

**Local Government Advisory Committee
Room 473, Human Services Building, Salem
November 4, 2005
Minutes**

ATTENDING

Janet Carlson	Marion County Board of Commissioners
Bill Coulombe	DHS – Public Health
Bill Crowell	DHS – Office of Information Systems
Gary DiCenzo	Clackamas County
Ron Dodge	Polk County Commissioner
Ramona Foley	DHS – Children, Adults and Families
David Foster	Oregon Housing and Community Services
Gordon Fultz	Association of Oregon Counties
Bruce Goldberg	DHS – Director
John Hartner	Oregon Assoc. of Community Corrections Directors
Chuck Hurliman	Tillamook County
Barry Kast	DHS – Interim Deputy Director
Angela Kimball	Assoc. of Oregon Community Mental Health Programs
Stan Mazur-Hart	DHS – OMHAS
Linda Modrell	Chair, Benton County Commissioner
Joe O’Leary	Judiciary Committee / Legislature
Madeline Olson	DHS – OMHAS
Patty O’Sullivan	DHS – Director’s Office
Anne Peltier	CLHO
Lynn Read	DHS – Office of Medical Assistance Program
Clyde Saiki	DHS – Deputy Director
Jim Sellers	DHS – Office of Public Affairs
John Swanson	DHS – Finance and Policy Analysis
James Toews	DHS – Seniors and People with Disabilities
Bill Wagner	OCWCOG
Gillian Wesenberg	Coalition of County Children and Families Commissions

WELCOME & INTRODUCTIONS

Linda Modrell called the meeting to order and roundtable introductions were made. Bruce Goldberg, M.D., the new DHS Director introduced himself and with the help of Deputy Director Clyde Saiki, laid out his plan to establish greater fiscal accountability and credibility for the Department. Goldberg feels that, in order for DHS to be an effective partner and accomplish its mission, DHS must have a

strong and a credible foundation based on the ability to manage the budget, provide clear and accurate information and make use of current resources in the most effective way possible.

APPROVAL OF MINUTES & AGENDA

The minutes from the October 14th meeting were reviewed and approved.

“Recent Public Health Events” was added to the agenda. The E-Board report was moved up on the schedule. With these changes, the agenda was approved.

REPORT ON EMERGENCY BOARD

John Swanson gave a synopsis (see Handout #1) of the results of the October 27, 2005, E-Board meeting. Five issues were discussed.

Child Welfare Legal Representation – DHS together with the Department of Justice presented a plan (revised from the Policy Option Package from the 2005-07 DHS Budget Presentation) that would allocate \$2.5 Million that would provide legal representation for child welfare workers in court actions. The plan includes establishing 32 positions in the Department of Human Services and 10 positions in the Department of Justice. After a lengthy discussion, the plan was approved.

The Department’s Biennial Budget Close-out – DHS requested adjusting authority and limitation to finalize the 2003-05 budget. In May the Department had anticipated reverting about \$78 million to the general fund, but ended up only being able to revert about \$23 million. In closing out the Department’s first biennia as a single entity, some issues were discovered regarding the cost-allocation plan. The amount of federal participation and administrative costs of the Department had been over-estimated. Other factors leading to the shortfall were increased caseloads and final resolution of the Medicaid Upper Payment Limit (MUPL) issue. After considerable discussion, the Department’s request was approved.

Space Conversion at the Oregon State Hospital in Portland – DHS reported on its plan to convert medical treatment space to psychiatric space at a facility in Portland leased by Oregon State Hospital, in order to move 30 civilly-committed patients currently housed in Salem to Portland. The report was received with a requirement to come back with additional information and additional options.

National Institute for Outpatient Safety and Health Grant Request – This grant application is a collaborative effort between the Department, the local pipe fitters

union, the Oregon Occupational Safety and Health Division (OR-OSHA), partners from OHSU, and Oregon State University, to try and determine the feasibility of investigating why tradesman that do pipe-fitting, welding and soldering area are experiencing accelerated rates of disability and death.

Medicaid Modernization Act – This report highlighted DHS preparations for the upcoming change in the Medicaid program regarding prescription drug coverage and the fact that all federal deadlines to date have been met. The Department has over 2,500 staff, providers, and stakeholders focusing attention on assisting the dual-eligible clients in this transition. The report was well accepted.

REPORT ON COMMISSIONS AND COMMITTEES

Patty O’Sullivan gave a brief report on all of the committees and advisory groups the Department has been involved with. Handout #2 is a compilation of several different lists and is still in early draft stage. Upon completion, the list will be placed on the DHS web site.

COUNTY CONTRACTS UPDATE

Clyde Saiki reported on progress made with the counties regarding contract language. The goal is to get it wrapped up before the AOC conference. Saiki and Gordon Fultz believe they are very close.

PUBLIC HEALTH UPDATE

Bill Coulombe, Deputy Director for Public Health, presented an update on activities in the Public Health cluster, in particular, the strategic national stockpile full-scale exercise that occurred November 1 and 2, 2005. It was a multi-agency, multi-disciplinary exercise involving homeland security, and state police. It tested the current plan in place for deployment of the Centers for Disease Control in the event of a health or other emergency incident.

In brief – There were nine PODs (points of distribution) set up throughout the state, with evaluators for the local, state, and national levels at each site. By 3:00 p.m. all PODs had received their “vaccines”. For this exercise, peanut and regular M&Ms were used as the “vaccines”. An after-action report on the drill will be compiled by the end of November and will help to refine the planning processes and procedures. This was Public Health’s first full-scale drill, and although met with some criticism, everyone felt that it went well. Participating counties, if not a POD location, were asked to evaluate or observe.

Q: Is the bird flu going to be a problem in Oregon?

A: The Center for Disease Control (CDC) has set up a pandemic flu web site. What is known at this time is that the human cases of avian flu in Southeast Asia have been a result of prolonged contact with infected birds, not human-to-human contact. If and when the avian flu arrives in the United States, it is likely to be through wild migratory birds coming from Canada or Alaska. The CDC is having conversations and is making preparations with the Department of Agriculture, as well as U.S. Fish and Wildlife.

The basic message is, if you're sick, stay home. If you are in contact with someone who is sick, at least one of you should wear a mask. Wash your hands. Cover your cough by coughing into your sleeve or a tissue. Wash your hands. To avoid transmitting the flu virus, try not to touch your nose and face after coughing, sneezing or other contact. Wash your hands.

JAIL MANAGERS' SURVEY

Stan Mazur-Hart reported on a survey of jail managers regarding seriously mentally ill inmates in county jails. The initial premise for the survey was that inmates who have a serious mental illness and do not represent a significant public safety risk, do not belong in jail. For the purposes of this survey, serious mental illness was defined as schizophrenia, bi-polar disorder, manic/depressive disorder, and major depression.

The capacity of Oregon jails is about 6,700. The average daily population is 6,000. The total number of jail bookings in 2004 was 190,000. The average number of jail bookings is 544 (per day). At any given time, 7-9% of inmates have a serious mental illness.

The most common offenses committed by mentally ill people are criminal trespass, disorderly conduct, and possession or delivery of drugs, and probation or parole violations - mostly misdemeanors. These people are not significant public safety risks and they need treatment services not available in jail. They also have difficulty understanding, processing and following simple jail security rules. They spend more time in isolation cells than other inmates incarcerated for similar crimes. They require more staff supervision and are more likely to be physically and sexually assaulted. They spend more time in jail and go to jail more often.

Inmates with serious mental illness are a risk to themselves in jail and represent significant disruption of the corrections environment. The daily cost for these

inmates exceeds the daily cost for other inmates and jail staff are not sufficiently trained to deal with these people.

These inmates have treatment needs that are best met in a mental health program. There is a major lack of housing and community treatment programs available for these people upon release from incarceration.

Senate Bill 913 passed and is in the process of implementation, which would temporarily suspend medical benefits for mentally ill people while incarcerated and reestablish once they are released.

Jails are not well equipped to be serving these people and the training for correctional officers who are operating the jails has been more of a crisis management training, which is isolation cells, and protection from suicide, which are rather direct and cold, but necessary interventions to protect the person and guard the liability of the entity serving the person.

Of all the people who have serious mental illness and are incarcerated or require in-patient hospitalization, more than 70 percent have a substance use disorder as well.

Some solutions might be to develop a statewide plan for local jails to prescribe and bulk purchase at the lowest rates available current generation psychiatric medications. Better training for correctional officers, diversion programs, treatment courts, and developing the necessary services for people upon release.

Once the final report is written on this survey, Stan Mazur-Hart distribute copies to LGAC members.

MISCELLANEOUS

Joe O'Leary, Counsel to the Judiciary Committee of the Oregon State Legislature was in attendance for part of the meeting, primarily for the Jail Managers' Survey. He reported that Senator Ginny Burdick and Representative Wayne Krieger decided that the issue of mentally ill people in county jails will be a legislative priority in the interim. They decided to dedicate at least one informational meeting to this topic, which is expected to be held in the spring.

LGAC members agreed to cancel the December meeting and return in January. The meeting adjourned at 11:38 a.m.