



# 2024

# ROADMAP

[www.orimha.org](http://www.orimha.org)



# Table of Contents

Welcome Message	3
About ORIMHA	4
Our Commitment to Racial Equity	5
Our Services	6
Our Members	8
Appreciative Inquiry	10
Appreciative Interviews	11
Why a Balanced Scorecard	17
2024 Balanced Scorecard	18
Board Priorities	28
Our Board	29
Our Team	31
Recognition of Contributors	32





**Dear Valued Members and Partners,**

We are both excited and honored to present you with ORIMHA's 2024 Roadmap—a detailed and ambitious plan that is dedicated to elevating the emotional health and well-being of Oregon's youngest residents and their families. This roadmap is not just a guide for our collective journey but a symbol of our unwavering commitment to this vital cause.

At the heart of infant mental health and early childhood lies the young child's ability to experience, regulate, and express emotions, forge close and secure relationships, and actively learn from their surroundings. These early years are not merely a passing phase, but a fundamental period that lays the groundwork for future well-being and success.

As the Executive Director and Board President of ORIMHA, we pledge our full engagement in this critical work. We are devoted to consistently evaluating and expanding our efforts, employing proven strategies like the Appreciative Inquiry methodology and the Balanced Scorecard approach. These tools are not only instrumental in sharpening our focus but also essential in measuring our progress against well-defined, impactful goals.

A core aspect of our roadmap, and one we wish to emphasize, is the unwavering support for the professionals providing infant and early childhood mental health services. We firmly believe that the emotional health and wellbeing of Oregon's youngest residents can only truly be nurtured by empowering and supporting these dedicated professionals. Their role is pivotal, and our strategies and resources are geared towards enhancing their capacity to make a meaningful impact.

Community engagement remains a cornerstone of our mission. We are committed to improving our stewardship of this significant work and will continuously implement quality assurance and performance improvement measures to ensure our efforts are effective and impactful.

We bring a united commitment to justice, equity, diversity and inclusion to every aspect of our work. These principles are fundamental for the success and moral integrity of our organization. They are the guiding lights that ensure our actions align with our vision of an inclusive and supportive community for all children and families in Oregon.

Within the pages that follow, you will find the ORIMHA Roadmap. This roadmap is our pledge to you – our community. It's a testament to our shared dedication to the emotional health and well-being of Oregon's infants, toddlers, families and the workforce that serve them each day.

We thank you for your trust, your partnership, and your unwavering commitment. Your collaboration is the fuel that drives our mission forward. We are eager to embark on this transformative journey with you, bolstered by the knowledge that together, we can effect meaningful and lasting change.

*Yours in partnership,*

**Lisa Harnisch**  
*Board President*

**Erin Kinavey Wennerstrom**  
*Executive Director*

## ABOUT ORIMHA

**Our Mission:** ORIMHA supports the emotional health and wellbeing of all Oregon infants, toddlers and their families in safe and thriving communities by:

*Promoting broad awareness and understanding of the importance of early nurturing relationships.*

*Building Oregon's capacity to support emotional health and wellbeing through training, support, data-based decision making, and collaboration across systems.*

*Providing Oregon with access to current resources from around the world.*

*Informing policy makers, funders and other key stakeholders about infant mental health principles and best practices.*

*Advocating for the application of infant mental health principles, best practices, and systems of care.*

**Our Vision of Mental Health for Infants and Toddlers:** All of Oregon's young children—prenatally thru 6—and the adults who care for them are thriving and experiencing emotional well-being and optimal development through universal access to current and reliable information, resources, and support.

**Our Vision of the Infant and Toddler Mental Health Professional Arena:** Professionals from all fields and disciplines who work with infants, toddlers, and their families form an interconnected "meta field" of professional practice in infant/toddler mental health.

**Our Vision of the Oregon Infant Mental Health Association:** ORIMHA is Oregon's central, trusted resource for information, advocacy, and professional development related to the social-emotional health and well-being of infants, toddlers, and their families in safe and thriving communities.

## OUR COMMITMENT TO RACIAL EQUITY

As members and staff of ORIMHA, our goal is to ensure that every child experiences the fundamental right and opportunity to a safe and secure world through culturally responsive and attuned relationships. We advocate for infant and early childhood mental health, emphasizing relationship-based practices that prioritize the best interests of pregnant people, infants, young children, and their families.

ORIMHA actively collaborates to enhance professional capacity, fostering deep self-reflection to raise awareness of our individual roles and responsibilities. We strive to take action within systems of oppression and intentionally work toward justice. Recognizing that "Discriminatory policies and practices that harm adults harm the infants and children in their care," we engage in collective efforts across systems to keep families, babies and young children at the center of policy conversations to remove barriers to high quality services.

ORIMHA encourages self-reflection on our thoughts, beliefs, and unconscious biases that contribute to the oppression of children and families, addressing issues related to racism, sexism, ableism, homophobia, xenophobia, and transphobia.



# OUR SERVICES

ORIMHA organization in Oregon that focuses on the health and wellbeing of infants and toddlers and their families in thriving communities from an early childhood cross-sector, multidisciplinary professional perspective.

When provided by a trained and caring professional, Infant and Early Childhood Mental Health services have been shown to improve children's social skills and emotional functioning, promote healthy relationships, reduce challenging behaviors, reduce the number of suspensions and expulsions, improve classroom quality, and reduce provider stress, burnout, and turnover. ORIMHA helps increase the availability of IECMH services in Oregon by providing the following services and support:

## Membership

Membership helps ORIMHA in its mission to serve the families of Oregon and shows commitment to being a champion of infant mental health in our state. Benefits include email announcements of important early childhood resources, topics, and policies; networking opportunities; knowing that support promotes advocacy for infants, toddlers, young children, and their families in communities across the state; and organization memberships are listed on the ORIMHA website with a link to the agency website. There are three levels of membership: ORIMHA Student & Family, ORIMHA Professional, and ORIMHA Organization

## Endorsement

The Competency Guidelines for Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant and Early Childhood Mental Health® (Endorsement) are internationally recognized credentials that support and recognize the development and proficiency of professionals who work with or on behalf of pregnant people, young children birth up to 6-years old, and their families.

Both the Infant Mental Health Endorsement® (IMH-E®) and the Early Childhood Mental Health Endorsement® (ECMH-E®) are based on a set of competencies designed to support and enhance culturally sensitive, relationship-focused practice within the framework of infant and early childhood mental health. An Endorsement applicant demonstrates acquisition of these competencies through education, work, specialized training, and reflective supervision experiences.

Working with our youngest children requires specialized training and experience, and IMH-E® ensures professionals have attained a certain level of expertise with 0 – 3 year olds and their families. ECMH-E® assures that professionals have attained a specific level of expertise with 3 up to 6-year olds and their families. Both IMH-E® and ECMH-E® are relevant for professionals across disciplines including early care and education, prevention and early intervention, home visitation, physical health, child welfare, mental health, policy, academia, and others.

Endorsement is available across four cross sectors focused on promotion, prevention, intervention, training, and mentoring. Individuals apply for the Endorsement category that best matches their scope of practice



## Professional Development

ORIMHA offers year-round virtual and in-person workshops, most at low or no cost, such as Nurturing Relationships, Reflective Communities, Social Determinants of Health and Health Related Social Needs, and Advanced Clinical Training, Summits.

## Reflective Supervision/ Consultation (RSC)

RSC is distinct due to the shared exploration of the parallel process. That is, attention to all of the relationships is important, including the ones between practitioner and supervisor, between practitioner and parent, and between parent and infant/toddler.

It is critical to understand how each of these relationships affects the others. Of additional importance, RSC relates to professional and personal development within one's discipline by attending to the emotional content of the work and how reactions to the content affect the work. Finally, there is often greater emphasis on the supervisor/consultant's ability to listen and wait, allowing the supervisee to discover solutions, concepts and perceptions on their own without interruption from the supervisor/consultant.

The primary objectives of RSC include the following:

- Form a trusting relationship between supervisor and practitioner
- Establish consistent and predictable meetings and times
- Ask questions that encourage details about the infant, parent, and emerging relationship
- Remain emotionally present
- Teach/guide
- Nurture/support
- Apply the integration of emotion and reason
- Foster the reflective process to be internalized by the supervisee
- Explore the parallel process and allow time for personal reflection
- Attend to how reactions to the content affect the process

RSC is required for the following categories of Endorsement®: Infant/Early Childhood Specialist; Infant/Early Childhood Mental Health Specialist; and Infant/Early Childhood Mental Health Mentor. See the requirements for each category of Endorsement® for more information.

# Lifting up the Voices of ORIMHA Members

**Through our annual survey, ORIMHA Members shared their thoughts on what strengths they want to see in our association and how ORIMHA can contribute to advancing justice, equity, diversity, and inclusion.**

**Equitable Access:** First and foremost, a strong association ensures that all providers have fair and equal access to essential resources, training, and endorsements. This commitment to fairness underpins competence in the field.

**Advocacy for Early Childhood:** These associations should be relentless advocates for the well-being and development of early childhood. Their voices must resonate loudly, emphasizing the critical importance of mental health during this formative period.

**Collaboration and Support:** Collaboration is the bedrock upon which strength is built. Strong associations facilitate active cooperation among their members and engage external stakeholders to foster a supportive environment for professionals and caregivers.

**Promotion and Messaging:** Effective promotion and messaging are essential to raise awareness. Associations must successfully convey their mission and message throughout the early childhood education field and the broader population.

**Networking and Training:** Offering regular opportunities for members to connect and engage, along with frequent training sessions, ensures that professionals stay at the forefront of their field, equipped with the latest knowledge and skills.

**Accessible Information:** While maintaining a website with information on current events and advocacy efforts is crucial, it's imperative to improve user-friendliness. Easy access to information empowers members and interested parties alike.

**Education:** Finally, education remains a cornerstone. Associations must provide a platform for continuous learning, keeping their members informed about the latest developments in infant and early childhood mental health.

**Equitable Access to Resources:** ORIMHA must prioritize equitable access to resources, training, and endorsements. Removing systemic barriers and providing support to individuals facing obstacles in their pursuit of this work is paramount.

**Diverse Representation:** To ensure comprehensive and authentic efforts, ORIMHA should actively involve people from all populations they serve. This means creating space for individuals to work within and on behalf of their identified populations, thereby giving voice to their unique needs and perspectives.





**Empowerment through Collaboration:** Empowering the communities they serve is essential. ORIMHA should enable these populations to define their needs and contribute to decision-making processes rather than imposing solutions from positions of power.

**Diversifying the Workforce:** Building a workforce that is reflective of the diversity of the communities served is crucial. Encouraging more professionals from brown and black backgrounds to join the field is a step towards more inclusive and culturally sensitive services.

**Respect and Recognition of Differences:** ORIMHA must instill a culture of respect for differences, fostering an environment where every individual's unique experiences and backgrounds are acknowledged and valued.

**High-Quality Training:** Offering high-quality, culturally sensitive training to professionals is essential. This ensures that they are well-equipped to provide effective services that address the unique needs of diverse communities.

**Partnership with Culturally Specific Organizations:** Collaboration with culturally specific organizations is key. By supporting their efforts to address Infant and Early Childhood Mental Health (IMH) needs, ORIMHA can tap into existing expertise and community connections.

**Language Access:** Disseminating information to families in their first language at the same time as English language speakers receive information is vital. Language should never be a barrier to accessing critical resources and support.

# APPRECIATIVE INQUIRY

In the development of ORIMHA's 2024 Roadmap, the principles of Appreciative Inquiry served as a foundational framework guiding our collective efforts. This approach focuses on the "Positive Core" of our organization, encompassing the strengths, values, and successes that have made ORIMHA a statewide beacon for infant mental health and early childhood.

By zeroing in on this Positive Core, our roadmap aims to amplify what has worked well for us in the past. This isn't just a feel-good strategy; it's a catalyst for meaningful, actionable progress. We believe that by

**DISCOVER:** The key aim of the Discovery Phase is to appreciate the best of 'what is' in terms of the topic under investigation, by recollecting times of excellence – times when people have had a sense of being really effective, engaged and productive.

**DREAM:** During the Dream Stage, participants are invited to envision an ideal future, in which the organization was organized around its strengths and aspirations, and the exceptional experiences and life-giving energies uncovered in the Discovery phase became the norm rather than the exception.

**DESIGN:** This stage is about collectively designing the organizational structures and 'social architecture' that need to be in place to enable the Dream (as articulated in the macro Provocative Proposition) to happen. It is more about the structures and communication flows which support action and make it possible, than about specific actions.

**DESTINY:** The Destiny Stage involves detailed planning and forming teams to carry forward the actions identified in the Design Stage. This

concentrating on our organizational strengths—such as our commitment to justice, equity, diversity, and inclusion our ongoing work in community engagement; and our emphasis on quality assurance—we can generate a forward momentum that will engage stakeholders, inspire our team, and lay the foundation for the future successes we envision in our priorities.

To fully comprehend how Appreciative Inquiry informs our 2024 Roadmap, it's essential to understand its four iterative stages, commonly known as the "4-D Cycle": Discover, Dream, Design, and Destiny.

phase celebrates the learnings accomplished and puts it all into action with a focus on Quality Assurance, Performance Improvement, and ongoing engagement of partners on progress.

These stages are not linear but are part of an ongoing loop of assessment and action, ensuring that our Roadmap remains a living, evolving document that reflects both our core strengths and our highest aspirations.

In a tangible sense, this means our 2024 Roadmap will not merely focus on solving problems but will strive to build upon our achievements in each priority area, from workforce development to community outreach. This optimizes our approach, ensuring that we are not just plugging gaps but are creating a self-sustaining cycle of improvement and growth.

The application of Appreciative Inquiry in constructing our 2024 Roadmap serves to not only underscore the accomplishments we have already attained, but also to inspire us to reach new heights in serving Oregon's infants, young children, and their families.

# APPRECIATIVE INTERVIEWS

As the Oregon Infant Mental Health Association (ORIMHA) strives to drive positive change within the state of Oregon, the role of partner input remains paramount. To this end, a comprehensive series of Appreciative Interviews was undertaken to grasp the depth, breadth, and nuances of the current landscape.

These interviews, aimed at drawing a holistic picture of the challenges, opportunities, and aspirations of our stakeholders, serve as a testament to ORIMHA's commitment to fostering a collaborative and informed approach. The summary that follows lays out the pivotal themes, insights, and perspectives garnered from these conversations, providing a foundation upon which ORIMHA's future initiatives will be anchored.

The revelations and insights gathered from over 40 Interviews underscore the complexities and potentials inherent in this work. They emphasize the collective drive towards improvement, inclusivity, and excellence.

With this wealth of information at our disposal, the next phase of ORIMHA's journey becomes clear. These insights have been harnessed to construct a Balanced Scorecard—a strategic planning and management tool ensuring that the organization's activities align with its vision, mission, and stakeholders' expectations.

The identified themes and suggestions informed the development of the 2024 Roadmap. This roadmap delineates the path forward, outlining actionable steps, timelines, and milestones in tune with community aspirations. With the collective wisdom gathered and strategic tools ready, ORIMHA stands on the precipice of a transformative journey, aiming for a brighter and more influential future in supporting Oregon's young children, their families, and IECMH professionals.



## QUESTION 1

ORIMHA holds relationship development and collaboration as two of its highest values. What best practices would you recommend ORIMHA put into action to be a highly trusted Infant Early Childhood Mental Health partner for all communities, especially those who have experienced historical or current injustices?

**Consistent Engagement and Communication:** Being consistently present and communicative with communities is vital. This not only fosters trust but also ensures that relationships are nurtured over time. Consistency is key, both in communications and in actions.

**Acknowledgement and Rectification:** Trust also grows from acknowledging mistakes and making reparative actions. Adopting a healthy relationship cycle, where the organization shows up, recognizes errors, and takes measures to rectify them, can be instrumental.

**Sensitivity to Terminology:** The language used, particularly around mental health, can deter community engagement. It's essential to recognize that certain terms or labels can alienate individuals. Instead, the focus should be on creating spaces where communities feel heard. This involves offering services without resorting to labels that may be stigmatizing or alienating.

**Community Feedback and Understanding:** Relationships can be fostered by truly listening to the community's needs. This involves understanding the differences, such as those between behavioral

health and general well-being. Recognizing nuances, like whether issues attributed to children are racially influenced or developmentally normal, is also essential.

**Streamlined Processes:** Operational efficiency can boost trust. When processes, like referrals, are mired in bureaucracy, it becomes challenging for families to access needed services. Simplifying requirements and standardizing forms across systems can ease these challenges.

**Collaborative Approach:** Collaboration, both at state and local levels, is necessary. The organization should foster relationships with local, respected partners to ensure there's a seamless flow of communication and action between sectors. This collaboration aims to address and overcome challenges such as service delays and inconsistencies in service provision.

**Cultural and Linguistic Competence:** Ensuring that the workforce is equipped to cater to diverse communities, both linguistically and culturally, is pivotal. It ensures that the services provided are tailored and resonate with the target communities.



## QUESTION 2

How can ORIMHA help ensure every member of the Oregon workforce is aware of the importance of relational health and the application of best practices?

**Curiosity and Flexibility:** Recognize diverse perspectives on infant mental health from various providers, families, and cultures.

**Addressing Assumptions:** Concerns were raised about presumptions that the Oregon workforce is unaware of relational health's importance. Addressing terminology barriers and understanding diverse connotations related to infant and toddler mental health was suggested.

**One Size Doesn't Fit All:** Advocacy against the assumption that there's a singular best practice for everyone was highlighted, emphasizing the importance of a flexible and culturally appropriate approach.

**Advocacy and Outreach:** Emphasis was placed on the importance of advocacy, community meetings, and presentations to reach out to the workforce.

**Targeted Responses and Education:** Advocacy was made for targeting specific workforce categories and ensuring experts can educate families. The importance of leveraging the network of professionals with infant mental health expertise and the need for Endorsement and support, especially in rural areas, was discussed.

**Continued Training:** The importance of offering courses and training sessions, such as self-care for home visitors, to support workforce members and address burnout was emphasized.

**Partnerships:** Recommendations were made to reach out to the workforce agency to identify potential employers who might benefit from these practices.

**Collaboration:** Discussion revolved around various councils and agencies working together and the potential of hubs to further support and train the workforce. A comprehensive approach to training that emphasizes the importance of relational health for all demographics, not just specific groups, was highlighted.

**Healthcare System Limitations:** The challenges in the healthcare system regarding child and parent care were discussed, emphasizing the need to bridge the gap between the two.

**Resources and Associations:** A call for action was made with reference to potential associations as allies.

**Regional Collaboration:** Partnering with regional workforce investment boards was suggested, highlighting the potential of hubs to disseminate information and collaborate. The use of existing databases to communicate with families was also emphasized.

**Reach and Awareness:** Questions were raised about the current reach and emphasizes the need for assessment. The workforce was defined as those serving children and families prenatally to age five in Oregon.

**Partnership and Data:** The significance of collaboration was highlighted. Calls were made for providing accessible and comprehensive data that showcases the importance of relational health.

**Advocacy and Research:** The need for advocacy addressing various societal challenges impacting children's health was emphasized. References to potential research studies as evidence to bolster positions were made.

## QUESTION 3

How can ORIMHA be a champion for a workforce that is diverse, equitable, and inclusive?

**Diversity, Education, and Licensing Challenges:** Recognize the barriers to diversifying the workforce, especially due to licensing requirements, higher education accessibility, and the “ivory tower” of education. There’s a need to consider recognition of foreign degrees, life experiences, and alternative pathways to promote inclusivity and diversify the workforce.

**Engaging and Understanding Diverse Communities:** Prioritize engagement with diverse communities, understanding their unique needs, and respecting various dialects, cultures, and practices. Reflect this diversity in ORIMHA’s communications and materials, emphasizing the value of direct recruitment from within these communities.

**Representation and Incorporation of Diverse Voices:** Engage with diverse groups to ensure their voices influence policy-making, training, and recommendations. Emphasize the importance of community health workers as collaborators, representation in the workforce, and building trust across cultural backgrounds.

**Organizational Analysis and Systemic Change:** ORIMHA and related organizations should perform equity analyses, reflect on their role in systemic biases, and emphasize the transition from theoretical to practical changes. Advocacy for policy changes, revising educational requirements, and reallocation of resources is vital.

**Educational Opportunities and Recognition:** Consider new recruitment strategies targeting diverse groups and offer clear pathways with incentives like grants and scholarships. Transition from traditional training sessions to providing actionable tools, resources, and coaching.

**Community Partnerships, Compensation, and Long-term Commitment:** Collaborate with culturally specific organizations, ensuring community ownership of data and a focus on long-term trust-building. Any engagement with communities should be appropriately compensated, emphasizing the genuine commitment to their expertise.

**Resource Advocacy and Provision:** Advocate for more resources, especially from legislative bodies, and provide support in recruitment, policy updates, professional development, and educational institution partnerships. Ensure resources for mental health conversations are available for educators and parents.

**Elevating the Profession:** Recognize and address the stigmatization of mental health in some communities, and elevate early childhood and infant mental health sectors. Advocate for appropriate compensation, emphasizing the profession’s significance.

**Leverage Existing Structures:** Instead of creating new systems, leverage and scale up existing infrastructure. Focus on areas like infant mental health consultation and community relationship-building.

**Centering Communities:** The importance of centering marginalized and BIPOC communities is paramount. Value their contributions and expertise, ensuring their needs and voices remain central to any initiative.



## QUESTION 4

How can ORIMHA promote workforce wellbeing across the state of Oregon?

### **Training, Professional Development, and Support**

Address the heightened stress among home visitors and early childhood (EC) providers due to complex family challenges like homelessness and food insecurity.

Equip the workforce to understand children's behaviors to reduce stress and foster well-being.

Implement specialized training programs, notably for Spanish-speaking individuals, to deepen relationships and nurture a supportive community.

Prioritize ongoing training opportunities and access to professional development without personal financial burden.

Highlight the importance of reflective supervision in understanding social positions and power dynamics in the supervisory relationship.

### **Mental Health, Support Resources, and Community Engagement**

Promote the significance of diverse community health workers to provide robust family support.

Collaborate with entities like Head Start, to advance understanding of mental health and counter stigmas, potentially adjusting titles to be less intimidating (e.g., 'Mental Health and Wellness Coordinator').

Boost ORIMHA's visibility and engagement within the community to strengthen networks and enhance support.

### **Compensation, Benefits, Emotional, and Institutional Support**

Champion appropriate compensation for mental health providers to deter burnout.

Advocate for addressing wage disparities and systemic changes to fortify the workforce, especially in light of employment challenges posed by COVID-19.

Emphasize not just individual self-care, but institutional well-being, focusing on structured, boundary-driven professional pathways.

### **Service Scope, and Systematic Barriers**

Delineate the responsibility of infant and early childhood mental health, considering both healthcare and educational perspectives.

Navigate bureaucratic challenges, ensuring clarity in jurisdiction, and handle the demands presented by measures like expulsion bans.

### **Implementation of Established Models and Strategies**

Support efforts to Integrate frameworks like the Pyramid Model and Conscious Discipline to improve quality in EC settings and to emphasize inclusive environments and address workforce burnout.

Shift the focus from remedying children's issues to embracing systemic wellness and overall well-being.

### **Childcare, Early Education, and Diverse Family Support**

Bridge the attention gap between pre-K and infant toddler care to ensure holistic child welfare.

Incorporate inclusive support systems, acknowledging that traditional models may not cater to diverse families, like those in queer and indigenous communities.

### **Terminology, Approach, and Representation in Infant and Early Childhood Mental Health**

Reframe the term "infant mental health" to be more inclusive, focusing on secure relationships, dyadic relationships, and strength-based practices.

Advocate for softer language, emphasizing positive reinforcement.

Harness storytelling from field experts for engagement and advocacy, ensuring field voices are adequately represented.

### **Funding, Collaboration, and Cross-Sector Engagement**

Confront the challenge of organizations competing for limited funds by promoting collaboration.

Leverage vital data, such as the four pillars for workforce success from the Harvard study, to shape strategies and policies.

Connect the dots between children's well-being and the workforce's well-being in advocacy efforts, ensuring a unified message to policymakers.

### **Awareness, Outreach, and Promotion of ORIMHA's Offerings**

Engage in continuous community outreach to strengthen relationships and improve understanding of various entities' needs.

Elevate awareness of ORIMHA's services, ensuring the community fully understands and can leverage its offerings.

### **Pandemic Recovery, Pediatric Focus, and Staff Well-being**

Address the diverse impacts of COVID-19, from isolation to workforce challenges and the high costs associated with childcare.

Support pediatricians grappling with increased mental health cases, emphasizing the need for sustained backing.

Explore staff well-being strategies, such as gratitude journals and wellness days, to foster mental well-being and resilience.





# WHY A BALANCED SCORECARD

With the valuable information from the Appreciative interviews in hand, the next steps for ORIMHA come into focus. These insights point us in the direction of a Balanced Scorecard, making sure our activities are in line with our mission, vision, and what our stakeholders expect from us. These findings will also shape practical steps, timelines, and milestones to guide our work in the community.

A Balanced Scorecard provides a holistic view of an organization's performance and helps to ensure that it is aligned with the organization's strategic objectives. It also provides a framework for setting targets,

monitoring progress, and making adjustments as needed to ensure that ORIMHA stays on track to achieve its goals.

The Balanced Scorecard will be more than just a management tool. It will serve as a compelling narrative device: it tells the story of how ORIMHA is going to strategically advance its mission. We hope it will provide our current and future partners with ideas for how to join in our work and increase our collective impact.

## ORIMHA's includes the following perspectives:

**01 Financial Perspective:** This perspective focuses on the financial objectives of the organization, such as revenue growth, profitability, and cash flow. The financial perspective measures the results of the organization's actions and decisions.

**02 Member and Partner Perspective:** This perspective focuses on the customer's needs and expectations. The customer perspective measures customer satisfaction, loyalty, and retention, and helps the organization to understand the factors that drive customer behavior.

**03 Internal Processes Perspective:** This perspective focuses on the internal processes and systems that enable the organization to deliver value to customers and achieve its financial goals. The internal processes perspective measures efficiency, quality, and cycle time, and helps the organization to identify opportunities for improvement.

**04 Learning and Growth Perspective:** This perspective focuses on the organization's ability to learn, innovate, and grow. The learning and growth perspective measures employee skills and knowledge, information systems, and organizational culture and values.

**05 Policy and Advocacy Perspective.** This perspective focuses on capitalizing on ORIMHA's unique position as an autonomous entity. Unlike many of its organizational partners who may face constraints, ORIMHA possesses the flexibility to offer endorsements and deliver testimony in various advocacy settings, thereby amplifying its impact and influence in the field.

# 2024 ORIMHA BALANCED SCORECARD

## LEARNING AND GROWTH PERSPECTIVE

ORIMHA's Learning and Growth Perspective is about building an inclusive community, connecting with broader networks to bring global knowledge to Oregon, and making informed decisions to refine the association's impact. Through these objectives, ORIMHA aims not only for its own development but also to create an ecosystem where the IECMH workforce in Oregon is equipped to deliver their best. ORIMHA guides the way towards a future where every child and family in Oregon thrives in an environment enriched by justice, equity, diversity, and inclusion.

### Embracing Justice, Equity, Diversity, and Inclusion

At the heart of ORIMHA's mission is the objective to integrate Justice, Equity, Diversity, and Inclusion (JEDI) principles. The finalization and publication of the ORIMHA JEDI Statement and the establishment of an Equity Policy are significant steps toward creating an inclusive culture. These policies are not just internal guidelines but a shared vision for inclusivity across ORIMHA's network. Distributing these documents to members and partners invites them to join in fostering a diverse and respectful community.

### Expanding Collaborative Connections

ORIMHA is committed to expanding its connections with influential entities like the National Alliance and other Associations of Infant Mental Health. This effort helps maintain ORIMHA's standing as an association and creates opportunities for knowledge exchange. By participating in events like the annual AIM conference, ORIMHA both contributes to and learns from a global community dedicated to infant mental health.

### Committing to Data-Driven Decision Making

ORIMHA employs a data-driven approach to enhance its services and maximize impact. Conducting member and partner surveys helps identify gaps in services and understand community demographics and wellbeing. Forming data-sharing partnerships with aligned system partners optimizes the use of collected information, fostering a culture of transparency and collaboration. Additionally, the annual update of the Balanced Scorecard ensures ORIMHA's strategies remain aligned with its goals and the community's needs.



## Learning and Growth Perspective

*Ability to learn, innovate, and grow by tracking skills, knowledge, and organizational culture and values.*

### Objective 1: Center Justice, Equity, Diversity and Inclusion.

Finalize and publish the ORIMHA JEDI Statement.

Establish an Equity Policy.\*

Distribute the Statement and Policy broadly to the organization's members and partners.\*

### Objective 2: Maintain connections to the National Alliance and other Associations.

Collaborate with the National Alliance and maintain good standing as an Association.

Engage in opportunities to share with and learn from the National Alliance and other Associations.

Send representatives to at least one annual AIM conference.

### Objective 3: Implement data-driven decision-making.

Conduct a Member Survey that identifies gaps in ORIMHA services, demographics, and wellbeing.

Conduct a Partner Survey that identifies key impacts of and opportunities for ORIMHA.\*

Form data sharing partnerships with aligned system partners.\*

Conduct an annual update of the Balanced Scorecard.\*



## DEVELOPMENT PERSPECTIVE

ORIMHA's Development Perspective is a testament to its commitment to long-term sustainability and effectiveness. By understanding the intricate details of its operations, establishing a growth-supportive infrastructure, and diversifying its funding sources, ORIMHA is positioning itself as a resilient and impactful organization in the IECMH sector. These strategic objectives are not just about sustaining an organization; they are about nurturing a community where the youngest and most vulnerable are given the best opportunities to thrive. Through this lens, ORIMHA continues to champion the cause of infant and early childhood mental health in Oregon, paving the way for a future where equitable and quality services are a given, not a goal.

### Understanding Cost and Impact

An essential step in ORIMHA's strategy is to thoroughly understand the costs and impacts of its operations, services, and resources. Mapping the costs of all operations and services is more than a fiscal exercise; it's an initiative to ensure that every dollar spent is an investment in maximizing the well-being of children and families in Oregon. This assessment isn't solely about numbers—it's a comprehensive evaluation of how ORIMHA's operations and services resonate with and impact the community it serves. Such thorough understanding aids in making informed decisions, ensuring resources are allocated where they are most effective.

### Establishing Infrastructure for Growth

For ORIMHA, growth is not just about expansion—it's about creating a robust and supportive framework that nurtures this growth. Fully

defining staff roles, responsibilities, and compensation packages is vital in building a dedicated and motivated team. It's about ensuring that every member of the ORIMHA family is valued, their roles are clear, and their contributions are recognized. Furthermore, defining the needs for other infrastructure supports is a forward-thinking approach that prepares ORIMHA for future challenges and opportunities. Adopting the annual budget each December is an exercise in fiscal responsibility and strategic planning, ensuring that the organization is financially equipped to meet its goals for the upcoming year.

### Diversifying and Expanding Funding

The sustainability of ORIMHA's impactful work is intricately tied to its funding and revenue streams. Maintaining a diverse mix of philanthropic and government funding is crucial in creating a stable financial foundation. It also reflects a commitment to broadening the scope of ORIMHA's reach and influence. Exploring national models for blended and braided AIM funding demonstrates ORIMHA's willingness to innovate in fundraising strategies, staying ahead in a competitive and ever-changing funding landscape.

Expanding revenue streams through sponsored memberships and other fee-based services is a strategic move towards self-sustainability. It's an approach that not only generates necessary funds but also encourages a broader sense of ownership and investment among members and stakeholders. These revenue streams are critical in supporting ORIMHA's initiatives, allowing the organization to continue providing essential services and making a positive impact in the field of IECMH.



## Development Perspective

*Actions and decisions to sustain and scale capacity in service of equitable, quality services.*

### **Objective 1: Understand the cost and impact of operations, services, and resources.**

Map cost of all operations, services and resources.  
Assess the impact of all operations, services and resources.

### **Objective 2: Establish an infrastructure that enables growth.**

Fully define staff roles, responsibilities, and compensation packages.  
Define needs for other infrastructure supports.  
Adopt the annual budget in December.

### **Objective 3: Diversify and expand funding and revenue streams.**

Maintain a mix of philanthropic and government funding.  
Research national models for blended and braided AIM funding.\*  
Expand revenue streams through sponsored Memberships and other fee based services.



## MEMBER AND PARTNER PERSPECTIVE

ORIMHA's Member and Partner Perspective is a reflection of its commitment to nurturing and expanding its community. By increasing awareness of IECMH, developing the Community Ambassador model, enhancing RS/C capacity, and providing diverse professional development opportunities, ORIMHA is strengthening the foundations of a supportive and knowledgeable IECMH network in Oregon. These strategic objectives are pivotal in ensuring that the professionals and partners engaged in this vital field are well-supported, well-informed, and well-connected, ultimately contributing to the holistic well-being of Oregon's infants and young children. Through these endeavors, ORIMHA is not just serving its community; it is empowering them to be champions of change and pillars of support in the field of infant and early childhood mental health.

### Increasing Awareness of IECMH

A critical goal for ORIMHA is to elevate awareness of Infant and Early Childhood Mental Health. To achieve this, ORIMHA is dedicated to developing sensitive and impactful messaging and marketing materials. These materials are crafted not just to inform but to resonate with the needs and experiences of members and partners. The use of digital communications is being diversified to reach a broader audience effectively. Alongside, mapping opportunities for in-person connections at state, regional, and local levels underscores ORIMHA's commitment to building stronger, more personal relationships. These strategies are designed to create a ripple effect of awareness, understanding, and support for IECMH across Oregon.

### Launching the Community Ambassador Model

ORIMHA is set to launch an innovative Community Ambassador model, a strategy crafted in partnership with communities and Tribes. This

initiative aims to establish a network of ambassadors who can effectively communicate and advocate for IECMH in diverse communities. Securing funding for the initial launch of two Community Ambassadors in 2025 is a significant step toward making this vision a reality.

The development of an Evaluation and Expansion Plan for this model will ensure its effectiveness and scalability, making it a cornerstone of ORIMHA's community engagement approach.

### Enhancing Reflective Supervision/Consultation (RS/C) Capacity

Continuously spreading awareness of the importance of Reflective Supervision/Consultation (RS/C) is pivotal to ORIMHA's objectives. The redesign of RS/C training with a JEDI-driven focus is an acknowledgment of the need for inclusive and equitable mental health practices. Launching RS/C as a fee-for-service model, informed by insights from the RS/C Gaps survey, represents a strategic approach to both sustain and expand this vital service. This initiative is aimed at enhancing the quality and reach of RS/C, ultimately benefiting members and the broader service organizations they represent.

### Expanding Professional Development Opportunities

ORIMHA is committed to enhancing professional development opportunities. Partnering with Zero to Three to host a 10-session Introduction to IECMH is an example of leveraging collaborations to offer comprehensive training. Furthermore, plans to launch a Workforce Wellness Conference and a DC:05 Training of Trainers exemplify ORIMHA's dedication to offering advanced learning opportunities. Additionally, developing plans to host live and/or pre-recorded fee-for-service learning sessions is a forward-thinking approach to make professional development accessible and flexible for all members.



## Member and Partner Perspective

*Engagement improvements that measure growth, satisfaction and retention of Members and Partners*

### Objective 1: Increase awareness of Infant and Early Childhood Mental Health.

Develop messaging and marketing materials that honor the needs of members and partners.\*  
Improve and diversify use of digital communication for effective awareness campaigns.  
Map opportunities for in-person connection at the state, region, and local.\*

### Objective 2: Develop and launch a Community Ambassador model.

Develop an IECMH Community Ambassador model in partnership with communities and Tribes.\*  
Secure funding for the launch of two Community Ambassadors in 2025.\*  
Create an Evaluation and Expansion Plan for the Community Ambassadors model.\*

### Objective 3: Provide and increase community capacity for Reflective Supervision/ Consultation.

Continue to spread awareness of the importance of RS/C to members and service organizations.  
Redesign RS/C Training with JEDI-driven focus.\*  
Launch RS/C as a fee for service model using insights from the RS/C Gaps survey.\*

### Objective 4: Provide and increase capacity for Professional Development.

Partner with Zero to Three to host a 10-session Introduction to IECMH.  
Create a plan to launch a Workforce Wellness Conference and DC:05 Training of Trainers.\*  
Develop plan to host live and/or pre-recorded fee for service learning sessions.\*



## INTERNAL PROCESSES PERSPECTIVE

ORIMHA's Internal Processes Perspective is a clear indication of the organization's commitment to operational excellence. By focusing on developing a JEDI-aligned Board, supporting the Executive Director, and effectively utilizing its committees, ORIMHA is laying a solid foundation for efficient and impactful operations. These objectives are crucial in ensuring that ORIMHA not only meets but exceeds expectations in delivering its services, advocating for IECMH, and ultimately contributing to the well-being of Oregon's infants and young children. Through these focused efforts, ORIMHA is poised to continue as a leader and a beacon of hope in the IECMH community.

### Board Development Aligned with JEDI Principles

A key focus for ORIMHA is the development of its Board in alignment with Justice, Equity, Diversity, and Inclusion (JEDI) principles. This begins with clarifying the terms, representation, and spheres of influence of current Board members, ensuring that the Board's composition and governance reflect the diversity and inclusivity values that ORIMHA upholds. The development of a board member onboarding and mentorship process aims to empower new members with the knowledge and support they need to be effective contributors. Expanding Board membership in alignment with the JEDI Statement and Equity Policy is a strategic move towards creating a governance body that truly represents and understands the diverse community ORIMHA serves. Leveraging the Board to connect with other aligned initiatives underscores a collaborative approach to governance, ensuring that ORIMHA's strategies and actions benefit from a wide range of perspectives and experiences.

### Supporting the Executive Director

Supporting the Executive Director is crucial for ORIMHA's success. Retaining the current Executive Director, with a clear understanding of key job responsibilities, ensures leadership continuity and clarity in organizational direction. Utilizing the Balanced Scorecard for quarterly evaluation and prioritization of work aligns leadership efforts with strategic objectives. Establishing comprehensive Policies and Procedures for staff, including an Annual Evaluation process, is essential for maintaining a high-performing, accountable, and motivated team. These steps are designed to ensure that the Executive Director, along with the entire staff, is equipped and supported to lead ORIMHA towards achieving its ambitious goals.

### Effective Utilization of Committees

ORIMHA recognizes the value of its committees in driving progress on Balanced Scorecard measures and fulfilling contract agreements. Reinvigorating the Endorsement and Training Committees is a strategic move to enhance these critical areas of ORIMHA's operations. These committees are vital in ensuring that ORIMHA's endorsement and training activities are of the highest quality and relevance to the IECMH field. The establishment of a Board Development Committee to lead work on enhancing Board effectiveness demonstrates a commitment to continuous improvement in governance. This committee will play a pivotal role in ensuring the Board is well-equipped to guide and support ORIMHA's mission and strategic objectives.





## Internal Processes Perspective

*Informs quality improvements to processes and systems that enable the organization to deliver value.*

### **Objective 1: Develop the Board in alignment with JEDI Statement and Equity Policy.**

Clarify current Board member terms, representation, and spheres of influence.\*

Develop a board member onboarding and mentorship process.\*

Expand Board membership in alignment with JEDI Statement and Equity Policy.\*

Leverage Board to connect with other aligned initiatives.\*

### **Objective 2: Support the Executive Director.**

Retain the current Executive Director and clarify key job responsibilities.

Utilize the Balanced Scorecard to conduct quarterly evaluation and prioritization of work.\*

Establish Policies and Procedures for staff, including an Annual Evaluation process.\*

### **Objective 3: Utilize Committees to progress on BSC measures and contract agreements.**

Reinvigorate the Endorsement Committee and Training Committee.\*

Establish a Board Development Committee to lead work on Objective 2.\*



## POLICY AND ADVOCACY PERSPECTIVE

ORIMHA's Policy and Advocacy Perspective is a bold statement of its role as an advocate and influencer in the IECMH field. Through the creation and distribution of Information Briefs, advocacy in legislative sessions, and efforts to secure policy inclusion, ORIMHA is actively shaping the future of IECMH services and support in Oregon. These strategies demonstrate ORIMHA's commitment to not just provide services but also to advocate for systemic changes that benefit infants, young children, and their families. In doing so, ORIMHA is not just a service provider but a catalyst for change, ensuring that policies and funding align with the needs and rights of Oregon's youngest and their families.

### Creating and Distributing Information Briefs

A key strategy in ORIMHA's advocacy efforts is the creation and distribution of Information Briefs. These Briefs are carefully crafted to address topics relevant to IECMH, shedding light on critical issues and providing valuable insights. The process involves engaging the Board and partner organizations in the creation of these Briefs, ensuring that they are comprehensive, accurate, and reflective of the community's needs. Once created, these Briefs are distributed to members and partners, serving as a tool for education and advocacy. This initiative is not just about information dissemination; it's about empowering members and partners with the knowledge to be effective advocates for IECMH.

### Advocacy in the 2025 Legislative Session

With the 2025 Legislative Session in view, ORIMHA is intensifying its advocacy efforts. Partnering with the Children's Institute to develop advocacy skills in staff, Board, and members is a strategic approach to build a robust advocacy front. This training is crucial for equipping the ORIMHA community with the skills necessary to effectively advocate for IECMH policies. Additionally, ORIMHA plans to connect with partners and offer support for their legislative priorities, fostering a united front in advocacy efforts. Engaging in the 2025 Legislative Session is an opportunity for ORIMHA to directly influence policies and funding decisions that impact IECMH in Oregon.

### Securing Inclusion in 2025 Legislation

A significant goal for ORIMHA is to ensure that IECMH is a priority in the 2025 legislation. Advocacy efforts are geared towards securing the inclusion of IECMH-related policies and funding in the 2025 legislative agenda, particularly focusing on prenatal through age two. This objective underscores ORIMHA's commitment to not just be a participant in the legislative process but to be a leader and influencer, ensuring that the voices of infants, young children, and their families are heard and considered in policy-making.



## Policy and Advocacy Perspective

*Informs efforts to act as an autonomous entity that advocates for policy and funding for IECMH.*

### Objective 1: Create and distribute Information Briefs.

Identify Issue Brief topics relevant to the IECMH.\*

Engage board and partner organizations to support creation of Briefs.\*

Distribute briefing materials to members and partners.\*

### Objective 2: Provide advocacy for IECMH in the 2025 Legislative Session.

Partner with the Children's Institute to develop staff, Board, and member advocacy skills.\*

Connect with partners and offer support for their 2025 Legislative priorities.\*

Engage in advocacy for the 2025 Legislative Session\*

### Objective 3: Secure inclusion in 2025 Legislation

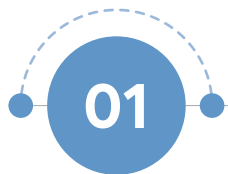
Advocate to be included in 2025 Legislation focusing on prenatal through age two.\*





## Board Priorities

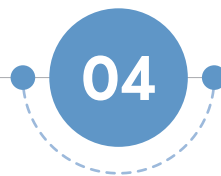
**Priority:**  
Diversity-Informed  
Practice and Equity



**Priority:**  
Workforce Development  
and Wellbeing



**Priority:**  
Financial and  
Programmatic  
Sustainability



**Priority:**  
Effective Relationship  
Development and  
Collaboration



**Priority:**  
Community Outreach  
and Awareness



**Priority:**  
Data Driven  
Decision Making

# OUR BOARD



**Lisa Harnisch** (she/her)  
*Board President*

Lisa Harnisch works with and on behalf of the Marion & Polk counties to ensure that children are ready for kindergarten and academic success, with a focus on coordinated and aligned systems and family stability. She convenes and catalyzes action around strategies focused on serving children and families that have limited opportunities. Lisa has over 20 years of experience at the state level, focusing on early childhood, child welfare and organizational development policy initiatives. She was involved in work at the policy and structure level to create the early learning hubs that are now around the state. Working locally in the community where she lives, works and plays provides her great energy and satisfaction.



**Liz Zinter** (she/her)  
*President Elect*

Liz Zinter currently works with the Department of Early Learning and Care as the Infant Toddler Specialist. Liz holds an undergraduate degree in Early Childhood Education and Family Studies and a Masters in Social Work. She has 16 years of experience working in early childhood education, including extensive work with Head Start, Early Head Start and home visiting programs. In her spare time, she enjoys bird watching, drinking coffee and spending time with her husband and two young children.



**Jacque Serrano** (she/her)  
*Secretary*

Jacque Serrano is a Licensed Clinical Social Worker (LCSW) and a Certified Drug and Alcohol Counselor (CADCI). She works for Greater Oregon Behavioral Health Inc. (GOBHI) as the Mental Health Programs Administrator, serving 12 counties across eastern Oregon. Jacque works with multiple teams at GOBHI, supporting the Applied Behavior Analysis program for children with Autism, Triple P team providing parenting education, and the Older Adult Behavioral Health Initiative educating service providers and older adults. Most of her career has been providing therapeutic services to high-risk children, adolescents and their families. Jacque is passionate about supporting the LGBTQ2S+ community with access to competent behavioral health services. Jacque is a huge fan of the wilderness and enjoys backpacking to remote alpine lakes to rest and rejuvenate.



**Tania Bailey (she/her/ella)**

*Treasurer*

Tania Bailey is a Spanish speaking Maternal Child Public Health Nurse with Linn County who is passionate about bridging equity gaps and improving systems through early intervention. Relatively new to the field of healthcare, Tania's previous degree was in education. She has enjoyed working with diverse populations in her community as a bilingual Early Childhood Educator, a Birth Doula and a Childbirth Educator, all of which have afforded her opportunities to extend compassionate, affirming support to under-represented members of her local community. When Tania is not working, she enjoys creative writing, spending time outdoors with her husband and three children, and traveling to visit family in her homeland of Spain.



**Katie Sass (she/her)**

*Member at Large*

Katie Sass is a born and raised Portlander who attended University of Portland for a Bachelor's in Psychology and then Portland State University for her Masters in Social Work. Katie is a licensed clinical social worker who has worked with young children and their families for almost 20 years with the last handful of years working as an IECMH Consultation Program Manager in a Portland area community mental health agency. One of her passions is supporting early care providers to obtain recognition for their skills, lived experience and education through obtaining Infant and Early Childhood Mental Health Endorsements®. Katie's other passion is spending time with her two children, spouse, dog and various small pets that she gets convinced are necessary to her children's ongoing happiness.



**Mona Manwaring (she/her)**

*Member at Large*

Mona Manwaring graduated with her Masters in Social Work in February of 2023. She has experience working in consultation with parenting groups throughout the state and extensive work with children and families. She has 20+ years of ECE experience in a variety of service levels. Mona lives on the Oregon Coast and when she is not championing Early Childhood topics she enjoys spending time with her husband and her cat, Otter.

### **JOIN IN OUR WORK**

*Interested in making a meaningful impact in the lives of Oregon's youngest residents and their families? ORIMHA is seeking passionate individuals to join one of our Committees or our Board of Directors. We are especially committed to including diverse voices and perspectives to enrich our mission. If you feel inspired to contribute your skills and experiences, please reach out to us to explore this rewarding opportunity!*

## OUR TEAM



**Erin Kinavey Wennerstrom** (she/her)

*Executive Director*

Erin Kinavey Wennerstrom, M.Ed., IMH-E serves as ORIMHA's Executive Director. She has worked in various capacities in the field of early childhood for over 20 years. She has worked as a Head Start disability and behavioral health coordinator, early intervention home visitor and program administrator, lecturer and mental health clinician. Erin has graduate training and certification in early childhood special education and is a Licensed Professional Counselor (LPC). Erin has recently co-authored an article on Secondary Traumatic Stress (Kinavey Wennerstrom, Stegenga & Lund, 2018) and a cultural responsiveness companion to the Early Childhood Benchmarks of Quality (EC-BOQ) (Kinavey Wennerstrom, Stegenga, Allen, & McIntosh 2018). Erin is pursuing research across the areas of teacher preparation, social and emotional intervention and implementation science.



**Veronica Rosa-Sandoval** (she/her)

*Bilingual/Bicultural Endorsement Coordinator*

Veronica Rosa-Sandoval serves as ORIMHA's Bilingual/Bicultural Endorsement Coordinator through the Alliance for the Advancement of Infant Mental Health. Veronica has over ten years of experience in the field of IECMH. She has a master's degree in Social Work and an Infant Mental Health Specialist Endorsement. During the course of her career, Veronica has worked extensively with "high-risk communities" for many non-profit agencies. She is certified to train professionals in using the Preschool and Early Childhood Functional Assessment Scale and has extensive comprehensive knowledge in Early Childhood Development & Developmental Delays. One of Veronica's biggest accomplishments has been advocating for the BIPOC community, by using her Spanish bilingual skills to bring awareness to topics that affect those who are impacted by inequalities. She is a firm believer that it is our job as professionals and human beings to bring more awareness around Diversity, Equality and Inclusion.



**Loretia Powell** (she/her)

*Endorsement Central Services Coordinator*

Loretia Powell serves as ORIMHA's Endorsement Coordinator through the Alliance for the Advancement of Infant Mental Health. Loretia received her Bachelors and Masters of Social Work from Michigan State University. While earning her Masters, she also participated in Michigan State's Specialization for Infancy and Early Childhood Program. Loretia holds 20 years of experience working with children 0 to 6, with experience in Early Childcare, Foster Care, Infant Mental Health Home Visiting, Maternal Infant Health Home Visiting and Private Practice as a clinical therapist. She is endorsed as an Infant Family Specialist and uses her breadth of experience in her current role as Endorsement Coordinator to support ORIMHA and its Infant Mental Health Endorsement Applicant's in various ways.

# RECOGNITION OF CONTRIBUTORS

## **Alyssa Chatterjee**

Department of Early Learning and Care, Director

## **Amanda McCarthy**

Advanced Health, Director of Social Determinants of Health

## **Amer Ziring**

Oregon Association of Relief Nurseries, Program Director

## **Amy Chandler**

Oregon Health Authority, Early Childhood Specialist

## **Beth Green**

Early Childhood and Family Research at Portland State University, Director

## **Beth Jaffee-Stafford**

Family Nurturing Center, Clinical Director

## **Bill Baney**

Oregon Department of Health & Human Services, Child Welfare/Self Sufficiency Delivery Manager

## **Bridget Dazey**

Clackamas Workforce Partnership, Executive Director

## **Candelaria Romero**

Childcare Resource Network, Infant Toddler Quality Improvement Specialist

## **Carmen Mims**

Oregon Department of Human Services and Child Welfare, Prevention Coordinator

## **Carolyn VanOrden**

Salem Child Development Center, Executive Director

## **Cate Wilcox**

State Public Health Division of OHA, Maternal and Child Health Manager

## **Cynthia Ikata**

Oregon Health Authority, NFP Consultant

## **Dani Stamm Thomas**

Early Learning Hub of Clackamas County, Director

## **David Mandell**

Department of Early Learning and Care, Chief of Policy Learning and Research

## **Donna Schnitker**

Harney Education Services District Early Childhood, Director

## **Erin Kinavey Wennerstrom**

ORIMHA Executive Director

## **Gillian Wesenberg**

South Central Oregon Early Learning Hub, Director

## **Gwyn Bachtle**

Department of Early Learning and Care, Early Learning Programs Director

## **Heather DeSart**

Northwest Oregon Works, Executive Director

## **Ingrid Anderson**

Portland State University, Graduate Certificate of Infant and Toddler Mental Health Coordinator

## **Dr. Irvin Brown**

Oregon Department of Health & Human Services, Policy Advisor

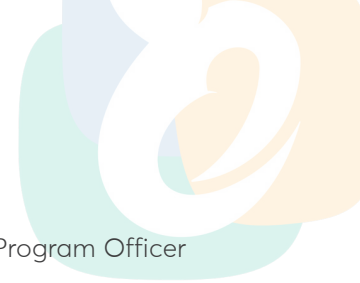
## **Jacque Doney**

Siskiyou Community Health Center, Outreach Director Greater Oregon Behavioral Health, Inc., Mental Health Programs Administrator

## **Jacque Serrano**

ORIMHA Secretary, Greater Oregon Behavioral Health, Mental Health Programs Administrator





**Jacqueline Jones**

Albina Head Start, Education Coordinator

**Jeanett Sealy**

Multnomah Early Childhood Program, Director

**Jeff Versaw**

Confederated Tribes of Grand Ronde (Head Start & Youth Education), Early Learning Center

**Jenna Sanders**

CCR&R Marion, Polk and Yamhill, Program Director

**Jennifer Fulwyler**

ORIMHA Financial Consultant

**Jennifer Toomey King**

Hood River School District, Early Interventionist

**Julie Scheigert**

Multnomah Early Childhood Program, Associate Director

**Kandy Last Name**

Mountainstar Relief Nursery

**Katie Sass**

ORIMHA Member at Large, IECMH Consultation Program Manager

**Kelly Poe**

Eastern Oregon Early Learning Hub, Director

**Lacretia Powell**

ORIMHA Endorsement Central Services Coordinator

**Laura Zubricky**

Mount Hood Community College, Associate Director of Training & Health

**Leslie Moguil**

Parenting Together and Early Learning Washington Hub, Senior Program Coordinator

**Lisa Harnisch**

ORIMHA Board President, Director of Hub, Inc.

**Liz Zinter**

ORIMHA President Elect, Department of Early Learning and Care, Infant Toddler Specialist

**Maria Weer**

Building Healthy Families, Director

**Mellie Bukovsky-Reyes**

Playology Oregon Educational Consulting, Founder

**Melody Carrington**

Healthy Families, Family Support Specialist

**Molly Day**

Early Learning Multnomah, Co-Director

**Mona Manwaring**

ORIMHA Member at Large, Lincoln County, Child and Family Clinical Counselor

**Patricia Cavanaugh**

Help Me Grow Oregon, Program Manager

**Dr. Peg Miller**

Pediatrician, Home Visiting Early Learning Council, Co-Chair

**Robin Hill-Dunbar**

Ford Family Foundation, Senior Program Officer

**Ronda Taft**

Oregon Child Development Center, Education/ Site Coordinator

**Roxann Malmberg**

Blue Mountain Child Care Resource & Referral, Infant Toddler Mental Health Specialist

**Sara Stearns**

Oregon Association for the Education of the Young Child, Director

**Sherry Cowens**

UCAN Head Start, Early Head Start Manager

**Shira Skybinskyy**

Four Rivers Early Learning and Parenting Hub, Director

**Suey Linzmeier**

Head Start of Yamhill County, Executive Director

**Tania Bailey**

ORIMHA Treasurer, Linn County, Maternal Child Public Health Nurse

**Theresa Martinez**

Malheur Education Service District, Early Learning Coordinator

**Veronica Rosa-Sandoval**

ORIMHA Endorsement Coordinator



[www.orimha.org](http://www.orimha.org)