



March 8, 2017

To: Sen. Steiner Hayward, Co-Chair
Rep. Rayfield, Co-Chair
Members, Human Services Sub-Committee of the Joint Committee on Ways and Means

From: **Muriel DeLaVergne-Brown, RN, MPH**
Crook County Public Health Director
Hillary Saraceno, MS, Deschutes Deputy Public Health Director
Michael Baker, PhD, Jefferson County Public Health Director

My name is Muriel DeLaVergne-Brown, RN, MPH and I am the public health administrator for Crook County. Thank you for the opportunity to provide testimony on the state budget development in regards to supporting funding for local public health in the Oregon Health Authority budget, HB 5026.

I'd like to talk about a couple of issues and areas of public health that need additional investments and talk about some of our successes with our local CCO.

Public health is what we do together as a society to ensure the conditions in which everyone can be healthy! The consequences of a crumbling public health infrastructure are often felt most intensely in the communities with the greatest need.

Central Oregon counties (Deschutes, Crook, and Jefferson) play an active role in health system transformation in our region and the partnerships share a vision for creating health, equity, and resilience in the communities over time. The support and funding for local public health is critical to ensure this vision.

As a region, a few of our successes include:

1. **Regional health assessment** – All three public health agencies participated and facilitated the update of the regional Health Assessment and Regional Health Improvement Plan which includes a section on Maternal Child Health.
2. **Maternal Child Health Initiative** – the public health agencies in Central Oregon developed a regional Perinatal Continuum of Care with partners to improve the health of women and children. Higher public health spending on maternal child health services, like nurse home visiting programs, has a beneficial relationship with reduced rates of low birth weight, particularly in counties with high level of poverty.

The Problem:

- OHP population makes up over 50% of births in the tri-county area (range: 46%-69%)

- Low income/education level
- Disproportionately high psychosocial needs
- Disproportionately high smoking/substance use rates
- Disproportionately high rate of preventable ER usage 0-4 years of age
- Higher postpartum depression rates than overall group (PRAMS data)
- Diverse ethnic/racial population across the counties

The primary purpose of the Perinatal Care Continuum (PCC) program in Central Oregon is to optimize pregnancy outcomes, including reducing the incidence of low birth weight babies. The project addresses the highest risk pregnant women in Crook, Deschutes, and Jefferson counties referred to the program. This project is in the Regional Health Improvement Plan as a specific strategy and promotes additional health and clinical strategies through a coordinated effort.

The Nurse Home Visiting Programs from Crook, Deschutes, and Jefferson counties and their local health departments (LHD) are implementing a regional approach to an integrated perinatal care continuum model. This approach and the ability to leverage the Babies First funds serves as the foundation for a regional referral system that includes prenatal home visiting services, linkage to community resources as well as embedded community health workers and health educators within OB provider clinics throughout the three counties.

“Working together, public health and primary care have the opportunity to lower the number of people who need care, lower the cost of that care, improve the quality of clinical care and other services they receive, and improve the overall health of the community.” (IOM, 2012)

Our ability to implement a regional program for pregnant women is critical and support including funding for these models is critical to the health of women throughout Oregon.

I would encourage you to invest in local public health this biennium to improve the health of citizens in Oregon.

Thank you for your time.

Sincerely,

Muriel DeLaVergne-Brown, RN, MPH
Health and Human Services Director
Crook County Health Department