

# Harney County Comprehensive Plan for Children and Families January 2006 Biennial Plan Update Executive Summary

*In every home, for every child, a better future in Harney County –*  
Harney County Commission on Children and Families Vision Statement

## A. County Overview

**Environment:** Harney County, an extraordinary area in southeastern Oregon’s high desert country, is Oregon’s largest county, the eighth largest county in the United States, and is larger than eight of the 50 states. The people who live and visit here treasure our assets – clean air, space, good water, the mountains and desert, our small town lifestyle, abundant recreational opportunities and our attitude that the whole county is one community. Our low population density of 7,660 people in an area of over 10,000 square miles give us the distinction of being classified as a “rural frontier” community.

**Ethnicity:** According to the 2000 census, Harney County’s population, like most of Oregon, is largely made up of Caucasians. Hispanic and Native Americans comprise the next largest racial/ethnic groups. They make up 4.2% and 4% of the citizenry respectively.

**Economy – General:** In the private sector, the economy is largely based on agriculturally related occupations and manufacturing (35%), with manufacturing making up only a small part of that. Government workers make another large impact on the county’s economy with 26.4% of the workers. Tourism also makes a significant contribution to our economy.

**Economy – Struggles and Opportunities:** Harney County has had the misfortune of leading the state in unemployment statistics during the past few years. Fortunately, the trend is down. Unemployment soared to a high of 20% in early 2001, declined in 2003 to 11.16%, and dropped to 9.37% in 2005. The Oregon Youth Authority Juvenile Facility, shut down for a time, reopened at 50% capacity and increased occupancy in 2005. Additionally, our two manufacturing employers, Monaco and Louisiana Pacific, have weathered personnel cuts and appear stable and able to maintain their current levels of employment.

On a very positive note, Harney County is investing for the future in infrastructure and capacity. Industrial sites are undergoing the state certification process to encourage business and industry employers to relocate to the area. Three major new construction jobs will begin this year – a joint co-located facility for the BLM and Fish and Wildlife Service, a hospital, and the new Early Childhood Center. Additionally, a \$2.7 million school bond was approved to upgrade our aging schools and the Harney County Library just underwent an addition to house the new Western Room Collection. The Burns-Hines Wastewater Improvement Project, new heliport and other infrastructure improvements at the Burns Municipal Airport, and ODOT infrastructure projects are also underway.

The Burns Paiute Tribe is investing in Harney County as well. Through the combined efforts of the Tribe, County, and the State, the Wa-Da' Corporation in the Burns Archive Center will provide jobs and potentially attract other businesses to the area. Additionally, a new Community Gathering Center will open on the reservation this year and provide a theater-style facility and commercial kitchen capability to meet the cultural, recreational, and educational needs of the community at large. A Burns Paiute Tribe Master Plan, Gymnasium/Wellness Center, and tourism feasibility study are also underway. Combined with upgrades to the county fairgrounds grandstand and a proposed visitor's center, Harney County will be poised to offer increased services to children and families, both local citizens and visitors, in a capacity we lacked before.

Additionally, the Southeast Regional Alliance, of which Harney County is a part, continues to offer rural and regional investment and job creation opportunities. Together with the Harney County Court's recent approval of an incentive fund for economic development, things are looking up. It's also nice that cattle prices are high.

**Social Issues – Barriers and Windows:** Harney County's poor economy over the past several years contributed to a spike in social problems that is reflected in the 2005 data. Particularly disappointing is the high rate of child abuse and neglect, which showed a huge increase from 2003. Fortunately, most of this increase is a "course correction" resulting from an earlier, unfortunate period of non-performance in the child protective services of the Harney County branch of DHS. When the Burns DHS office of child and family services was reviewed in November 2003, it was found to be remiss in service delivery, so major personnel and policy changes were implemented across the board. By mid-year 2004, child protective services were at last being administered well in Harney County, and the past year has reflected a spike in referrals and services in a concerted effort to catch up on serving and protecting children who were overdue for intervention. We expect our child wellness ranking to improve.

**Summary:** This update to the Harney County Comprehensive Plan for Children and Families is the result of research, community input, and professional services review. Harney County's #1 priority for children and families remains increasing positive parenting. To that end, home visitations, such as the Healthy Start program, remain vital to early prevention of child abuse and neglect. We were dismayed by the 2005 legislative budget decision to cut the Healthy Start program by \$4 million statewide; we are working hard to find ways to keep serving those families. Progress on obtaining a full time child/family clinician at Harney Behavioral Health enabled us to drop that priority so we can now prioritize efforts toward increased after school activities for our youth. We are pleased to see that our juvenile crime prevention efforts kept Harney County's juvenile arrest rate low and that our teen pregnancy numbers dropped by 57 percent. Other local programs funded through the Oregon Commission on Children and Families helped us reduce our high school drop out rate by 53 percent.

The next page lists our updated priorities for 2006-2008. With the remarkable way this community pulls together in spite of steep challenges, we move forward with confidence that our planning efforts and caring citizens will improve the lives of our children and families.

**Harney County Comprehensive Plan for Children and Families**  
**January 2006**  
**Community Priorities**

- Increase Parenting Skills.
- Increase the number of preschool slots and quality childcare options for families in Harney County.
- Continue support to expand and improve the operations of the Boys and Girls Club of Harney County.
- Reduce juvenile crime through prevention efforts and provide treatment to youth already in the system.
- Provide intervention to middle and high school students that are identified as “acting out” by school counselors, juvenile department and other local sources.
- Increase access to a variety of after school activities.
- Increase funding opportunities to support implementation of HCCCCF priorities.

## Purpose of Biennial Plan Update

Oregon Administrative Rules require counties to conduct a biennial update of their coordinated comprehensive plans for children and families. This update process provides counties with an opportunity to:

- reassess the plan to test its relevancy to current community conditions and expectations;
- revise the plan to incorporate significant changes in funding levels;
- refine priorities, strategies, and outcomes based on updated information;
- expand, strengthen, or acknowledge effective partnerships through discussion of priorities and strategies in the plan; and
- communicate successes and challenges with state partners.

After reviewing the Coordinated, Comprehensive Plan and Updates, the Executive Summary should be revised and distributed to local users of the plan as well as to state partners with this Update.

- I. Due dates, formatting, other technical requirements
  - Completed plan updates are due Tuesday, **January 31, 2006**.
  - Board of County Commissioner signatures on plan updates are required
  - Deliver two complete hardcopies to the OCCF office.
  - Submit one electronic copy, using the format included in this document, to Pat Pitman, Michael Kurtz or Peg VanderZanden using the First Class system, or submit your information on a disk.
  - Include any separate plan changes that you did not list directly on the template document.
2. For questions or technical assistance:  
Pat Pitman, Oregon Commission on Children & Families (503) 373-1570 (ext. 223)  
Michael Kurtz, Oregon Commission on Children & Families (503) 373-1570 (ext. 265)  
Peg VanderZanden, Oregon Commission on Children & Families (541)426-4558(ext. 234)  
Becky Eklund, Oregon Criminal Justice Commission (503) 986-4569  
Karen Andall, Oregon Youth Authority (503) 373-7234  
Jeff Ruscoe, Department of Human Services (503) 945-5901

# Biennial Update Guidelines

The guidelines have four parts:

- Part 1 – Update Process and Partnerships
- Part 2 – Plan Analysis – Where Are We Now?
- Part 3 – Implementation and Successes – How did we do?
- Part 4 – Priorities and Strategies – Where do we want to go, and how?

## Part 1 - Update Process and Partnerships

*Please submit an updated Executive Summary and answer the following questions even if there are no changes to the plan.*1.a.) Please submit an updated Executive Summary of your Coordinated, Comprehensive Plan. Executive Summaries are distributed upon request to interested persons, and need to reflect the most recent version of the local plans.

[See Executive Summary \(Attached\)](#)

1.b.) Attached on page 14 and 15 is a list of categories of partners. Please indicate by checkmark which partners participated in this Plan Update process.

1.c.) Which of the following methods do you use to regularly assess your county's progress in implementing the local comprehensive community plan? (Check as many as apply).

- ✓ Regular meetings with partners specifically to discuss progress (or as a specific agenda item at a meeting)
- ✓ Work plans/action plans
- Signed Interagency Agreements
- ✓ Common data base used by multiple organizations
- ✓ Step 8 data collection results
- ✓ Presentations to community organizations
- Evaluations
- Other \_\_\_\_\_
- Not currently tracked

1.d.) Is the local community mental health plan included in or attached to your county's comprehensive plan?

- ✓ Yes
- No. If no, when do you anticipate that it will be attached? (date) \_\_\_\_\_

1.e.) Is the local community public health plan included in or attached to your county's comprehensive plan?

- ✓ Yes
- No. If no, when do you anticipate that will it be attached? (date) \_\_\_\_\_

1.f.) An optional questionnaire for assessing partnerships is cited in Appendix A on page 8.

## Part 2 – Plan Analysis

### Reviewing the plan – Where are we now?

2.a.) Where are we demographically? What significant differences, if any, in the county population were shown in the most current population estimates? Include a review of race/ethnicity. (Certified population estimates can be found at <http://www.pdx.edu/prc/annualorpopulation.html>.)

---

- ✓ No significant differences in the data  
The following are the most significant differences in the data.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

2.b.) Where are we in terms of county-specific high level outcomes? (Note: The 2003 Oregon Benchmark County Data Book is posted at [http://www.oregon.gov/DAS/OPB/obm\\_pubs.shtml#Benchmark\\_County\\_Data\\_Books](http://www.oregon.gov/DAS/OPB/obm_pubs.shtml#Benchmark_County_Data_Books). The Progress Board will release the 2005 Oregon Benchmark County Data Book in the fall of 2005.) Include a review of race/ethnicity in the review of High Level Outcomes.

No significant differences in the data

- ✓ The following are the most significant differences in the data. *List significant differences by area and **impact** (in numbers or percentage or both). List as many as apply.*  
*Example: Teen pregnancy rate increased by 10 girls (14%) since 2000 data.*

- [Our 2005 child well-being ranking \(#27\) dropped significantly from the 2003 ranking \(#4\) due to a higher incident of reported child abuse between 2003 \(26 cases\) and 2005 \(34 cases\). This increase reflects in large part a spike in referrals and services that attempted to make up for an earlier period when child protective services was not providing appropriate intervention services in Harney County.](#) \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

2.c.) In spring of 2004, Local Commissions on Children and Families conducted an informal survey about homeless and runaways. The survey sought input on three categories of

information: estimates of Oregon's homeless and runaway populations, community perceptions of homeless and runaway youth, and recommended actions regarding the homeless and runaway population. Since that time:

a) What changes in demographics have occurred? [None](#)

b) What are your county's greatest concerns regarding the homeless and runaway population? [This is not a significant issue for our community.](#)

c) What recommendations are most critical for the statewide system of services to consider? [None.](#)

d) What would your county recommend for a new High Level Outcome regarding the homeless and runaway population? [We prefer to let the communities with the challenges in this area make the recommendation.](#)

2.d.) Where are we in terms of gaps that are the most critical to fill in your county in order for your county to achieve the plan outcomes? Please limit the number checked on the table on the next page to **ten**. Add any additional categories relevant to your county's continuum of services, but avoid listing specific programs.

<b>Juvenile Crime</b>	<b>Alcohol and Drug</b>	<b>Early Childhood</b>	<b>Other Systems and Cross-system Supports</b>
Basic services (JCP)	Alcohol and drug treatment services for adults	Home visiting <b>X</b>	Mental health services for adults
Aftercare support <b>X</b>	Alcohol and drug treatment services for youths	Child care (hard to find*) <b>X</b>	Mental health services for infants, toddlers, children and youth <b>X</b>
Diversion services	Alcohol and drug prevention services – access to services	Child care (affordable)	Access to health care, dental services
Juvenile crime prevention	Alcohol and drug prevention – changing community norms, public awareness <b>X</b>	Preschool	Access to contraceptive information
Involve families in family therapy and prevention efforts	After care support	Early childhood workforce development	Youth suicide prevention
		Medical Homes	Literacy programs
Other _____ –	Other _____	Other _____	Emergency shelter
			Foster care <b>X</b>
			Family support services to higher risk families <b>X</b>
			Domestic violence services
			Domestic violence awareness & education
			After school activities
			Alternative education
			Truancy/school attendance
			Workforce training
			Positive youth development activities
			Mentoring <b>X</b>
			Parenting education <b>X</b>
			Provider/caregiver training
			Safe, decent, affordable housing
			Transportation
			Living wage jobs <b>X</b>
			Other _____

- *Includes infant and toddler, after hours, special needs, match with home culture, etc.*

## Part 3 - Implementation and Successes

### Implementation - How did we do?

3.a.) How did we do in addressing our priorities and strategies? Provide specific examples.

We made progress in addressing most of our priorities, as follows:

Priority #1 (Increase Parenting Skills): Worked with community partners to promote 40 Developmental Assets (Hines Middle School project, Community Fair Booth, and newspaper spots) and provided mentoring and family support through the Healthy Start and Great Start programs.

Priority #3 (Increase the number of preschool slots and quality child care options in Harney County): Funded child care provider training which increased their knowledge, skills and the quality of child care options in Harney County.

Priority #4 (Continue to expand and improve the operation of the Boys & Girls Club of Harney County): Provided funding and leveraged other partners' support, which increased the number of days the club is open to provide a safe place for kids and reduce juvenile crime prevention.

Priority #5 (Reduce juvenile crime through prevention efforts): Funded juvenile crime prevention efforts, provided opportunities for positive adults to mentor youth, and worked with community partners on truancy issue. Harney County juvenile justice caseloads have decreased by half since 2002.

Priority #6: (Provide intervention to middle and high school students that are acting out.) Through Step 8 data collection plan and monitoring, provided impetus and sense of urgency for intervention, which reduces and prevents delinquency and crime.

Priority #7: (Develop a plan to hire a full time child/family clinician). This goal was achieved and will drop from our priority list to make room for other priorities.

3.b.) Based on the Step 8 data collected so far, how is your county doing in achieving its output and outcome targets for children and families? (Counties may refer to the Progress Board review of local plans' Step 8 data, to be released in September of 2005.)

Our Juvenile Department caseload has continued to drop from approximately 140 cases/year to 70 cases/year since 2002. Prevention strategies, included in the Step 8 data collection phase, are major factors in this progress.

### Implementation - What is slowing your progress in implementing the plan?

3.c.) What barriers to implementation has the partnership encountered? (Check as many as apply)

- ✓ Community capacity - Mental health and law enforcement capacity to implement new things, business community capacity to continue their contributions.
- ✓ Program capacity (waiting lists, etc.) - CASA waiting list, child care/preschool capacity  
Key leader or key staff turnover  
Lack of support from key leaders  
Partners unwilling to participate
- ✓ Partners unable to participate/Lack of staff time  
In a small community, everyone seems to do everything until they can do no more. "Just one more thing" becomes too much at some point.

- ✓ Inadequate financial resources Across grants, government, and private sector
- ✓ Complexity of implementation Healthy Start / Healthy Families of America credentialing and standards, Step 8 data collection and reporting
- ✓ Inflexible state administrative rules or statutes Moves away from minimum grant counties and toward mandated regionalization are lethal blows to small population, frontier/rural communities.  
Lack of support from businesses and other community organizations
- ✓ Ability to fund best practices programs with current funding Evidence-based and best practices can be expensive to implement; we may not be able to make necessary changes in some programs with current funding.
- Other \_\_\_\_\_
- Other \_\_\_\_\_

3.d.) Besides inadequate financial resources, which one of the following conditions has the *most* impact on your partnership's ability to achieve plan outcomes? (Check only one)

- Community capacity
- ✓ Program capacity (waiting lists, etc.)
- Key leader or key staff turnover
- Partners unwilling to participate
- Partners unable to participate/Lack of local staff time
- Complexity of implementation
- Inflexible state administrative rules or statutes
- Lack of support from businesses and other community organizations
- Other \_\_\_\_\_
- Other \_\_\_\_\_

3.e.) From the list in question 3.c. above, are there barriers that state agencies could resolve or reduce? If so, please list in the following table and tell your thoughts about what needs to be done.

Barrier	Proposed Actions
<p>CASA funding is based on population rather than on child abuse rates and numbers. If this funding basis can be changed to factor in rates of child abuse, smaller population counties with few resources and high child abuse rates could show more progress on this outcome.</p>	<p>OCCF should consider a change in the funding basis.</p>
<p>Healthy Start program personnel have numerous training requirements they must accomplish, yet funding has been cut. The cost of travel, lodging, and time away, particularly when many trainings are offered far away in the western part of Oregon, hurt the small eastern county programs' ability to attend and serve families. The remainder of the trainings are the responsibility of individual programs to design and arrange, which further strains meager budgets and staff capacity.</p>	<p>OCCF Healthy Start Program staff should create an HFA curriculum of training, offer some standardized trainings, designate which requirements are fulfilled by each, notify programs well in advance when trainings are offered, and record-to-DVD these trainings so they can be reproduced and mailed to programs who cannot afford the costs involved with attending in person.</p>

**Implementation - What are your successes related to implementation of the plans?**

3.f.) Our county's efforts to better coordinate and improve services have resulted in:

- No change in programs and services
- Improved coordination with no change in programs or services
- Improved coordination with change in programs or services
- Change in programs or services only
- Other \_\_\_\_\_

3.g.) Describe any specific improvement made in the early childhood system as a result of the efforts of the Early Childhood Team.

The Early Childhood Team has worked hard to develop strategies which ease the transition and continue support for high risk families and children who have special education needs, as they move from preschool to kindergarten.

3.h.) Many counties have made significant improvements in programs, services and supports for their diverse populations. Please briefly highlight what your county has done in the past two years to improve services to *all* residents as a result of partnership efforts. Are there things you have done or learned that other counties might find helpful? Who was involved and how did you make it happen?

*Example response: Curry County organized a diversity committee in 2002 to identify how to better engage its diverse populations, which are a small proportion of the overall population, in the planning and delivery of services. The committee has fourteen members, including representatives from American Indian, Hispanic, Disabled, Gay, Men, Mentors and Youth groups. The committee has identified countywide changes at the organizational level that are leading to improved access to services. For example, the committee is developing specific criteria to evaluate programs and proposals. They are also working towards community wide awareness events. The committee meets bimonthly. Recent budget reductions severely limit the committee's access to training and ability to interact with other organizations of similar purpose throughout the state.*

Harney County has made considerable progress in outreach, improved communication, and trust between the Burns Paiute Tribe and the Harney County community at large. Through mutual efforts, the Tribal Council, County and City governments, Early Childhood Center, School District, Boys & Girls Club, local CCF, Juvenile Departments, law enforcement and others have improved cooperation and teamwork at all levels. A recent "State of the County" forum confirmed this progress when officials briefed their joint, coordinated economic development plans for Harney County.

3.i.) Explain how the community has been mobilized by the implementation of the plans. Provide specific examples.

The Boys & Girls Club of Harney County has become a united cause for multiple community partners over the past two years. Continued support to expand and improve the operations of the club has been a Harney County CCF priority since 2004, but only recently have others joined in. Through awareness of its programs and positive outcomes, the Community Action Team, Kiwanis Club, and our community's signature fundraiser committee (Desert Dash Rally) have adopted the Boys and Girls Club, providing funds, board members, volunteers, and other support. This type of community mobilization has enabled Harney County to succeed in offering this resource in such a rural area, where the typical model for fundraising and operations would be unsustainable. The community has rallied around the club to not only keep it going, but to expand and improve its potential.

## Part 4 - Priorities and Strategies

### Priorities and Strategies - Where do we want to go, and how?

4.a.) Considering answers from questions #2 through #4, list any changes made for 2006-08 or attach a copy of revised section(s) with changes clearly indicated.

- Changes were made to the plan and reported in the table below
- Changes were made to the plan and the revised section(s) from the plan is attached
- No significant changes in the priorities or strategies

High Level Outcome	Change in Priority and/or Strategy	Comments (optional)
HLO #6 Decrease 8 <sup>th</sup> grade tobacco use	Delete: strategy 6.1.a. Public awareness campaign Add: 6.1.a. Life skills curriculum offered in after school programs for 6 <sup>th</sup> & 7 <sup>th</sup> graders	

4.b.) (*Measurement- Step 8*) As a result of changes in priorities and strategies, did your county make any changes in the measurement area?

- No changes at this time.
- Changes were submitted with latest submission of Step 8 data.
- Changes were made to the logic model or data collection plan: Please attach revised version.

4.c.) What other changes, if any, were made to the Plan?

- No other changes
- Changes to other parts of the plan: Describe, or attach revised section(s)  
*Describe plan changes other than priorities and strategies here, or attach the revised section(s) from the plan*

***Thank you! This completes the plan update. One optional question to enhance the information, and the participant list are on the next pages.***

## Appendix A - Optional Question and Participant List

### Plan Update Process and Partnerships

(Optional) Counties that want to assess their group functioning, service delivery coordination, and progress in collaboration can use questions from a past survey of the early childhood system and expand it to other systems. Relevant portions of that questionnaire are available at [www.oregonpcf.org/ourwork](http://www.oregonpcf.org/ourwork). Click on Biennial Update Optional Survey.

---

---

---

### Question 1.b. – Checklist of Plan Update participants

Put a check beside any of the following people or organizations that participated in the plan update in some way. Check as many as apply. Additional categories may be added as needed.

#### Community residents:

- General population
- Youth
- Clients/consumers
- People with special needs
- Groups of diverse populations

#### Local Governments

- County human services agency
- Law Enforcement
- Tribal governments
- Juvenile departments
- Parole/probation
- Service providers
- Other county government entity

#### Dept. of Human Services:

- Abuse and neglect
- Food, cash, housing
- Disability services
- Service providers
- Safety Net
- Community Partnership Teams
- Alcohol & drug prevention
- Prevention coordinators
- Service providers

Health

- Public health departments
- Local mental health authority
- Mental health organizations
- Health Maintenance Organizations
- Hospitals
- Other Health Care Providers

Community Providers

- Domestic violence organizations
- Community Action Agency
- Public Housing Authorities
- Other affordable housing providers
- Advocacy groups
- After-school programs
- Child care providers
- Child Care resource and referral
- Early childhood team representatives
- Early Intervention/Early Childhood Special Education
- Head Start/Oregon Pre-Kindergarten

Private Sector

- Businesses
- Chamber of Commerce
- Service Clubs
- Faith Community
- Neighborhood coalitions

K-16 education:

- Specific schools
- Parent teacher associations
- School Board
- School district
- Alternative schools
- Community Colleges
- Educational Service District
- Workforce Providers

Other \_\_\_\_\_