

# **Agenda**

## **Delivery System Transformation Committee**

February 6, 2020 4:30 – 6:00 pm  
Samaritan Walnut Building, Endeavor Conference Room

- |   |   |  |             |
|---|---|--|-------------|
| <b>1. Introductions</b>                     |   | <b>Sherlyn Dahl</b> , Community Health Centers of Benton and Linn Counties | <b>4:30</b> |
| <b>2. Transformation Update</b>             |   | <b>Stephanie Jensen</b> , IHN-CCO  | <b>4:35</b> |
| <b>3. Equity in Voting Subcommittee</b>     | p. 7-8  | <b>Charissa White</b> , IHN-CCO  | <b>4:40</b> |
| <b>4. Pilot Heatmaps and Sustainability</b> | p. 9-11   | <b>Charissa White</b> , IHN-CCO  | <b>4:55</b> |
| <b>5. Workgroup Update</b>                  | p. 7 of Strategic Planning Document   | <b>Stephanie Jensen</b> , IHN-CCO  | <b>5:25</b> |
| <b>6. Wrap Up</b>                           |   | <b>Sherlyn Dahl</b> , Community Health Centers of Benton and Linn Counties | <b>5:55</b> |
|   | <ul style="list-style-type: none"><li>• Announcements</li><li>• Next Meeting: February 20, 2020</li></ul> |  |             |

## Commonly Used Acronyms

Acronym	Meaning
ACEs	Adverse Childhood Experiences
APM	Alternative Payment Methodology
CAC	Community Advisory Council
CCO	Coordinated Care Organization
CEO	Chief Executive Officer
CHIP	Community Health Improvement Plan
CHW	Community Health Worker
COO	Chief Operations Officer
CRC	Colorectal Cancer
DST	Delivery System Transformation Committee
ED	Emergency Department
EHR	Electronic Health Records
ER	Emergency Room
HE	Health Equity
HN	Health Navigator
HRS	Health Related Services
IHN-CCO	InterCommunity Health Network Coordinated Care Organization
LCSW	Licensed Clinical Social Worker
MOU	Memorandum of Understanding
OHA	Oregon Health Authority
PCP	Primary Care Physician
PCPCH	Patient-Centered Primary Care Home
PMPM	Per Member Per Month
PSS	Peer Support Specialist
PWS	Peer Wellness Specialist
RFP	Request for Proposal
RHIC	Regional Health Information Collaborative
RPC	Regional Planning Council
SDoH	Social Determinants of Health
SHP	Samaritan Health Plans
SHS	Samaritan Health Services
SOW	Statement of Work
TI	Trauma Informed
THW	Traditional Health Worker
TQS	Transformation and Quality Strategy
UCC	Universal Care Coordination
VbP	Value Based Payments
WG	Workgroup

## Delivery System Transformation (DST) Pilots and Workgroups

Acronym	Project	Sites	Counties	Start	End
BRAVE	Bravery Youth Center	Olalla Center for Children and Families	Lincoln	1/1/20	12/31/20
DOUL	Community Doula	Heart of the Valley Birth and Beyond	Benton; Lincoln; Linn	1/1/18	12/31/20
HEWG	Health Equity Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	5/1/15	present
HSP0	Helping High School Students to Understand Pain, Opioid Addiction, & Healthy Self-Care	Corvallis School District 509j	Benton	1/1/19	12/31/20
HTEM	Homeless Resource Team	Samaritan Health Services	Benton	1/1/19	6/30/20
HUBV	Hub City Village	Creating Housing Coalition	Linn	1/1/20	12/31/20
IFCW	Integrated Foster Child Wellbeing	Samaritan Health Services	Benton; Lincoln; Linn	1/1/19	12/31/20
NPSH	Navigation to Permanent Supportive Housing	Lincoln County Sheriff's Office	Lincoln	1/1/20	12/31/20
PWST	Peer Wellness Specialist Training	Family Tree Relief Nursery	Benton; Lincoln; Linn	1/1/18	12/31/20
RDUC	Reduce and Improve	Capitol Dental Care, Lebanon Community Hospital	Linn	1/1/19	6/30/20
SDoHWG	Social Determinants of Health Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	11/16/17	present
SKIL	Skills and Connections to Support Housing	Corvallis Housing First	Benton	1/1/20	12/31/20
THWWG	Traditional Health Workers Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	5/21/13	present
UCCWG	Universal Care Coordination Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	6/26/17	present
WINS	Wellness in Neighborhood Stores	OSU Center for Health Innovation, Linn County Public Health	Linn	1/1/20	12/31/20
WtoS	Wellness to Smiles	Advantage Dental from DentaQuest	Lincoln	1/1/20	12/31/20

# Delivery System Transformation Committee (DST) 2020 Calendar

<b>January</b>	9	Strategic Planning: Accessibility & Charter		
	23	Strategic Planning: Partnerships & Evaluation		
<b>February</b>	6	Equity in Voting	Strategic Planning: Pilot History	Strategic Planning: Workgroups
	20	CORO	PCRC	Strategic Planning
<b>March</b>	5	Strategic Planning		
	19	Board Disc.	RFP Discussion	
<b>April</b>	2	Health Equity Training		
	16	RFP Decisions		
	30	Spreading Promising Practices		
<b>May</b>	14	Health Equity Training		
	28	Board Disc.		Pilot Update

<b>June</b>	11	LOI Decisions			
	25	Board Disc.	Spreading Promising Practices		
<b>July</b>	9	Health Equity Training			
	23	Closeout	Closeout		
<b>August</b>	6	Proposal Presentations			
	20	Proposal Presentations			
<b>September</b>	3	Proposal Decisions			
	17	Closeout	Closeout		
<b>October</b>	1			Workgroup Update	
	15				
	29	Board Disc.			
<b>Nov</b>	12				
<b>Dec</b>	10				

### KEY

Tentative closeout	Booked closeout
Tentative RFP	Booked RFP
Tentative strategic planning	Booked strategic planning
Tentative miscellaneous	Booked miscellaneous
Tentative training	Booked training
Tentative update	Booked update
Tentative workgroup	Booked workgroup

# Minutes

## Delivery System Transformation Committee

January 23, 2020 4:30 – 6:00 pm  
Samaritan Health Plans Walnut Building: Endeavor (conference room)

Present			
Chair: Sherlyn Dahl	Ronda Lindley-Bennett	Charissa Young-White	Dick Knowles
Joell Archibald	Stephanie Jensen	Jeff Blackford	Giovanni Galvez
Kevin Ewanchyna	Annie McDonald	Kim Lane	Andrea Myhre
Deb Fell Carlson	Shirley Byrd	Britny Chandler	Carly Castaneda
Lalori Lager	Priya Prakash	Rebekah Fowler	Melissa Woods
Jennifer Schwartz	Angel Parmeter	Erin Sedlacek	Heidi May-Stoulil
Tyra Jansson	Bill Bouska	Kara Beck	Alicia Bublitz
<b>Video</b>	Bettina Schempf	Clarice Amorim Freitas	Karen Hall
Elijah Johnson	Nicole Fields		

### **Transformation Update: Charissa White and Stephanie Jensen**

- Welcome to Giovanni Galvez, the intern hired to support the Social Determinants of Health and Health Equity Workgroups.
- Contact Transformation if you or someone you know would be a good fit to be the Universal Care Coordination Workgroup chair.
  - The Committee approves Transformation taking the role of facilitation until at least one chair has volunteered.

### **Delivery System Transformation Committee (DST) Objectives and Membership**

#### **2020 DST Charter**

- See page 3 and Appendix B of the strategic planning document.
  - Changes due to feedback from the previous Committee meeting include:
    - Broadened language around what playing an active role means by clarifying all members should be a vocal champion of the DST's work.
    - Light bulb image created to help illustrate what fostering the message and the spirit of the DST really means.
  - Transformation to create a postcard type document with the lightbulb and introduction for DST members to have as a quick handout to interested parties.
- **Decision:** Charter approved via consensus.

#### **Roles and Responsibilities**

- **Decision:** Roles and Responsibilities form approved via consensus.

#### **Voter Bias and Equity in Voting Subcommittee**

- Meeting Tuesday, January 28, 2020.
- Three members of the DST have committed.
- Suggestion by the Committee to call it the Equity in Voting Subcommittee.
- Would like to have recommendations in place by decision-making time.

#### **IHN-CCO History 2019**

- Average attendance up to 35. Cause for celebration!

#### **Community Partners and Stakeholders**

- Request to add the date to the partnership graphic indicating it is a point in time snapshot. Partners that are missing include: businesses like Hewlett Packard (HP), the Chamber of Commerce, Rotary, and more.
- The faith-based community.
- Others include Be Undivided, Transform Lebanon, Oregon State University Extension programs.
- Connect the dots for the committee on how the business sector can support IHN-CCO member health. Place matters, meaning the business sector has influence over environmental, policy, and other social aspects that affect the entire community including IHN-CCO members.

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- Public health is also engaging these partners; review duplication and make the connection for the business partners.

### Pilots Through the Ages

- See page 6 of strategic planning document.
  - Graphic displays different pilot focus areas (see key) as well as the length of each study.
  - Pilot evaluation heat map and score cards coming soon.
- Pilot Categorization and Evaluation
  - Suggestion to have a clear way to be able to have a resource for people to reach out on their own without always having to go through transformation if they are curious about a pilot?

### Quarterly Report Recommendations

- Create a short blurb that highlights individual success narratives around each pilot and speaks to the importance of its work.
- Capture system level success in a way this impactful.

### Newsletter Discussion

- Intent: create bi-monthly or quarterly report that can update DST on pilot success and share narratives.
- Audience: Are IHN-CCO members a part of the audience? Is there an opportunity around member outreach?
- Suggestion to have a very targeted approach to the newsletter.
- Concerns about effort vs. impact.
- Use IHNtogether.org to hold the newsletter.
- Social media platforms like Facebook, or LinkedIn for a broader reach.
- Add a Heart to Heart spotlight that focuses a page on the DST.
- Use the Provider e-newsletter within Samaritan Health Plans to spread the word.

### What's Next

- Work groups to attend the next meeting report progress.
- These conversations will continue so the group can prioritize what they will use their funding toward in the next calendar year.
- March 17, 2020 Moving Forward Together meeting around the new CCO 2.0 requirements.
  - March 19, 2020 DST meeting will overview what is presented at this meeting to align efforts.
- Evaluation of previous projects.

## 2020 IHN-CCO DST Scoring Rubric

	0	3	5	7	10
<b>Transformational</b>	No innovation aspects; strategy has been done in this region or type of organization	Little innovation; potentially to new region	Some innovation	New and innovative; new partnerships among agencies with new strategy for one or more partner	New and innovative strategy for all partners involved
<b>Health Equity</b>	No health equity plan	Targets IHN-CCO members but plan unclear OR does not clearly target IHN-CCO members but has a health equity plan	Little context, approach not clear	Clear approach, target population identified OR plan not clear, but target population obviously high-risk	Hits high-risk population and outlines plan for health equity approach clearly and effectively
<b>Health Improvement</b>	Unlikely to result in improvement in the health or healthcare of IHN-CCO members	May result in improvement in the health or healthcare of IHN-CCO members	Likely to result in improvement in the health or healthcare of IHN-CCO members	Likely to result in significant improvement in the health or healthcare of IHN-CCO members	Will result in significant improvement in the health or health care of IHN-CCO members
<b>Improved Access</b>	No improved access for IHN-CCO members	Some improved availability of services, culturally considerate care, or quality and appropriate care	Likely to result in some improved access (availability of services, culturally considerate care, and quality and appropriate care)	Likely to result in improved access (availability of services, culturally considerate care, and quality, appropriate care)	Will result in significantly improved access (availability of services, culturally considerate care, and quality, appropriate care)
<b>Need</b>	No need established and demographics not indicated	Need is not clearly defined but demographics are indicated	Need defined, demographics outlined	Need established and demographics of IHN-CCO members clearly defined	Substantial need established and demographics of IHN-CCO clearly defined
<b>Outcomes</b>	Outcomes are not aligned with the Community Health Improvement Plan (CHIP)	Outcomes and measures are aligned to the CHIP but not pilot goals	Outcomes and measures are aligned to pilot goals and the CHIP	Outcomes and measures are aligned to pilot goals, the CHIP, and will be sufficient to evaluate pilot success	Outcomes and measures are aligned to pilot goals, the CHIP, will be sufficient to evaluate success, and yields outcomes that are new or different
<b>DELETE: Reduces Costs</b>	Does not address reducing costs, cannot determine	Has the potential to reduce costs and does not target area of healthcare associated high or rising costs	Has the potential to reduce costs	Has the potential to reduce costs and targets areas of healthcare associated with high or rising costs	Likely will reduce cost and targets areas of healthcare associated with high or rising costs
<b>ADD: Influences Cost</b>	Does not influence costs, cannot determine	Has the potential to influence cost, does not target area of healthcare associated high or rising costs	Has the potential to influence cost	Has the potential to influence cost and targets an area (s) of healthcare associated with high or rising costs	Likely will influence cost. Targets an area (s) of healthcare associated with high or rising costs
<b>Resource Investment</b>	Budget is unreasonable and inappropriate to the work proposed	Budget is not well justified and not tied to pilot goals	Reasonable and appropriate budget	Budget is reasonable, appropriate to the work, and well justified	Budget is reasonable, appropriate to the work, and well justified. Directly tied to the pilot goals; exhibits consideration for other funding sources
<b>Social Determinants of Health</b>	Does not address Social Determinants of Health (SDoH)	Addresses SDoH but not clearly defined OR does not address food security, housing, or transportation	Little context, approach not clear, does address food security, housing, or transportation	Clear approach to addressing food security, housing, or transportation	Clearly addresses food security, housing, or transportation in a new and innovative way
<b>Sustainable</b>	No sustainability plan	Plan not clearly defined	Has a defined plan, potential to sustain	Clearly defined sustainability plan including replicability and continued funding	Clearly defined sustainability plan including replicability and continued funding; likely to sustain, continue, and replicate after DST funding ends

# IHN-CCO DST Pilot Proposal Scorecard

Pilot Name:

Amount Requested:

Applicant Organization:

## Response Scale (write in box to the right)

Disagree/not included

Agree

Strongly Agree



Approach, Significance, and Impact	Score
<b>Health Equity:</b> The pilot has a defined approach for fair opportunities for members to be as healthy as possible.	
<b>Health Improvement:</b> The pilot holds promise for making a significant improvement in the health or health care of IHN-CCO members.	
<b>Improved Access:</b> The pilot activities will result in improved access of healthcare; availability of services, culturally considerate care, and quality and appropriate care to IHN-CCO members.	
<b>Need:</b> The proposer has established that there is a substantial need for this pilot and has indicated the demographics of the Medicaid population impacted.	
<b>Outcomes:</b> Proposal outcomes and measures are aligned to pilot goals and will be sufficient to evaluate pilot success. The pilot yields measurable outcomes that are new or different. The pilot outcomes are aligned with the Community Health Improvement Plan's Outcomes and Indicator Concepts.	
<b>Reduces Costs:</b> The pilot has the potential to reduce costs. The pilot targets areas of health care associated with rising costs.	
<b>Resource Investment:</b> The budget is reasonable and appropriate to the work proposed. It is well justified and directly tied to the pilot goals. The pilot has exhibited consideration for other funding sources.	
<b>Social Determinants of Health:</b> The pilot has a new or innovative way to address Social Determinants of Health.	
<b>Sustainable:</b> The pilot plans to sustain and continue the work after DST funding ends. It includes a strategy for sustaining the project for at least an additional year after the pilot phase is completed.	
<b>Transformational:</b> The pilot will be transformative and creates opportunities for innovation and new learning.	
<b>TOTAL PROPOSAL SCORE (of a possible 100)</b>	

**Comments:**



# IHN-CCO DST Transformation Crosswalk

Transformation and Quality Strategy Components (TQS), Community Health Improvement Plan Health Impact Areas (CHIP Areas), and CCO Incentive Metric Areas

		PILOTS												WORKGROUPS				
		BRAVE	DOUL	HSPO	HTEM	HUBV	IFCW	NPSH	PWST	RDUC	SKIL	WINS	WtoS	HE	SDoH	THW	UCC	
Focus Areas	Social Determinants of Health: Food Security																	
	Social Determinants of Health: Housing																	
	Social Determinants of Health: Transportation																	
Transformation and Quality Strategy Components	Access: Availability of Services																	
	Access: Cultural Considerations																	
	Behavioral Health Integration																	
	Culturally & Linguistically Appropriate Services (CLAS) Standards																	
	Health Equity: Data																	
	Health Equity: Cultural Responsiveness																	
	Oral Health Integration																	
	PCPCH Development																	
	Severe & Persistent Mental Illness																	
	Social Determinants of Health and Equity																	
	Special Health Care Needs																	
	CHIP Areas	Access to Healthcare																
Behavioral Health																		
Child and Youth Health																		
Healthy Living																		
Maternal Health																		
Social Determinants of Health and Equity																		
CCO Incentive Metrics	Assessments within 60 days for children in DHS custody																	
	Childhood immunization status																	
	Cigarette smoking prevalence																	
	Diabetes: HbA1c poor control																	
	Disparity measure: ED visits among members with mental illness																	
	Immunizations for adolescents																	
	Initiation and Engagement of Alcohol, Drug Abuse, Dependence Treatment																	
	Members Receiving Preventive Dental Services																	
	Oral Evaluation for Adults with Diabetes																	
	Prenatal & Postpartum Care - Postpartum Care																	
	Screening for Clinical Depression and Follow-Up Plan																	
	Screening, Brief Intervention and Referral for Treatment (SBIRT)																	
Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life																		

## KEY

- BRAVE: Bravery Center
- DOUL: Community Doula
- HE: Health Equity Workgroup
- HSPO: Helping High School Students Understand Pain, Opioid Addiction,
- HTEM: Homeless Resource Team
- HUBV: Hub City Village
- IFCW: Integrated Foster Child Wellbeing
- NPSH: Navigation to Permanent Supportive Housing
- PWST: Peer Wellness Specialist Training
- RDUC: Reduce and Improve
- SDoH: Social Determinants of Health Workgroup
- SKIL: Skills and Connections to Support Housing
- THW: Traditional Health Workers Workgroup
- UCC: Universal Care Coordination Workgroup
- WINS: Wellness in Neighborhood Stores
- WtoS: Wellness to Smiles

## IHN-CCO DST Pilot Evaluation Results Ranking\*

Score Range	Rank	Pilot Name	Year Closed
60-64	1	Primary Care Psychiatric Consultation	2016
	2	Pre-Diabetes Boot Camp	2017
	3	The Warren Project: Nature Therapy	2018
	4	Community Health Worker	2016
	5	Child Psychiatry Capacity Building	2016
	6	Community Paramedic Phase 2	2018
55-59	7	Child Abuse Prevention & Early Intervention	2016
	8	Youth WrapAround & Emergency Shelter	2016
	9	Pediatric Medical Home	2016
	10	CMA Scribes	2017
	11	Oral Health Equity for Vulnerable Populations	2018
	12	Universal Prenatal Screening	2016
	13	Breastfeeding Support Services	2018
	14	CHANCE 2nd Chance	2018
	15	Licensed Clinical Social Worker PCPCH	2016
	16	Children's SDoH and ACEs Screening	2018
50-54	17	Health & Housing Planning Initiative	2017
	18	School/Neighborhood Navigator	2017
	19	Complex Chronic Care Management	2016
	20	Eating Disorders Care Teams	2018
	21	Alternative Payment Methodology Phase 2	2017
	22	Social Determinant of Health Screening with a Veggie Rx Intervention	2018
	23	Prevention, Health Literacy, and Immunizations	2016
	24	Veggie Rx in Lincoln County	2019
	25	Traditional Health Worker Hub	2018
	26	Public Health Nurse Home Visit	2016
	27	Dental Medical Integration for Diabetes	2017
	28	Community Health Workers in North Lincoln	2017
	29	Pain Management in the PCPCH	2017
	30	Improving the Pain Referral Pathway in the PCPCH	2017
	31	Improving Infant and Child Health in Lincoln County	2018
	32	SHS Palliative Care	2017
	33	Home Palliative Care	2017
	34	Sexual Assault Nurse Examiner	2017
	35	Community Paramedic Phase 1	2016
45-49	36	Expanding Health Care Coordination	2018
	37	Health Equity Summits and Trainings	2019
	38	Maternal Health Connections	2016
	39	Youth & Children Respite Care	2018
	40	Regional Health Education Hub	2019
	41	Physician Wellness Initiative	2017
	42	Behavioral Health in the PCPCH	2016
	43	Tri-County Family Advocacy Training	2016
	44	Family Support Project	2018
	45	Alternative Payment Methodology Phase 1	2016
40-44	46	Chrysalis Therapeutic Support Groups	2017
	47	Pharmacist Prescribing Contraception	2018
	48	Colorectal Screening Campaign	2016
	49	Mental Health Literacy	2016
35-39	50	Mental Health, Addictions, Primary Care Integration	2016
	51	Childhood Vaccine Attitude & Information Sources	2016

## IHN-CCO DST Pilots and Sustainability Status

STATUS	ACRONYM	PILOT NAME
Active	BRAVE	Bravery Center
	DOUL	Community Doula
	HSPO	Helping High School Students to Understand Pain, Opioid Addiction, and Healthy Self-Care
	HTEM	Homeless Resource Team
	HUBV	Hub City Village
	IFCW	Integrated Foster Child Wellbeing
	NPSH	Navigation to Permanent Supportive Housing
	PWST	Peer Wellness Specialist Training
	RDUC	Reduce and Improve
	SKIL	Skills and Connections to Support Housing
	WINS	Wellness in Neighborhood Stores
	WtoS	Wellness to Smiles
	Ended	COMPAR
DMID		Dental Medical Integration for Diabetes
MNPB		Medical Neighborhood PCPCH-Behavioral
MHAPC		Mental Health, Addictions, and Primary Care Integration
One-time project	CVAIS	Childhood Vaccine Attitude & Information Sources
	CRSC	Colorectal Screening Campaign
	MHR	Medical Home Readiness
	MAP	Member Access Plan
	MHL	Mental Health Literacy
	PAE	Patient Assignment & Engagement
	PCPCH	Patient-Centered Primary Care Home
	PCP EF	PCP Engagement Fee
PHLI	Prevention, Health Literacy, and Immunizations	
Operationalized	APM	Alternative Payment Methodology
	BH PCPCH	Behavioral Health PCPCH
	BSS	Breastfeeding Support Services
	CHANCE	CHANCE
	C2C	CHANCE 2nd Chance
	CAPEI	Child Abuse Prevention & Early Intervention
	CPCB	Child Psychiatry Capacity Building
	CHW	Community Health Worker
	HHPI	Health & Housing Planning Initiative
	HPC	Home Palliative Care
	PMH	Pediatric Medical Home
	PWI	Physician Wellness Initiative
	PCPC	Primary Care Psychiatric Consultation
	PHNH	Public-Health Nurse Home Visit
	SDoH	Social Determinant of Health Screening with a Veggie Rx Intervention
THWH	Traditional Health Worker Hub	
SUPS	Universal Prenatal Screening	
Sustained	CORO	Community Roots
	PCRC	Planned and Crisis Respite Care
	CSAS	Children's SDoH and ACEs Screening
	CTSG	Chrysalis Therapeutic Support Groups
	CMAS	CMA Scribes
	CHWL	Community Health Workers in North Lincoln
	CCCM	Complex Chronic Care Management
	EDCT	Eating Disorders Care Teams
	EHCC	Expanding Health Care Coordination
	FSP	Family Support Project
	HEST	Health Equity Summits and Trainings
	H2H	Hospital to Home
	IICH	Improving Infant and Child Health in Lincoln County
	IPRP	Improving the Pain Referral Pathway in the PCPCH
	LCSW	Licensed Clinical Social Worker PCPCH
	MHC	Maternal Health Connections
	OHEV	Oral Health Equity for Vulnerable Populations
	PMP	Pain Management in the PCPCH
	PPC	Pharmacist Prescribing Contraception
	PDBC	Pre-Diabetes Boot Camp
	RHEH	Regional Health Education Hub
	SANE	Sexual Assault Nurse Examiner
	SNN	School/Neighborhood Navigator
	SPC	SHS Palliative Care
	WPNT	The Warren Project: Nature Therapy
	TFAT	Tri-County Family Advocacy Training
	VRxL	Veggie Rx in Lincoln County
YCRC	Youth & Children Respite Care	
YWES	Youth WrapAround & Emergency Shelter	