included:

Youth & Seniors Priority Area Goals
<p>Goal 1: Support efforts to mitigate trauma and increase resilience;</p> <p>Goal 2: Increase supports for seniors including programs that address social isolation; and</p> <p>Goal 3: Support collaborative efforts focused on youth such as the early learning hub and school based health centers.</p>

Key Data Point	Baseline Data	Current Data
Youth in foster care	2017: 43	2021: 25 (better)
SOURCE: Children’s First Child Data Book, 2017 and DHS Child Welfare Data Book, 2021		

Changes in Community

As a result of COVID and the increased social isolation over the past year, our Workgroup feels it is a priority to increase support for children & youth in addition to seniors. Opportunities to engage in person have been limited, so we have shifted to offer virtual and drive-thru support when necessary. The My NeighbOR program provided new resources to support vulnerable (foster or youth in families with an open DHS case) children and youth with tangible needs, swimming lessons, clothing, bikes, etc. Every Child Curry was a main partner for this, but South Coast Regional Early Learning Hub (SCREL) was also very vocal about wanting children included in support through their Head Start programming and other family training they offer.

Contributing Community Partners

The Curry CHP Youth & Seniors Workgroup is made up of professionals and community members. Contributing partners are listed at the end of this report.

Efforts and Progress Made

The current work being done by the Curry CHP Youth & Seniors Workgroup involves intergenerational music classes, senior cyber labs (to bring uplifting videos and caring messages to seniors who are unable to leave their homes or living facilities), weekly check-ins, shopping services and phone calls to seniors provided by Coastline Neighbors, Senior Nutrition Program, supports for foster families (essential tangible needs, tutoring/enrichment program for students in foster care/respite for the parents, and foster parents’ night out event, paused during COVID, and a 24/7 foster support call line), training

and connection activities for older adults and academic support for adolescents in Gold Beach through the Curry Public Library, weekly support groups for youth hosted by the Curry Juvenile Department, online teen book club and activity bags for youth sponsored by the Chetco Public Library, family cafés and trauma-informed parent trainings for foster parents, and trainings on Adverse Childhood Experiences (ACEs) to the community through South Coast Together and the South Coast Regional Early Learning Hub. Collaboration is also taking place to help provide greater support for students in foster care who are enrolled in the Brookings Harbor School District.

Senior Nutrition Program: Through the Senior Nutrition Program, from March 2020 - February 2021, 9,444 meals were served and interactions made with seniors in Gold Beach. This program not only addresses food insecurity, but also isolation and loneliness. Meal delivery drivers check in on senior homebound clients to make sure they are okay and to engage in conversation with them. The congregate meal take-out program brings seniors to the Gold Beach Senior Center where their health and well-being can also be checked.

Senior Cyber Labs: Dozens of seniors were reached through the Senior Cyber Labs video program - sharing messages of love, joy, and inspiration to older adults living in senior living centers and through Harmony & Me’s online music classes at senior living centers.

The HIVE: The HIVE online schooling supported 45 students in Gold Beach during school shut-downs through January, 2021. 800 youth provided with activity bags, snacks and resource flyers in English & Spanish through May, 2021.

Supporting Vulnerable Youth & Families: 26 Family Cafes, including two online Trauma-Informed parent trainings, were held through May, 2021. A 24/7 Foster Support line was funded and 25 Foster (Resource) Families served with tangible needs, gift cards or “flash boxes” (filled with activities, games, treats, etc.) through May, 2021. 50 tangible need requests were fulfilled for children and/or families in the foster system through Every Child Curry’s My NeighbOR program through May, 2021. Five 4-week sessions of tutoring and enrichment were hosted for 10 students in foster care through May, 2021.

Stakeholder Feedback

The HIVE Program was a project with the Youth & Seniors Workgroup initiatives.

Parents who had no childcare options cried with gratitude when we offered the services to them. Which says it all.

Karlie Wright, Curry Public Library

Cards for a Cause was a project with the Youth & Seniors Workgroup initiatives.

One of the people who participated in Cards for a Cause, started a pen pal relationship with a resident in Brookings. The child is 1, and they share art work back and forth, as well as stories. It has been great for all involved. I also heard from multiple parents about how much they looked forward to these kits during the summer months. It provided a safe, fun activity for their children to do at home.

Karlie Wright, Curry Public Library

Challenges and Barriers

Transition of Public Health Services: There are many unknowns with public health and behavioral health taking place, which leaves us feeling uncertain in how vulnerable and high risk youth will be supported this fall such as with adequate drug & alcohol counseling, as telehealth versions are not working well for this demographic, which will result in youth not receiving the support they need to help them overcome their struggles with addiction.

Connecting to Resources: A resource page where youth and seniors can access needed services is needed. We don't have a location identified for this resource, but one is needed to help ensure community members know where to go for programs, services that used to be housed at CCH. Community members need to know where and how to access programs and services once they are no longer available at CCH, such as free condoms.

Youth in Residential Treatment: The Curry Juvenile Department reported in May of 2021 that referrals for Youth in residential treatment have recently doubled. Youth are struggling with drug and alcohol addiction and we lack the resources locally to support them.

Mental Health Services for those under 65: The Aging and People with Disabilities Department has also identified barriers helping with mental health services unless people are 65 years of age or older. Without enough caretakers, vulnerable older adults could be neglected, not receiving the care they need.

Home-Based Caretakers: Home-based caretakers for those over 65 years of age or older are needed, as there is a shortage due to lack of housing.

On the Horizon

Our Curry CHP Youth & Seniors workgroup will continue to seek out opportunities to partner with and support community groups and organizations that are intentionally working to offer programs and services that help to decrease social isolation in youth and seniors, and that offer engagement opportunities for youth and seniors.

As Curry Public Health transitions services to OHA, the need for an up-to-date resource guide of local programs and services has also been identified (where do teens go for free condoms, and other items that had been provided through Curry Community Health).

We will work with our Curry CHP Coalition at large to determine how best to gather this information and where to house it, possibly on our Curry CHP website:

<https://www.currycountyCHP.org>. We will also work diligently to continue serving vulnerable youth in the foster care system locally by providing free tutoring and enrichment programs, essential tangible needs and connection events through the Every Child Curry County/My NeighbOR program.

PRIORITY AREA 7: COMMUNITIES & FAMILIES – WORKFORCE & ECONOMIC DEVELOPMENT

[Curry County Community Health Assessment](#) - pp. 18-22

[Curry County Community Health Improvement Plan 2019](#) - p. 12

Priority Area Overview

The average median income (AMI) is lower in Curry County than the state. Poverty levels are higher in the county compared to state levels. Notable data points in the CHA related to workforce and economic development include: 60% of children were eligible for free and reduced lunch in 2016; and the percentage of people living in poverty in the county ranges 17-18%, while those 64 years of age and older are twice as likely to be living in poverty if they live in Curry County compared to the same age group statewide.

Economic stability is a social determinant of health and it includes issues such as poverty, income, employment and unemployment. Income and income inequality is directly linked to an individual's health. Income inequality has been shown to have health impacts including increased risk for poor health and increased risk of death. The average and median incomes in Curry County are lower than state levels. Poverty levels are increased in the County, compared to state and national percentages.

The Oregon Employment Department reports high demand for workers in the health care sector. So we are focused on promoting youth and adult awareness of health care careers, and providing realistically accessible training. SOWIB has helped Southwestern Oregon Community College (SWOCC) double its nursing instruction capacity, established Oregon's first Medical Assistant Apprenticeship program, and created and delivered three Community Health Worker trainings during 2020. A new 8-week Community Health Worker training sponsored by SOWIB will begin in April. Since the pandemic, our connection with SOWIB has

greatly facilitated acquisition and distribution of gloves, masks, and other protective equipment for health care workers.

This regional Priority Area aligns with the *Healthier Together Oregon 2020-2024* SHIP priority area of Economic Drivers of Health and has the potential to positively impact issues related to housing, living wage, food security, and transportation.

High level strategies developed by the community to impact this Priority Area included:

Housing Priority Area Goals
<p>Goal 1: Increase education about poverty and programs related to reducing poverty and its effects.</p> <p>Goal 2: Support efforts to increase Traditional/ Community Health Workers</p> <p>Goal 3: Increase programs to train and educate homegrown medical providers</p>

Key Data Point	Baseline Data	Current Data
Students qualifying for free and reduced lunch	2018: 56.9%	2020: 52.7 % (better)
Unemployed	Jan. 2018: 7.2 %	Jan. 2020: 5.8 % (better)
Median Household Income	2018: \$48,788	2019: \$51,267 (better)
Persons Living in Poverty	2018: 3,381	2019: 3,054 (better)
<p>SOURCE: <i>US Census Bureau, 2018, 2019, US Bureau of Labor and Statistics, Curry County Data Card ourchildrenoregon.org</i></p>		

Changes in Community

In the workplace, priorities had changed drastically with the onset of COVID-19, how workplaces operated, if allowed to operate, others were forced to close, until further notice. Priorities of essential services relied heavily on available personal protective equipment and guidance by local, state and federal sources. Several of the CHP proposed plans to implement trainings were put on hold. Community Partners of the Workforce Development CHP work group donated and gathered supplies for operating businesses, to keep from having a gap in provided services.

Contributing Community Partners

In early 2020 the Curry CHP Workforce & Economic Development Workgroup merged with the Curry County Workgroup of Southwestern Oregon Workforce Investment Board (SOWIB). The purpose of our Workgroup is to educate people about poverty and programs related to reducing poverty, increase traditional/community health care workers, and create programs to train and educate home-grown medical providers in Curry County. We will increase access to care and reduce poverty-related threats to community health by promoting information about poverty's adverse health impacts, and by expanding local health care training and employment opportunities. (Source: <https://www.currycountyCHIP.org/workforce-and-economic-development>) Contributing partners are listed at the end of this report.

Efforts and Progress Made

Recruit HIPPO: In an effort to prepare students for employment and to aid local businesses in their search for employees, Recruit HIPPO (Helping Individuals Pursue Professional Opportunities) was created: www.recruithippo.com. The mission of Recruit Hippo is to nurture a culture for youth work experience, ensuring the quality and increasing the number of opportunities young people have to apply their academic experiences in workplace settings.

Coast Driving School: Coast Trucking School is dedicated to providing training and experience that prepares every CTS student with the knowledge, skills and abilities required to embark on a safe and successful career as a licensed top quality, safety-conscious and highly employable entry level commercial truck driver. We strive to produce drivers capable of earning family-sustaining wages in the transportation industry, and who enjoy well-deserved reputations for excellence in the field. <https://www.coasttruckingschool.com/>

Stakeholder Feedback

The Southern Oregon Workforce Investment Board is a part of the Workforce & Economic Development Workgroup and supports their initiatives.

One of the individuals assisted was living in his car so being able to provide him with these gas cards not only meant being able to make it to his training but also meant shelter for him. We have assisted 4 participants with travel to and from school to complete courses to become a Commercial Truck Driver. All participants are now working full time and making a consistent livable wage.

Annie Donnelly, So. Oregon Workforce Investment Board

Challenges and Barriers

COVID-19 impacts have left some local employers scrambling for a workforce. Morgan Stanley analysts cited the Federal Reserve's latest Beige Book (a snapshot of economic conditions in Fed districts), in which child care, transportation, and health care were widely cited in addition to unemployment benefits as holding back potential workers.

In the Health Care sector we have found that one of the largest challenges the county faces in consistent provider workforce retention is housing. The drastic real estate market makes it a hardship for even well-paid health professionals to find appropriate and affordable housing. The surplus number of housing falls in the price range at nearly double the median income for the county, which is \$48,000, and this falls at the low end of that surplus category.

On the Horizon

In collaboration with community partners, a grant secured earlier this year will go towards incentivizing students with a credit deficit to persevere and earn their high school diploma. Preliminary design will identify high school juniors and seniors who are not on track to graduate and educate them of the statistical pros and cons of life after school with and without a diploma. These students will be put on a timeline and with each benchmark achieved there will be a monetary reward and a larger lump sum upon completion. This project hopes to bolster the county's and state's momentum to another year of precedent-setting graduation rates.

Community Partners working on initiatives for the Curry Collaborative Community Health Improvement Plan 2019							
<i>Key: Access to Healthcare (AH), Behavioral Health & Addictions (BH), Food & Nutrition (FN), Housing & Homelessness (HH), Oral Health (OH), Youth & Seniors (YS), Workforce & Economic Development (WE)</i>							
Organization	AH	BH	FN	HH	OH	YS	WE
Advanced Health							
Advantage Dental							
AllCare Health							
AllCare Community Advisory Council							
American Red Cross							
Brookings Church of the Nazarene							
Brookings-Harbor Community Helpers							
Brookings Harbor Farmers' Market							
Brookings Harbor Food Bank/Community Helpers							
Brookings-Harbor School District							
Brookings Homeless Task Force							
Brookings Police Department							
Brookings VA Nurse Manager							
CASA							
Chetco Community Public Library							
Coast Community Health							
Coastline Neighbors							
Columbia Care							
Community Health Workers with the Brookings-Harbor Homeless Task Force							

Community Partners working on initiatives for the Curry Collaborative Community Health Improvement Plan 2019							
<i>Key: Access to Healthcare (AH), Behavioral Health & Addictions (BH), Food & Nutrition (FN), Housing & Homelessness (HH), Oral Health (OH), Youth & Seniors (YS), Workforce & Economic Development (WE)</i>							
Organization	AH	BH	FN	HH	OH	YS	WE
Community Members: a nurse and veteran (AH, member of the Oregon Health Plan)							
Curry Community Health							
Curry County							
Curry County Homeless Coalition							
Curry County Public Health							
Curry County's 10 School Districts							
Curry Health Foundation							
Curry Health Network							
Curry Juvenile Department							
Curry Public Library							
Curry Suicide Awareness and Prevention Council							
Every Child Curry							
Fair Housing Council of Oregon							
Foster Parent Association of Coos/Curry							
Fred Meyer of Brookings							
Gold Beach Community Center							
Gold Beach Senior Center							
Harmony & Me Music (intergenerational music program)							
KASPER							

Community Partners working on initiatives for the Curry Collaborative Community Health Improvement Plan 2019							
<i>Key: Access to Healthcare (AH), Behavioral Health & Addictions (BH), Food & Nutrition (FN), Housing & Homelessness (HH), Oral Health (OH), Youth & Seniors (YS), Workforce & Economic Development (WE)</i>							
Organization	AH	BH	FN	HH	OH	YS	WE
Oasis Shelter Home							
Older Adult Behavioral Health Initiative							
ORCCA							
Oregon Department of Human Services							
Oregon Health Authority							
Oregon Law Center							
Pathways to Positive Parenting							
Self Sufficiency Program Coordinator							
South Coast Business Employment Corporation							
South Coast Development Council							
South Coast Educational Services District (SCESD)							
South Coast Older Adult Behavioral Health Initiative (members/ reps/ staff from the following organizations/agencies: Advance Health; APD-NB; Columbia Care; AAA/SCBEC; Curry Homeless Coalition; Coastal Home & Hospice; Connie Hunter; Gordon Clay; CTCLUSI; South Coast Hospice & Palliative Care; Bay Clinic; Coast Community Health; Renee Menkens, RN)							
South Coast Regional Early Learning Hub							

Community Partners working on initiatives for the Curry Collaborative Community Health Improvement Plan 2019							
<i>Key: Access to Healthcare (AH), Behavioral Health & Addictions (BH), Food & Nutrition (FN), Housing & Homelessness (HH), Oral Health (OH), Youth & Seniors (YS), Workforce & Economic Development (WE)</i>							
Organization	AH	BH	FN	HH	OH	YS	WE
South Coast Together (ACEs & Resiliency Initiative)							
Southwestern Oregon Community College							
Southwestern Oregon Workforce Investment Board							
St Timothy's Episcopal Church							
The Arc of Curry County							
VA Roseburg Mental Health Advocacy Council							
Wild Rivers Connect							
WorkSource Oregon							
United Way of SW Oregon							
University of Oregon							