

MULTNOMAH COUNTY CHARTER, Vol. 2, Bk. 21

-Report of the Sub-Committee on Public Health

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HYPOTHESIS

REPORT
OF THE
SUB-COMMITTEE ON PUBLIC HEALTH
TO THE
HOME RULE CHARTER COMMITTEE
OF
MULTNOMAH COUNTY, OREGON

Mrs. Arnold Damskov-Chairman
Mrs. Sylvia Nemer
William Brunner

The Sub-Committee on Public Health has interviewed city and county health officers and heads of institutions, has considered the statutes under which medical services are performed by Multnomah County, and has visited the premises of the county hospital, the center at N.E. 122nd and Glisan, and Edgefield Manor and Lodge. It extended the scope of its study to include air pollution.

Multnomah County health functions are currently performed in two areas: (1) public health (sanitation, insect control, detection of tuberculosis and diabetes, nursing, and mental health) and (2) medical, hospital, and nursing services for the indigent. Administrative responsibility for the public health function (1 above) centers in one official, the public health officer, who reports directly to the Board of County Commissioners. This official is also responsible for some services to the indigent through his supervision of Edgefield Manor and the county physician. The superintendant of the county hospital reports directly to the Board of County Commissioners. Half his salary is paid by the University of Oregon Medical School, and he is on the staff of the Medical School.

The sub-committee considered the feasibility of combining, for administrative purposes, the public health and public welfare functions, and rejected the idea because of the different professional qualifications required to oversee the two functions and also because the span of control would be too broad.

The sub-committee also considered, but reached no conclusion, on a proposal to support the county health administrator with an advisory board, in order to ensure a balanced program of health and medical services.

The sub-committee recognizes a charter cannot prescribe the minutia of administrative organization and at the same time provide the flexibility necessary to meet changing needs and/or new programs. Accordingly, our single recommendation to the Home Rule Charter Committee is that:

The charter should provide for a Department of Medical Services under the direction of an officer qualified to practice medicine in the State of Oregon. Ideally, the Director should have an advanced degree in Public Health, though this qualification may be too restrictive to be included in the proposed charter.

The Director of the Department of Medical Services should be directly responsible to whatever chief county administrator the Home Rule Charter provides.

Other recommendations contained in this report should be part of a separate document made available to the new governing body to assist it in implementing a charter form of county government. It is to that new governing body, then, that these recommendations are addressed:

1. Domiciliary care for the elderly at Edgefield Manor be continued as at present.
2. Mental health services be continued and expanded until adequate provision for them is made by other agencies.
3. That the Department of Medical Services be divided into divisions and sections as described in the material that follows.

Mental Health. Mental Health is currently a section within the Division of Public Health of Multnomah County. It has been in existence as an entity of county government for approximately three years and has a staff of twelve full-time employees and fifteen part-time psychologists and psychiatrists. It operates in a clinic of the Public Health headquarters at 122nd and Glisan and works largely with out-patients. The functions of this group are indicated in the following functional chart.

MENTAL HEALTH SECTION
1. Diagnosis and treats mentally ill and emotionally disturbed indigents.
2. Gives follow-up care to patients released from State Mental Institution.
3. Provides treatment for inmates of Edgefield Lodge.

CHART I

Edgefield Lodge. Edgefield Lodge has recently opened as a treatment facility for the in-patient care of emotionally disturbed children. This facility is filling a void in the community, as the two private institution in the metropolitan area are unable to care for all of the children in need of treatment. The in-patient care of the children is provided by the Mental Health Section, and the functions of Edgefield Lodge are as indicated in Chart II.

EDGEFIELD LODGE
1. Provides in-patient care for emotionally disturbed children.

CHART II

With a single Division of Mental Health including the supervision of Edgefield Lodge, the Director of Mental Health would have the authority over all of the facets of mental health in Multnomah County and the supervisory responsibility over the care of all his patients.

Recommendation. The Sub-Committee on Public Health recommends the establishment of a Division of Mental Health functionally organized as indicated in Chart III, as a part of the Department of Medical Services.

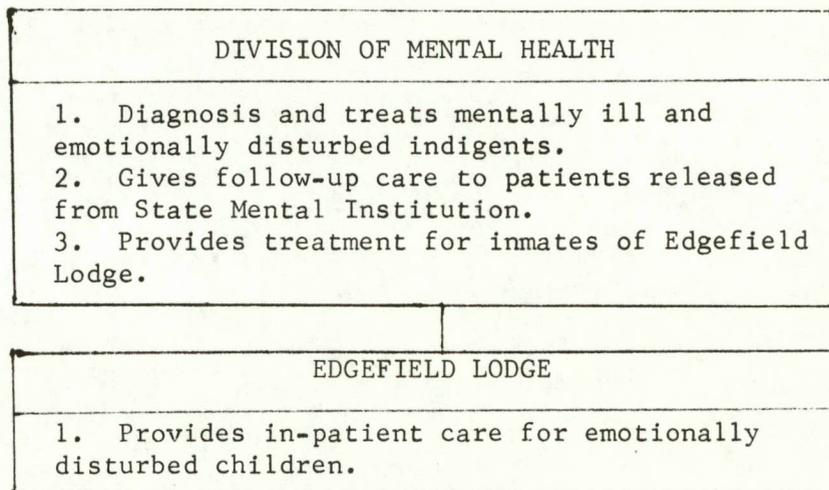


CHART III

Public Health Sanitation Section. With the addition of plumbing inspection in 1964 to the duties of the Public Health Sanitation Section, the work of the Sanitation Section was greatly increased. In 1963 this staff conducted 11,000 field investigations, made 17,000 inspections with approximately 4,500 office conferences and interviews. The law requires inspection of all eating and drinking establishments at least twice a year. Inspection of farm labor camps involves many visits and inspections in addition to assisting with water supply and sewage problems. Among the many services required of this section are rodent control, inspection and testing of water bathing places, inspection and sampling of school water supply, etc. Reduced to their simplest terms, the functions of the Sanitation Section are indicated in Chart IV.

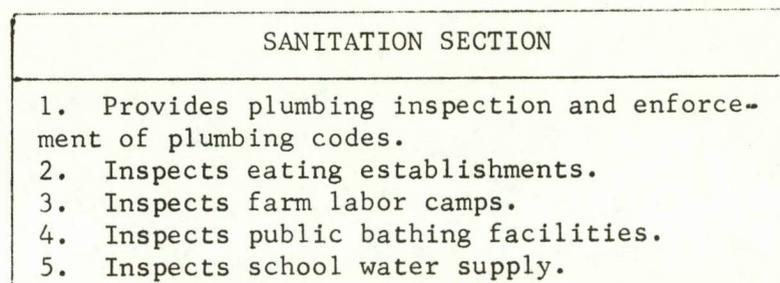


CHART IV

Insect Control. The Portland City Bureau of Insect Control is administered by the City Health Officer, and Multnomah County has a contract with the city in which they share the actual expenditures for mosquito control.

Air Pollution. At the present time, the county does not have an air pollution program. There has been a recent effort towards the establishment of a tri-county air pollution control which would include the City of Portland. It would appear that negotiations have fallen down and that no further plans are in existence for any area-wide air pollution authority. The City of Portland, however, does have an air pollution ordinance and a staff to enforce it. It would appear that this is a problem greater than the city limits and a problem that should be undertaken by the county.

Recommendation. The Sub-Committee on Public Health recommends the establishment of a Sanitation Division within the Department of Medical Services to provide the sanitary inspections of all public accommodations, plumbing inspection and enforcement of the plumbing code, supervision of the insect control program, and for the administration and enforcement of an air pollution ordinance county-wide at such time as this becomes a reality. The organization of the Division of Sanitation is recommended to take the functional alignment as indicated in Chart V.

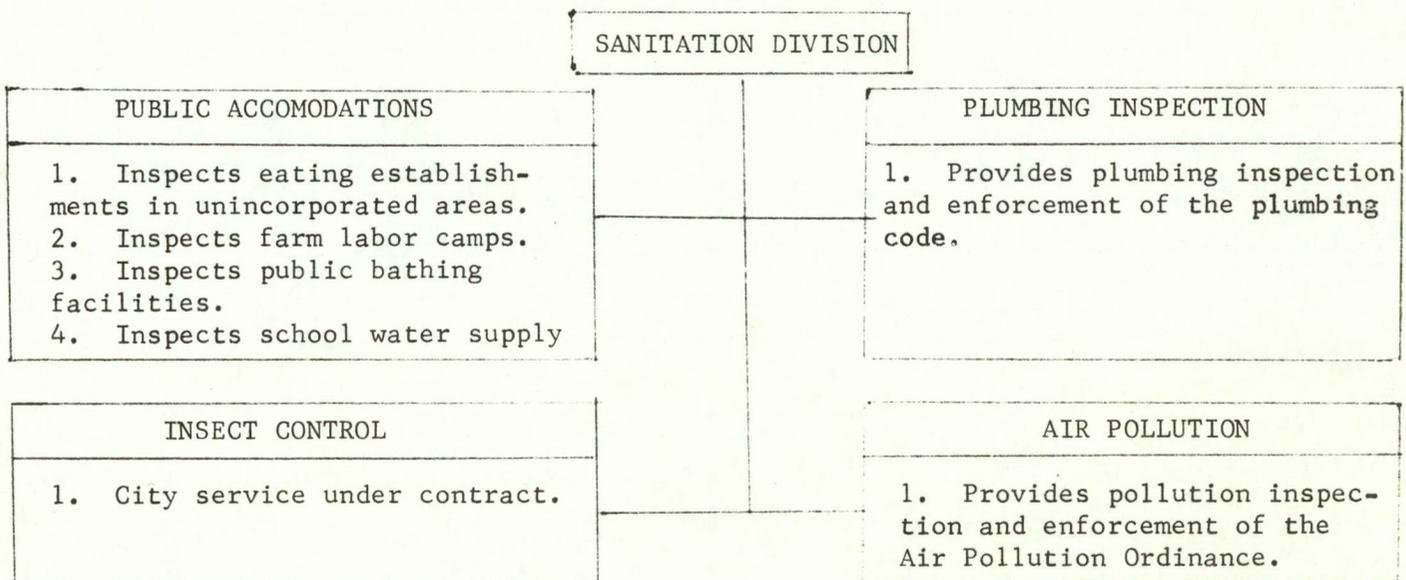


CHART V

This recommendation makes little change in present arrangements, but places insect control under the Sanitation Division and makes room for air pollution control when it comes into existence in the county. While insect control is taken care of by the city under a contract, there is no reason to believe that this will continue forever. This recommended organization merely fixes responsibility for seeing that the insect control program is carried out.

County Physician. The County Physician's office is physically located in the out-patient clinic at the University of Oregon Medical School. The County Physician is the Admitting Officer for the County Hospital and for Edgefield Manor. He also supplies medical care to welfare recipients and the medically indigent throughout the county. The patients are seen and treated either in the office or at home.

Edgefield Manor. Edgefield Manor is a nursing home caring for approximately 250 indigent elderly Multnomah County residents. There is a wing of Edgefield Manor that operates as a hospital rendering physical and occupational therapy to approximately fifteen elderly stroke victims preparing them to be self-sufficient or nearly so in taking care of their own needs. The purpose of Edgefield Manor is to provide nursing home care for the aged and helpless, to provide a home for the aged who are unable to live alone and care for themselves, and to provide rehabilitation for certain disabling conditions with the idea of restoring such people to health and self-care.

Nursing Section. The Public Health Nursing Section consists of a staff of thirty-one public health nurses and two registered clinic nurses. During 1963 there were 2,900 home visits made in behalf of the tuberculosis program alone and 5,600 tubercullin tests were given through the division. Each nurse has from 1,000 to 2,400 school children in her jurisdiction, and they make regular visits to the schools to assist with visual screening, physical examinations, etc. Pre-natal counselling and post-partum follow-up involve many visits and extend into the well child conferences which are held regularly throughout the county. During 1963 approximately 2,000 children under six years of age were visited in 5,000 home visits and 1,200 office visits.

Public Health Survey Center. The City-County Survey Center has been in operation since 1944. The chest X-Ray program has been well accepted by the community and two units annually take approximately 120,000 films. Over the years approximately one-third of the cases of tuberculosis reported have been discovered initially by a miniature film X-Ray. A new program in Multnomah County is an effort at diabetes detection. The development of a piece of laboratory equipment which can automatically do blood chemistry with a high degree of accuracy at the rate of approximately forty to sixty samples per hour makes it possible to do mass blood examinations at a cost comparable to the mass chest X-Ray program.

Recommendation. The Sub-Committee on Public Health recommends the establishment of a County Physician Division within a Department of Medical Services organized functionally as indicated in Chart VI. This Division would have responsibility for programs to detect tuberculosis and diabetes, the public nursing functions, and the in-patient and out-patient care of the medically indigent of Multnomah County.

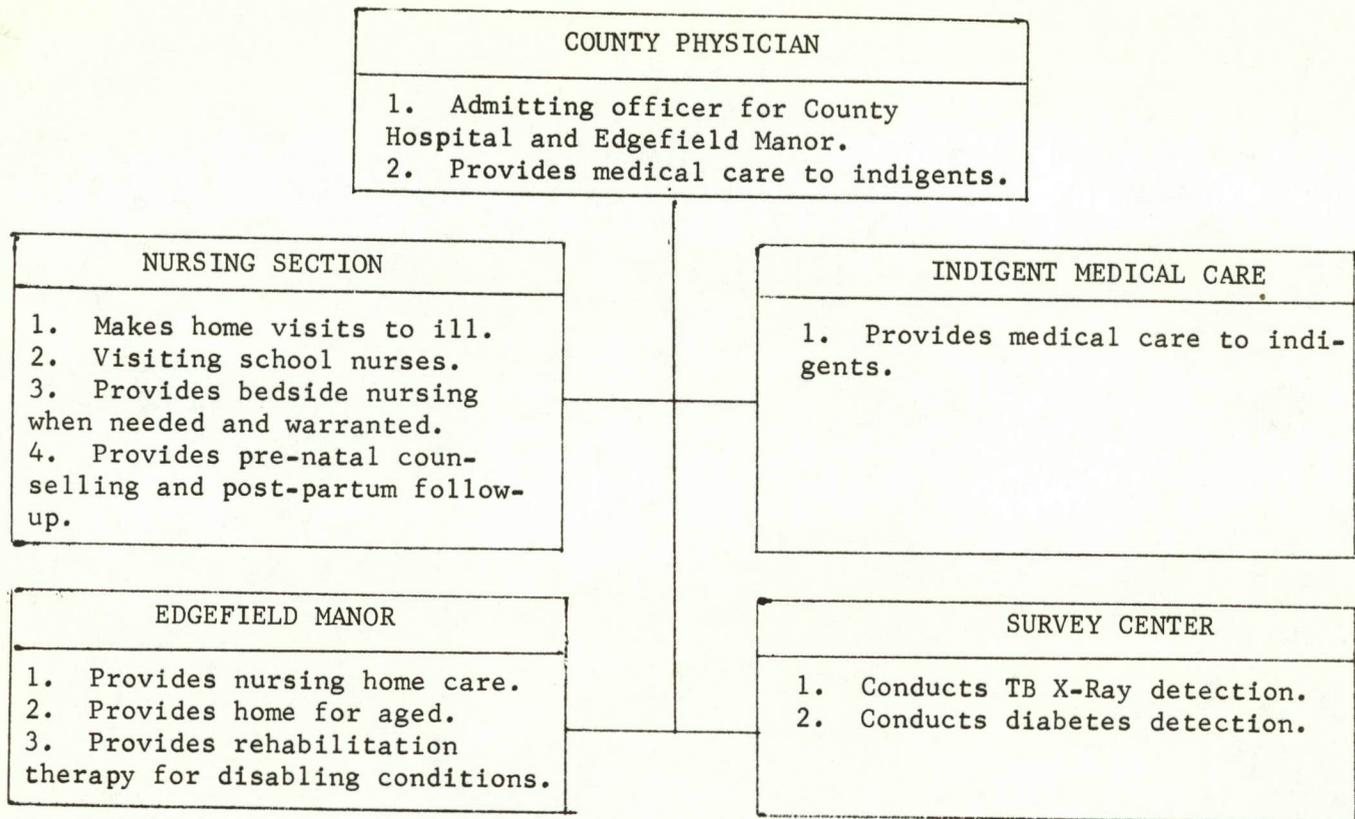


CHART VI

County Hospital. The Multnomah County Hospital is operated specifically to provide medical treatment for indigent patients who live within Multnomah County. Patients are admitted on the basis of medical necessity for hospital care, bona-fide residence in the county, and lack of sufficient funds to pay for hospitalization. The hospital itself is unique in that the buildings are adjacent and attached to the University of Oregon Medical School Hospital with many services centralized for greater efficiency and used by all clinical units on the campus. The physicians who care for the patients in Multnomah Hospital are members of the staff of the University of Oregon Medical School whose services are provided without charge to the county or the patients. The hospital is operated in conjunction with the University of Oregon Medical School on a contractual arrangement which dates from the first opening of the county hospital in 1922. The administrator of the hospital himself is paid partially by the county and partially by the state and has position on the staff of the medical school.

Recommendation. The Sub-Committee on Public Health recommends that the County Hospital be made a division of a Department of Medical Services within Multnomah County for organizational and budgetary purposes. This is not to criticize the present operation or arrangements with the University of Oregon Medical School as they are functioning and functioning well. The sub-committee feels that the excellent operation of the Multnomah Hospital is due, however, to the personnel in charge rather than the administrative arrangements.

County Organization for Public Health. The Sub-Committee on Public Health recommends that the functional responsibilities for the providing of in-patient care to emotionally disturbed children be made a responsibility of the Division of Mental Health; that all of the sanitation functions, including insect control and air pollution, be made a part of the Division of Sanitation; that all of the patients care functions be made the responsibility of the County Physician; and that the Multnomah County Hospital be made a part of the Department of Medical Services as indicated in Chart VII.

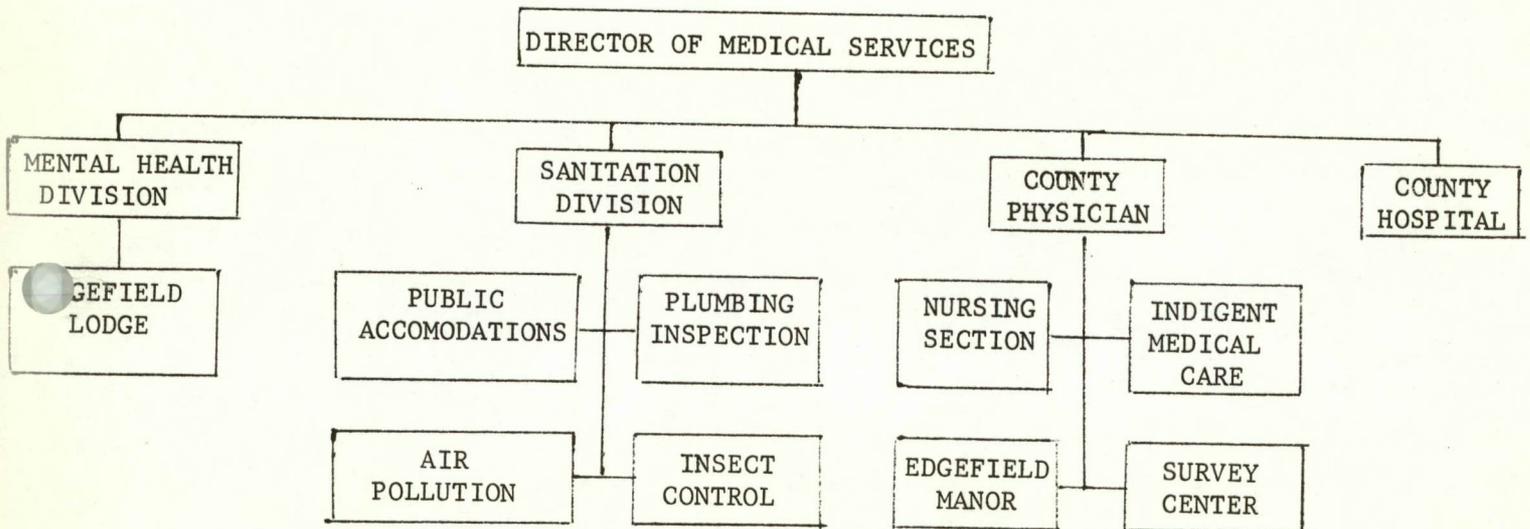


CHART VII