

**AGREEMENT with MCMINNVILLE SCHOOL DISTRICT
(Behavioral Health Counseling Services – 2018-2019)**

THIS AGREEMENT is made the last date set forth adjacent to the signatures of the parties below by and between Yamhill County, a political subdivision of the State of Oregon, acting by and through the Family & Youth Division of its Health & Human Services Department (“County”) and **McMinnville School District**, 800 NE Lafayette Avenue, McMinnville, Oregon 97128 (“Contractor”).

RECITALS:

A. Contractor operates K-12 schools within its district. It has requested County to provide a qualified Family and Youth Division Behavioral Health Specialist at 1.0 FTE to work with students and families as assigned by Contractor. The County is willing to provide the services upon the terms and conditions set forth in this agreement.

B. This agreement is made to identify the respective obligations of County and Contractor in connection with County’s performance of services for Contractor. NOW, THEREFORE,

AGREEMENT:

NOW, THEREFORE, in consideration of the mutual covenants and agreements set forth herein below and of other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged by the parties hereto, County and Contractor, intending legally to be bound, hereby agree as follows:

Section 1. Contractor to provide funds for services; maximum cost.

a. Contractor agrees to reimburse County \$29,511.05 for a portion of County costs to pay one Qualified Behavioral Health Specialist to perform services under this agreement. County will issue five equal invoices of \$5,902.21 per month beginning January, 2019 through May, 2019, on or about the last day of the month. Contractor will pay County within 15 days of receipt of the invoice. In no event will total payments by Contractor to reimburse County for services under this subsection exceed \$29,511.05 for fiscal year 2018 - 2019.

Section 2. Statement of work under this agreement.

a. County services. County agrees to furnish for the benefit of Contractor one Behavioral Health Specialist (herein “Employee”) to work with students and families of the McMinnville School District to provide services generally provided by a qualified behavioral health practitioner. Examples of Employee’s duties are: crisis services; individual, family and group counseling; consultation to teachers and administrators; classroom observations and in-home services. Employee will commence providing services under this agreement about December 1, 2018. County agrees to meet periodically with Contractor to address any issues with performance to ensure proper structure for daily activities and to meet identified school need.

b. Contractor duties. Contractor agrees to provide facilities, reception and clerical support for Employee to meet with children and families assigned by Contractor. Contractor agrees to identify any issues early and regularly communicate feedback to County.

Section 3. Regulations and Duties. The County and Contractor agree to comply with all provisions of federal and state law relating to County's performance of services under this agreement.

Section 4. Independent Contractor; Workers' Compensation. The County is an independent contractor under this agreement. As an independent contractor, County is solely responsible for workers' compensation coverage for its employees in accordance with the Oregon Workers' Compensation law (ORS Chapter 656).

Section 5. Requirements Imposed by Oregon Revised Statutes and Constitution. Pursuant to Oregon law, the parties agree to comply with ORS 279B.200 to 279B.240, 2007 replacement part, and the Oregon Constitution to the extent those provisions apply.

Section 6. Financial Audit. Upon Contractor's request, the County will provide it with a copy of its Financial Audit upon completion of the audit.

Section 7. Assignment. This agreement shall not be assigned by either party without the prior written consent of the other party.

Section 8. Non-discrimination. County agrees that no person shall, on the grounds of race, color, religion, national origin, sex, marital status, or age, suffer discrimination in the performance of this agreement when employed by County.

Section 9. Attorney Fees and Costs. In the event an action, suit or proceeding, including appeal therefrom, is brought for failure to observe any of the terms of this agreement, each party shall be solely responsible for its own attorney's fees, expenses, costs and disbursements for said action, suit, proceeding or appeal.

Section 10. HIPAA Compliance. Contractor acknowledges that County is subject to the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996, (HIPAA), Pub. Law No. 104-191 and subject to the Federal Confidentiality of Alcohol and Drug Abuse Patient Records law and regulations, 42 USC §290dd-2 and 42 CFR Part 2 (collectively, "Part 2"). County and Contractor hereby agree to the respective obligations in the attached Exhibit A, "Business Associate/Qualified Service Organization Agreement" which is incorporated herein by this reference. County acknowledges that Contractor is subject to the privacy rule of the Family Education Rights and Privacy Act (FERPA).

Section 11. Duration; Termination; Effective Date.

a. Term. Unless terminated in accordance with subsection (b), the term of this agreement is December 1, 2018 through June 13, 2019.

b. Termination. Either party may terminate this agreement on thirty days written notice to the other party. Termination shall not excuse liabilities incurred prior to the termination date.

Section 12. Entire Agreement. This agreement contains the complete agreement of the parties. No oral agreements between the parties shall be valid unless reduced to a written instrument signed by each of the parties. This agreement may be amended only by a written instrument signed by each of the parties.

DONE the dates set forth adjacent to the signatures of the parties below.

MCMINNVILLE SCHOOL DISTRICT

By: Margalite Russell
(signature)
Date: 12-5-18

Margalite Russell
(printed name)

Title: Superintendent

YAMHILL COUNTY, OREGON

MARY STARRETT
MARY STARRETT, Chair
Board of Commissioners
Date: 12-6-18

SILAS HALLORAN-STEINER
SILAS HALLORAN-STEINER, Director
Health and Human Services Dept.

APPROVED AS TO FORM BY:

By: Christian Boenisch
CHRISTIAN BOENISCH,
County Counsel

EXHIBIT A
BUSINESS ASSOCIATE/QUALIFIED SERVICE ORGANIZATION AGREEMENT

RECITALS

- A. The CONTRACTOR may use and disclose Protected Health Information and Electronic Protected Health Information ("EPHI") in the performance of its obligations under the Agreement; and
- B. County operates a drug and alcohol treatment program subject to the Federal Confidentiality of Alcohol and Drug Abuse Patient Records law and regulations, 42 USC §290dd-2 and 42 CFR Part 2 (collectively, "Part 2"); if CONTRACTOR is a Qualified Service Organization (QSO) under Part 2 it also must agree to certain mandatory provisions regarding the use and disclosure of substance abuse treatment information with respect to the performance of its obligations under the Agreement; and
- C. The Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA") and its implementing Privacy Rule and Security Rule, 45 CFR Parts 160 and 164, require that COUNTY, as a Covered Entity, obtain satisfactory assurances from its Business Associates, as that term is defined in the Privacy Rule and Security Rule, that they will comply with the Business Associate requirements set forth in 45 CFR 164.502(e) and 164.504(e) and as amended by the Health Information Technology for Economic and Clinical Health ("HITECH") Act, Title XIII of Division A and Title IV of Division B of the American Recovery and Reinvestment Act of 2009, Public Law 111-5 ("ARRA"); CONTRACTOR is a Business Associate of COUNTY and desires to provide such assurances with respect to the performance of its obligations under the Agreement pursuant to this Business Associate/Qualified Service Organization Agreement ("BAA"); and
- D. Both COUNTY and CONTRACTOR are committed to compliance with the standards set forth in FERPA, Part 2, the Privacy Rule and Security Rule as amended by the HITECH Act, and as they may be amended further from time to time, in the performance of their obligations under the Agreement.

NOW, THEREFORE, in consideration of mutual and valuable consideration which the parties hereby acknowledge as received, the parties agree as follows:

AGREEMENT. The parties agree that the following terms and conditions shall apply to the performance of their obligations under the Agreement, effective upon execution of this BAA. Capitalized terms used, but not otherwise defined in this BAA, shall have the same meaning as those terms in Part 2, the Privacy Rule and Security Rule.

1. SERVICES. Pursuant to the Agreement, CONTRACTOR provides certain services for or on behalf of COUNTY, as described in the Agreement, which may involve the use and disclosure of Protected Health Information and EPHI. CONTRACTOR may make use of Protected Health Information and EPHI to perform those services if authorized in the Agreement and not otherwise limited or prohibited by this BAA, Part 2, the Privacy Rule, the Security Rule and other applicable federal or state laws or regulations. All other uses of Protected Health Information and EPHI are prohibited.

2. OBLIGATIONS AND ACTIVITIES OF CONTRACTOR.

(a) CONTRACTOR agrees to not use or disclose Protected Health Information or EPHI other than as permitted or required by the Agreement (as amended by this BAA), and as permitted by Part 2, the Privacy Rule, the Security Rule or as required by Law. Notwithstanding any other language in this BAA, CONTRACTOR acknowledges and agrees that any patient information it receives from COUNTY that is protected by Part 2 regulations is subject to protections that prohibit CONTRACTOR from disclosing such information to agents or subcontractors without the specific written consent of the subject individual.

(b) CONTRACTOR agrees to use appropriate safeguards to prevent use or disclosure of the Protected Health Information and EPHI other than as provided for by the Agreement as amended by this BAA, and if necessary will resist in judicial proceedings any efforts to obtain access to patient records except as permitted by the Part 2 regulations.

(c) CONTRACTOR agrees to mitigate, to the extent practicable, any harmful effect that is known to CONTRACTOR of a use or disclosure of Protected Health Information or EPHI by CONTRACTOR in violation of the requirements of the Agreement, as amended by this BAA.

(d) CONTRACTOR agrees to report to COUNTY, as promptly as possible, any use or disclosure of the Protected Health Information or EPHI not provided for by the Agreement, as amended by this BAA, of which it becomes aware.

(e) CONTRACTOR agrees to ensure that any agent, including a contract hearing officer or other subcontractor, to whom it provides Protected Health Information or EPHI received from, or created or received by CONTRACTOR on behalf of COUNTY, agrees to the same restrictions and conditions that apply through the Agreement, as amended by this BAA, to CONTRACTOR with respect to such information.

(f) CONTRACTOR agrees to provide access, at the request of COUNTY, and in the time and manner designated by COUNTY, to Protected Health Information and EPHI in a Designated Record Set (the hearing file), to COUNTY or, as directed by COUNTY, to an Individual in order to meet the requirements under 45 CFR 164.524.

(g) CONTRACTOR agrees to make any amendment(s) to Protected Health Information and EPHI in a Designated Record Set that the COUNTY directs or agrees to pursuant to 45 CFR 164.526 at the request of COUNTY or an Individual, and in the time and manner designated by COUNTY.

(h) CONTRACTOR agrees to make internal practices, books, and records, including policies and procedures and any Protected Health Information or EPHI, relating to the use and disclosure of Protected Health Information and EPHI received from, or created or received by CONTRACTOR on behalf of COUNTY, available to COUNTY or to the Secretary, within the time and in the manner designated by COUNTY or the Secretary, for purposes of the Secretary determining COUNTY's compliance with Part 2, the Privacy Rule or Security Rule.

(i) CONTRACTOR agrees to refer requests for disclosures of Protected Health Information and EPHI to the COUNTY for response, except for requests related to conducting the contested case hearing. To the extent CONTRACTOR discloses Protected Health Information or EPHI for purposes not related to conducting the contested case hearing, CONTRACTOR agrees to document such disclosures to the extent such documentation is required for COUNTY to respond to a request by an Individual for an accounting of disclosures of Protected Health Information and EPHI in accordance with 45 CFR 164.528.

(j) CONTRACTOR agrees to provide to COUNTY or an Individual, in time and manner to be designated by COUNTY, information collected in accordance with Section 2(i) of this BAA, to permit COUNTY to respond to a request by an Individual for an accounting of disclosures of Protected Health Information and EPHI in accordance with 45 CFR 164.528.

(k) CONTRACTOR agrees to implement administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the EPHI that it creates, receives, maintains, or transmits on behalf of the COUNTY.

(l) In the event of Discovery of a Breach of Unsecured Protected Health Information, CONTRACTOR shall:

(i) Notify the COUNTY of such Breach. Notification shall include identification of each individual whose Unsecured Protected Health Information has been, or is reasonably believed by CONTRACTOR to have been accessed, acquired or disclosed during such Breach and any other information as may be reasonably required by the COUNTY necessary for the COUNTY to meet its notification obligations;

(ii) Confer with the COUNTY as to the preparation and issuance of an appropriate notice to each individual whose Unsecured Protected Health Information has been, or is reasonably believed by CONTRACTOR to have been accessed, acquired or disclosed as a result of such Breach;

(iii) Where the Breach involves more than 500 individuals, confer with the COUNTY as to the preparation and issuance of an appropriate notice to prominent media outlets within the State or as appropriate, local jurisdictions; and,

(iv) Confer with the COUNTY as to the preparation and issuance of an appropriate notice to the Secretary of DHHS of Unsecured Protected Health Information that has been acquired or disclosed in a Breach. CONTRACTOR understands that if the Breach was with respect to 500 or more individuals, such notice to the Secretary must be provided immediately, and therefore, time is of the essence in the obligation to confer with the COUNTY. If the Breach was with respect to less than 500 individuals, a log may be maintained of any such Breach and the log shall be provided to the Secretary annually documenting such Breaches occurring during the year involved.

(v) Except as set forth in (vi) below, notifications required by this section are required to be made without unreasonable delay and in no case later than 60 calendar days after the Discovery of a Breach. Therefore, the notification of a Breach to the COUNTY shall be made as soon as possible and CONTRACTOR shall confer with the COUNTY as soon as practicable thereafter, but in no event, shall notification to the COUNTY be later than 30 calendar days after the Discovery of a Breach. Any notice shall be provided in the manner required by the HITECH Act, sec 13402(e) and (f), Public Law 111-5, 45 CFR 164.404 through 164.410 and as agreed upon by the COUNTY.

(vi) Any notification required by this section may be delayed by a law enforcement official in accordance with the HITECH Act, sec 13402(g), Public Law 111-5.

(vii) For purposes of this section, the terms "Unsecured Protected Health Information" and "Breach" shall have the meaning set forth in 45 CFR § 164.402. A Breach will be considered as "Discovered" in accordance with the HITECH Act, sec 13402(c), Public Law 111-5, 45 CFR 164.404(a)(2).

(m) CONTRACTOR shall comply with 45 C.F.R. 164.308, 164.310, 164.312 and 164.316 and all requirements of the HITECH Act, Public Law 111-5, that relate to security and that are made applicable to Covered Entities, as if CONTRACTOR were a Covered Entity.

(n) CONTRACTOR shall be liable to the COUNTY, and shall indemnify the COUNTY for any and all direct costs incurred by the COUNTY, including, but not limited to, costs of issuing any notices required by HITECH or any other applicable law, as a result of CONTRACTOR's Breach of Unsecured Protected Health Information.

3. PERMITTED USES AND DISCLOSURES BY CONTRACTOR.

(a) General Use and Disclosure Provisions.

(1) Except as otherwise limited or prohibited by this BAA, CONTRACTOR may use or disclose Protected Health Information and EPHI to perform functions, activities, or services for, or on behalf of, COUNTY as specified in the Agreement and this BAA, provided that such use or disclosure would not violate Part 2, the Privacy Rule or Security Rule if done by COUNTY or the minimum necessary policies and procedures of COUNTY.

(2) COUNTY has determined that disclosures to CONTRACTOR under the Agreement are necessary and appropriate for COUNTY's Treatment, Services, Payment and/or Health Care Operations under Part 2, the HIPAA Privacy Rule and Security Rule and Required By Law under Or Laws 1999, ch. 849 (HB 2525).

(3) All applicable federal and state confidentiality or privacy statutes or regulations, and related procedures, continue to apply to the uses and disclosures of information under this BAA, except to the extent preempted by Part 2 or the HIPAA Privacy Rule and Security Rule.

(b) Specific Use and Disclosure Provisions.

(1) Except as otherwise limited in this BAA, CONTRACTOR may use Protected Health Information and EPHI for the proper management and administration of the CONTRACTOR or to carry out the legal responsibilities of the CONTRACTOR.

(2) Except as otherwise limited in this BAA, CONTRACTOR may disclose Protected Health Information and EPHI for the proper management and administration of the CONTRACTOR, provided that disclosures are Required By Law, or CONTRACTOR obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the CONTRACTOR of any instances of which it is aware in which the confidentiality of the information has been breached.

(3) CONTRACTOR may use Protected Health Information and EPHI to report violations of law to appropriate Federal and State authorities, consistent with 45 CFR 164.502(j)(1).

(4) CONTRACTOR may not aggregate or compile COUNTY's Protected Health Information or EPHI with the Protected Health Information or EPHI of other Covered Entities unless the Agreement permits CONTRACTOR to perform Data Aggregation services. If the Agreement permits CONTRACTOR to provide Data Aggregation services, CONTRACTOR may use Protected Health Information and EPHI to provide the Data Aggregation services requested by COUNTY as permitted by 45 CFR 164.504(e)(2)(i)(B), subject to any limitations contained in this BAA. If Data Aggregation services are requested by COUNTY, CONTRACTOR is authorized to aggregate COUNTY's Protected Health Information and EPHI with Protected Health Information or EPHI of other Covered Entities that the CONTRACTOR has in its possession through its capacity as a CONTRACTOR to such other Covered Entities provided that the purpose of such aggregation is to provide COUNTY with data analysis relating to the Health Care Operations of COUNTY. Under no circumstances may CONTRACTOR disclose Protected Health Information or EPHI of COUNTY to another Covered Entity absent the express authorization of COUNTY.

4. OBLIGATIONS OF COUNTY.

(a) COUNTY shall notify CONTRACTOR of any limitation(s) in its notice of privacy practices of COUNTY in accordance with 45 CFR 164.520, to the extent that such limitation may affect CONTRACTOR's use or disclosure of Protected Health Information and EPHI. COUNTY may satisfy this obligation by providing CONTRACTOR with COUNTY's most current Notice of Privacy Practices.

(b) COUNTY shall notify CONTRACTOR of any changes in, or revocation of, permission by Individual to use or disclose Protected Health Information or EPHI, to the extent that such changes may affect CONTRACTOR's use or disclosure of Protected Health Information and EPHI.

(c) COUNTY shall notify CONTRACTOR of any restriction to the use or disclosure of Protected Health Information or EPHI that COUNTY has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect CONTRACTOR's use or disclosure of Protected Health Information or EPHI.

5. PERMISSIBLE REQUESTS BY COUNTY.

(a) COUNTY shall not request CONTRACTOR to use or disclose Protected Health Information or EPHI in any manner that would not be permissible under Part 2, the Privacy Rule or Security Rule if done by COUNTY, except as permitted by Section 3(b) above.

(b) COUNTY may conduct a survey of CONTRACTOR with respect to CONTRACTOR's compliance with the terms of this BAA and applicable law for the establishment of policies and procedures for the safeguarding of any Protected Health Information and EPHI provided to CONTRACTOR by COUNTY. CONTRACTOR shall implement any recommendations of COUNTY resulting from such surveys as may be reasonably necessary to ensure compliance with the terms of this BAA and applicable law for the safeguarding of any Protected Health Information and EPHI provided to CONTRACTOR by COUNTY.

6. TERM AND TERMINATION.

(a) Effective Date; Term. This BAA shall be effective on the date on which all parties have executed it and all necessary approvals, if any, have been granted. This BAA shall terminate on the earlier of (i) the date of termination of the Agreement, or (ii) the date on which termination of the BAA is effective under Section 6(b).

(b) Termination for Cause. In addition to any other rights or remedies provided in this BAA, upon either the COUNTY's or CONTRACTOR's knowledge of a material breach by the other party of that party's obligations under this BAA, the party not in breach shall either:

(1) Notify the other party of the breach and specify a reasonable opportunity in the Notice of Breach to the party in breach to cure the breach or end the violation, and terminate the Agreement and this BAA if the party in breach does not cure the breach of the terms of this BAA or end the violation within the time specified;

(2) Immediately terminate the Agreement and this BAA if the party in breach has breached a material term of this BAA and cure is not possible in the reasonable judgment of the party not in breach; or

(3) If neither termination nor cure is feasible, the party not in breach shall report the violation to the Secretary.

(4) The rights and remedies provided in this BAA are in addition to any rights and remedies provided in the Agreement.

(c) Effect of Termination.

(1) Except as provided in paragraph (2) of this Section 6(c), upon termination of the Agreement and this BAA, for any reason, the party in breach shall, at the other party's option, return or destroy all Protected Health Information and EPHI received from the other party, or created or received by CONTRACTOR on behalf of COUNTY. This provision shall apply to Protected Health Information and EPHI that is in the possession of CONTRACTOR or agents of CONTRACTOR. CONTRACTOR shall retain no copies of the Protected Health Information or EPHI.

(2) In the event that CONTRACTOR determines that returning or destroying the Protected Health Information or EPHI is infeasible, CONTRACTOR shall provide to COUNTY notification of the conditions that make return or destruction infeasible. Upon COUNTY's written acknowledgement that return or destruction of Protected Health Information or EPHI is infeasible, CONTRACTOR shall extend the protections of this BAA to such Protected Health Information and EPHI and limit further uses and disclosures of such Protected Health Information and EPHI to those purposes that make the return or destruction infeasible, for so long as CONTRACTOR maintains such Protected Health Information or EPHI.

7. MISCELLANEOUS.

(a) Regulatory References. A reference in this BAA to a section in Part 2, the Privacy Rule, or Security Rule, or the HITECH Act means the section in effect as of the effective date of this BAA or as the Rules may be subsequently amended from time to time.

(b) Amendment; Waiver. The Parties agree to take such action as is necessary to amend the Agreement and this BAA from time to time as is necessary for COUNTY to comply with the requirements of Part 2, the Privacy Rule, Security Rule, HIPAA and the HITECH Act. No provision hereof shall be deemed waived unless in writing, duly signed by authorized representatives of the parties. A waiver with respect to one event shall not be construed as continuing, or as a bar to or waiver of any other right or remedy under this BAA.

(c) Survival. The respective rights and obligations of CONTRACTOR under Section 6(c), this Section 7(c), and Section 7(e) of this BAA shall survive the termination of the Agreement and this BAA.

(d) Interpretation; Order of Precedence. Any ambiguity in this BAA or the Agreement shall be resolved to permit COUNTY to comply with Part 2, the Privacy Rule, Security Rule and the HITECH Act. The terms of this BAA amend and supplement the terms of the Agreement, and whenever possible, all terms and conditions in this BAA and the Agreement are to be harmonized. In the event of a conflict between the terms of this BAA and the terms of the Agreement, the terms of this BAA shall control; provided, however, that this BAA shall not supersede any other federal or state law or regulation governing the legal relationship of the parties, or the confidentiality of records or information, except to the extent that HIPAA preempts those laws or regulations. In the event of any conflict between the provisions of the Agreement (as amended by this BAA) and Part 2, the Privacy Rule or the Security Rule, the more stringent rule shall apply.

(e) No Third-Party Beneficiaries. COUNTY and CONTRACTOR are the only parties to this BAA and are the only parties entitled to enforce its terms. Nothing in this BAA gives, is intended to give, or shall be construed to give or provide any benefit or right, whether directly, indirectly, or otherwise, to third

persons unless such third persons are individually identified by name herein and expressly described as intended beneficiaries of the terms of this BAA.

(f) Successors and Assigns. The provisions of this BAA and the Agreement shall be binding upon and shall inure to the benefit of the parties hereto and their respective successors and permitted assigns, if any.

(g) Except As Amended. Except as amended by this BAA, all terms and conditions of the Agreement shall remain in full force and effect.

8. SIGNATURES.

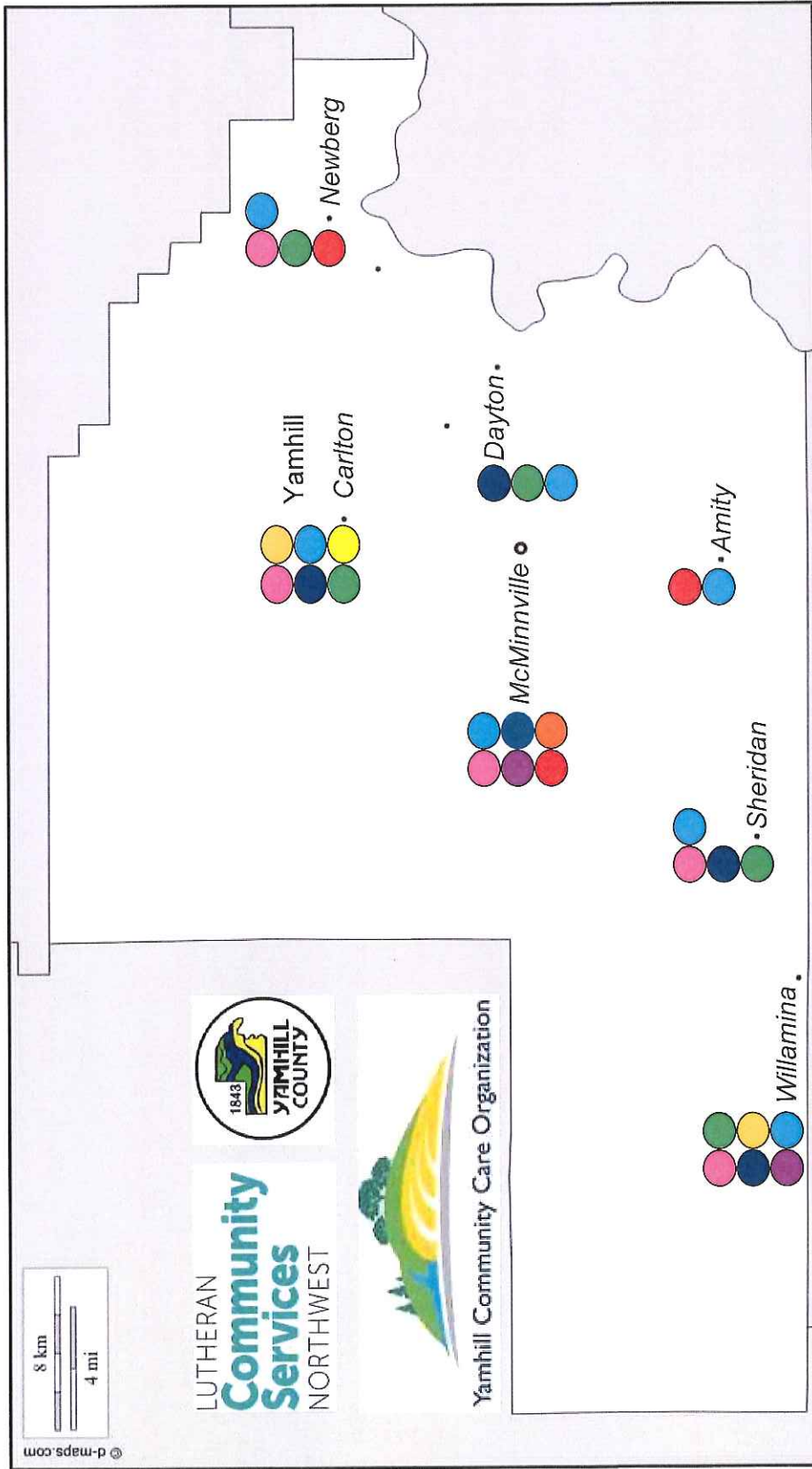
By signing this BAA, the parties certify that they have read and understood this BAA, that they agree to be bound by the terms of this BAA and the Agreement, as amended, and that they have the authority to sign this BAA.

CONTRACTOR:

By: Mafiz Ramee
Title: Superintendent
Date: 12-5-18

COUNTY:

By: [Signature]
Title: Commissioner
Date: 12-6-18



Programs:

- Alcohol and Drug Screening and Groups
- Behavioral Health Complete Services
- Family Check Up
- Good Behavior Game
- Onsite Oregon Health Plan Services
- School-Based Health Center
- Service Integration Teams (SIT)
- Sources of Strength
- Wellness to Learn

School-Based Staff 2017-18:

Lutheran Community Services

- McMinnville - 1.4 FTE

Health and Human Services

- Dayton - 1.1 FTE
- McMinnville - 0.15 FTE
- Newberg - 0.2 FTE
- Sheridan - 1.5 FTE
- Willamina - 2.1 FTE
- Yamhill Carlton - 2.1 FTE

School-Based Staff 2018-19:

Lutheran Community Services

- McMinnville/Lafayette - 3.0 FTE
- Amity - 1 FTE
- Newberg/Dundee - 1.3 FTE

Health and Human Services

- Dayton - 1.1 FTE
- McMinnville - 1.6 FTE
- Newberg - 0.6 FTE
- Sheridan - 1.5 FTE
- Willamina - 2.1 FTE
- Yamhill Carlton - 2.5 FTE

Good Behavioral Game

The PAX Good Behavior Game is an evidence-based, trauma-informed practice that consists of behavioral health strategies delivered by teachers in the classroom. It is a universal preventive intervention that improves classroom management and ties into the PBIS tiered intervention model. PAX Good Behavioral Game also provides a lifetime of benefits for every child by improving self-regulation and social emotional learning. Children who have participated in this program during elementary school not only improve classroom performance, but also have fewer behavioral health challenges, decreased suicide ideation and fewer attempts and decreased alcohol, tobacco and drug use.

Family Check Up

The Family Check-Up (FCU) model is a strengths-based, family-centered intervention that promotes family management and addresses child and adolescent adjustment problems. The intervention has two phases: 1) the FCU, which involves an initial assessment and feedback; 2) parent management training, which focuses on positive behavior support, healthy limit setting, and relationship building. The intervention model is adaptive and tailored to address the specific needs of each child and family and can be integrated into a variety of service settings, including public schools. Demonstrated outcomes of this program include fewer behavioral and emotional problems, increased emotional regulation, increased school readiness, and decreased risk for depression, bullying, obesity, arrests, and alcohol, tobacco and drug use.

Service Integration Teams

The purpose of a Service Integration Team is to facilitate collaboration among community partners to provide coordinated resources and information for individuals and families. The goal of these teams is to expedite solutions by matching resources to clearly defined needs, while avoiding duplication of service.

School Based Health Center

School Based Health Centers (SBHCs) are a unique health care model for comprehensive physical, mental and preventive health services provided to youth and adolescents either within a school or on school property. With easy access to health care in a school setting, SBHCs reduce barriers such as cost and transportation that often keep children and youth from seeking the health services they need. SBHCs provide a full range of physical, mental and preventative health services to all students, regardless of their ability to pay.

Sources of Strength

Sources of Strength is a youth suicide prevention program designed to harness the power of peer social networks to change unhealthy norms and culture, ultimately preventing suicide, bullying, and substance abuse. The mission of Sources of Strength is to prevent suicide by increasing help seeking behaviors and promoting connections between peers and caring adults. Sources of Strength moves beyond a singular focus on risk factors by utilizing an upstream approach for youth suicide prevention. This upstream model strengthens multiple sources of support (protective factors) around young individuals so that when times get hard they have strengths to rely on.

Wellness to Learn

Wellness to Learn is a program designed to increase support for youth in school settings in order to meet their health needs and be successful in school. The model utilizes Community Health Workers who work directly with school staff and families to meet the health needs of students and families.

Yamhill CCO, Yamhill County HHS & Lutheran Community Services (LCSNW): Partners in Prevention, Health and Education

All school-based packages include the following services from Yamhill County HHS:

- Flight Team
- Threat Assessments
- Emergency Department Screenings
- Crisis Line Utilization (Lines for Life)
- Mental Health First Aid Training
- Population and Health Prevention Programs

Complete Services

Complete access to mental health services for **all students** in each district, regardless of insurance status. Funding for services based on a 50/50 cost-share contract between HHS or LCSNW and each school district, which includes the following services:

- Dedicated therapist based at each school
- Consultations with school staff for any student
- Behavior support
- Case management
- Therapist participation in IEP/504 meetings
- Support for Trauma-Informed Schools Initiative
- Integrated care coordination between school staff, primary care providers, county- and community-based service providers, and therapists
- Pre-K to Kindergarten transition support
- Skills training on and/or off campus
- School-based parent education and support
- Social and behavioral skill-building groups
- Staff training on mental health topics and in-class intervention use
- Preventive mental health and social education
- Attend SI Team meetings
- Participate in Problem Solving Team meetings
- Facilitate referrals for medication evaluations
- Family support and outreach, when appropriate

Oregon Health Plan (OHP) Primary Services

School- or clinic-based mental health services limited to students in Yamhill County public schools covered under the *Oregon Health Plan**. No cost share required; however, in-kind space and staff support is provided by district staff. Services include:

- Therapist meets with covered students at each school based on availability
- *School staff* collect needed consents and paperwork from students and legal caregivers, and submit a referral to HHS or LCSNW
- *School administration* provides leadership to develop model for HHS or LCSNW staff to work with students, teachers, and families

*Outpatient mental health therapy is available as medically appropriate with all statutorily required consents in place prior to commencement of services beyond outreach/screening. Each model assumes schools will provide a confidential meeting space and internet access. Core funding is primarily through Yamhill CCO with 10% or less coming through state Medicaid (i.e. *Oregon Health Plan*) open card plan reimbursement. Crisis services, such as Flight Team, Psychiatric Screening at Emergency Departments, Threat Assessments, and Health Promotion, are funded through State General Funds or other dedicated public health grant funds.

