

1-4-93

Carrie:

This material replaces the material you already distributed. The original "subject" was "Children and Youth Mental Health Advisory Committee"

Several errors were found in the original material upon the return of our director from vacation; hence, the need for the substitution.

We have also eliminated several attachments to the original material which we decided were not necessary.

Very sorry for the last-minute change -

Thanks!

Karen Mayfield
x4262

Meeting Date: _____

Agenda No.: B-1

(Above space for Clerk's Office Use)

AGENDA PLACEMENT FORM
(For Non-Budgetary Items)

SUBJECT: Child and Adolescent Mental Health Advisory Committee

BCC Informal January 5, 1993 BCC Formal _____
(date) (date)

DEPARTMENT Social Services DIVISION Mental Health, Youth & Family Services

CONTACT Gary Nakao TELEPHONE 248-3782

PERSON(S) MAKING PRESENTATION Gary Nakao, James Edmondson and Gary Smith

ACTION REOUESTED:

INFORMATIONAL ONLY POLICY DIRECTION APPROVAL

ESTIMATED TIME NEEDED ON BOARD AGENDA: 30 Minutes

CHECK IF YOU REQUIRE OFFICIAL WRITTEN NOTICE OF ACTION TAKEN: _____

BRIEF SUMMARY (include statement of rationale for action requested, as well as personnel and fiscal/budgetary impacts, if applicable):

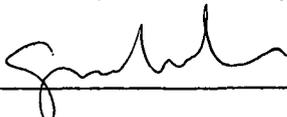
Gary Nakao, Department of Social Services, provided a briefing on future directions in establishing a comprehensive planning system for children and youth services in Multnomah County. Consistent with this broad direction, is a need to identify planning processes within each Division and Department of our County involved in serving youth and children. One area which needs a specific planning and advisory body for children and youth is the Mental Health Program. We propose establishing a Child and Adolescent Mental Health Advisory Committee to be complimentary to the Mental Health Advisory Committee and that will deal with a service area not addressed by the MED Task Force Report.

(If space is inadequate, please use other side)

SIGNATURES:

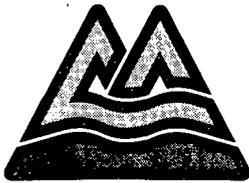
ELECTED OFFICIAL _____

Or

DEPARTMENT MANAGER 

(All accompanying documents must have required signatures)

1993 JAN -4 PM 3:12
MULTNOMAH COUNTY
CLERK OF COUNTY COMMISSIONERS
EDWARD DEE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
SOCIAL AND FAMILY SERVICES DIVISION
ADMINISTRATIVE OFFICES
426 S.W. STARK ST., 6TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3691
FAX (503) 248-3379

BOARD OF COUNTY COMMISSIONERS
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PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GARY HANSEN • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy, Multnomah County Chair
Commissioner Dan Saltzman
Commissioner Gary Hansen
Commissioner Tanya Collier
Commissioner Sharron Kelley

VIA: Dr. Gary Nakao, Director, Department of Social Services

FROM: Gary Smith, Director, Mental Health Youth and Family Services Division
James Edmondson, Program Manager, Office of Child and Adolescent Mental Health Services

DATE: January 4, 1993

SUBJECT: Child and Adolescent Mental Health Advisory Committee

ISSUE

The Office of Child and Adolescent Mental Health Services (OCAMHS) was officially formed in 1990 and has operated without the benefit and support of an advisory committee ever since. All other program offices in the Mental Health, Youth and Family Services Division (MHYFSD) have an advisory committee that provides valuable assistance to their operations. The area of child and adolescent mental health is one of the fastest expanding and most challenging of all of our services. It is vital that County government have the benefit of input from a broad constituency.

BACKGROUND

In 1991, OCAMHS convened the Child and Adolescent Mental Health Planning Group in order to develop a comprehensive plan for mental health services to Multnomah County children and adolescents with mental and emotional disabilities. This plan was invaluable in helping to prepare a subsequent RFP for all County contracted child and adolescent mental health services. One of the recommendations of the Planning Group was to form a standing child and adolescent mental health advisory group. This same recommendation had been made by the Children's Work Group, consumers, service providers, and advocates. The Multnomah County Mental Health Advisory Committee has also endorsed the formation of this new committee and advised the MHYFSD to proceed with the necessary steps.

DISCUSSION

In order to more effectively meet the needs of the children and families of Multnomah County, contact and communication on a regular basis with a cross section of representatives of the community on children's mental health issues is imperative. The representatives will provide direction, planning, and organizational input. Categories of membership will be the same as those within the former Child and Adolescent Mental Health Planning Group. In fact, several of the same members will serve on the new advisory committee, providing continuity to the planning process.

RECOMMENDATION

It is recommended that the MHYFSD establish the Child and Adolescent Mental Health Advisory Committee to provide guidance to the OCAMHS. The new committee will be affiliated with the Mental Health Advisory Committee and will have two representatives as voting members on the Mental Health Advisory Committee.

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GWS/mas

[6009B]

Meeting Date: JAN 05 1993

Agenda No.: B-1

(Above space for Clerk's Office Use)

AGENDA PLACEMENT FORM
(For Non-Budgetary Items)

Briefing on Proposed
SUBJECT: Children & Youth Mental Health Advisory Committee

BOARD BRIEFING January 5, 1993 REGULAR MEETING _____
(date) (date)

DEPARTMENT Social Services DIVISION Mental Health, Youth & Family Services

CONTACT Gary Nakao TELEPHONE 248-3782

PERSON(S) MAKING PRESENTATION Gary Nakao, James Edmondson and Gary Smith

ACTION REQUESTED:

[X] INFORMATIONAL ONLY [] POLICY DIRECTION [] APPROVAL

ESTIMATED TIME NEEDED ON BOARD AGENDA: 30 minutes 9:30 TIME CERTAIN REQUEST

CHECK IF YOU REQUIRE OFFICIAL WRITTEN NOTICE OF ACTION TAKEN: _____

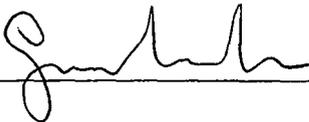
BRIEF SUMMARY (include statement of rationale for action requested, as well as personnel and fiscal/budgetary impacts, if applicable): Gary Nakao, Department of Social Services, provided a briefing on future directions in establishing a comprehensive planning system for children and youth services in Multnomah County. Consistent with this broad direction, is a need to identify planning processes within each Division and Department of our County involved in serving youth and children. One area which needs a specific planning and advisory body for children and youth is the Mental Health Program. We propose establishing a Children and Youth Mental Health Advisory Committee to be complimentary to the Mental and Emotional Disabilities Advisory Council which has largely been dealing with adult issues (MED Task Force Report Recommendations).

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SIGNATURES:

ELECTED OFFICIAL _____

Or

DEPARTMENT MANAGER 

(All accompanying documents must have required signatures)

BOARD OF
COUNTY ADMINISTRATORS
1992 DEC 28 PM 4:36
MULTNOMAH COUNTY
OREGON



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
421 S.W. FIFTH AVENUE, SUITE 600
PORTLAND, OREGON 97204
(503) 248-3782
FAX: (503) 248-3828

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GRETCHEN KAFOURJY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Board of County Commissioners

FROM: Gary Nakao, Director *Gary Nakao*
Department of Social Services

DATE: December 24, 1992

SUBJECT: Children & Youth Mental Health Advisory Committee Briefing, 1/5/93

Gary Nakao, Department of Social Services, provided a briefing on future directions in establishing a comprehensive planning system for children and youth services in Multnomah County. Consistent with this broad direction, is a need to identify planning processes within each Division and Department of our County involved in serving youth and children. One area which needs a specific planning and advisory body for children and youth is the Mental Health Program. We propose establishing a Children and Youth Mental Health Advisory Committee to be complimentary to the Mental and Emotional Disabilities Advisory Council which has largely been dealing with adult issues (MED Task Force Report Recommendations).

RESOLUTION

WHEREAS, Multnomah County is the major governmental entity equipped and empowered to deliver mental health services to children, adolescents, and family of Multnomah County; and

WHEREAS, providing mental health services is crucial to the well-being of the community; and

WHEREAS, the Office of Child and Adolescent Mental Health Services has operated without an advisory council to provide direction, support, and feedback.

Therefore be it resolved that: In order for the Office of Child and Adolescent Mental Health Services to adequately meet the community need, contact and communicate on a regular basis with representatives from the community, the advisory board shall be established.

Therefore be it resolved that: The Office of Child and Adolescent Mental Health Services shall convene a cross section representative of the community and children's mental health issue, to provide direction, planning and organizational input.

Therefore be it resolved that: In order to meet the need of the residents of Multnomah County, the Board of County Commissioners shall establish the Child and Adolescent Mental Health Advisory Council to provide community input on service development, delivery, and implementation.

Multnomah County

Children and Adolescent Mental Health Advisory Council

Purpose: The Office of Child and Adolescent Mental Health Services wishes to convene an advisory council for the following purposes:

(a) Charge

As the CAMHAC system's strategic planning body, this committee should address the long-term issues impacting the system.

Issues to address should include:

- (1) Development of a 5-year plan;
 - (2) Development of an updated annual plan based on the 5-year plan;
 - (3) Identification of changing needs of the target population;
 - (4) Development of mechanisms to evaluate County services;
 - (5) Evaluation of the ongoing need for the RFP;
 - (6) Evaluation of the overall service system;
 - (7) System responses to:
 - The Oregon Basic Health Plan;
 - Continued cuts due to Measure 5;
 - The need for coordinated protective services; and
 - The growing trend toward managed care.
- (b) To serve in an advisory/liason capacity for the CAMHAC programs, linking the Program Office with the community in two-way communication, to advocate and promote CAMHAC program activities in the community, and to seek advice from community members regarding general mental and emotional disabilities issues, specific concerns, and actions.
- (c) To represent the various viewpoints of clients, their families, and citizens in the community and to obtain technical assistance on specific matters from knowledgeable experts.
- (d) To provide a forum for mutual information sharing and advocacy by individuals and organizations representing a range of areas directly and professionally related to mental and emotional disabilities including pursuing such specific activities as:
- (1) To advise the director of the CAMHAC Program Office on current and potential policy issues, including federal, state and local developments;
 - (2) To review budget and program documents;
 - (3) To initiate ideas and suggestions, to monitor and to review preliminary evaluation efforts of programs and projects carried out by the CAMHAC Program Office; and
 - (4) To link by networking with organizations providing current and potential services and support to OCAMHS clients.

ARTICLE IV - MEMBERSHIP

IV - 1: MEMBERS. The CAMHAC shall be composed of twenty (20) members who are significantly involved in Multnomah County. The membership shall reflect the ethnic and cultural diversity of Multnomah county. The CAMHAC shall be composed as described below:

- (a) Representative from Children's Services Division - 1.
- (b) Community Children and Youth Services Commission - 1.
- (c) Parent/Consumers - 4.
- (d) Developmental Disabilities Council - 1.
- (e) Juvenile Justice Division - 1.
- (f) Mental and Emotional Disabilities Advisory Committee - 2.
- (g) Mental Health Advisory Committee - 2.
- (h) Mental Health Professional - 2.
- (i) Multnomah Council on Chemical Dependency - 1.
- (j) Child and Adolescent Mental Health Providers - 2.
- (k) Robert Wood Johnson Advisory Committee/School Districts - 2.
- (l) State Office of Child and Adolescent Mental Health Services/Child and Adolescent Services System Program - 1.

If and when a children's OCAMHS planning group is developed, a representative of this group should serve on the CAMHAC.

IV - 2: TERMS. Appointment to the CAMHAC will be for two-year terms. Members may be reappointed for a second two-year term. Terms will be staggered within each membership category. At the Annual Meeting, half of the positions will expire. Members will serve until their successors have been elected.

IV - 3: MEMBER ALTERNATIVES. CAMHAC members may appoint alternates who may act, with voting privileges, in the place of the member in his or her absence. All names of alternates must be designated by a phone call to the OCAMHS Program Office prior to the day of the CAMHAC meeting for which the alternate shall replace the member. The phone call will be followed by a letter of confirmation.

IV - 4: COMPENSATION. Members shall receive no compensation for serving on the CAMHAC.

IV - 5: RESIGNATION. A member may resign from the CAMHAC by submitting a written and signed resignation to the Chairperson of the CAMHAC. Whenever possible, the member's resignation should be submitted to the Chairperson at least thirty (30) days prior to the effective date of the resignation.

IV - 6: VACANCIES & ELECTIONS. Vacancies on the CAMHAC shall be filled from nominations submitted to the CAMHAC Executive Committee and approved by the full CAMHAC. New appointments shall serve for the remainder of the unexpired term by election by the remaining members of the CAMHAC.

Council positions for consumers, advocates, and citizens will be nominated by the CAMHAC Executive Committee before the CAMHAC and will serve upon approval of a voting quorum of the CAMHAC. CAMHAC positions for subcontract providers and public service representatives will be chosen by their respective agencies and be grouped by subcategories (e.g., hospital representative). Each subcategory of subcontractors will have a list supplied by the OCAMHS Program Office of who is part of the subcategory based on Multnomah County contract language. Members of each subcategory are free to collectively work out their own process for choosing representatives.

ARTICLE V - MEETINGS

V - 1: REGULAR MEETINGS. Regular meetings of the CAMHAC shall be held monthly at a mutually agreed upon time and place. For good cause and upon giving at least three days' notice to all members of the CAMHAC, the Chairperson may change the date, time, or place of a regular meeting.

V - 2: SPECIAL MEETINGS. For good cause and upon giving at least three days' notice to all members of the CAMHAC, any member of the CAMHAC may call a special meeting of the CAMHAC at any reasonable date, time, and place to consider any matter properly brought before the CAMHAC.

V - 3: ATTENDANCE. All regular and special meetings of the CAMHAC shall be open to the public as provided by law. Any CAMHAC member who misses three consecutive meetings of the CAMHAC without a reasonable excuse approved by the Chairperson shall be subject to removal by a majority vote of the Executive Committee. The individual member can appeal the decision to the entire CAMHAC.

V - 4: QUORUM AND VOTING. In order to vote, at least one member from each of the membership categories and at least half of the members of the group must be present. Any motion requiring a vote would pass by a majority of the quorum.

V - 5: CONDUCT OF MEETINGS. The current edition of Robert's Rules of Order shall govern the conduct of all regular and special meetings of the CAMHAC and its standing and/or special standing committees insofar as the Rules are not inconsistent with the provision of these bylaws.

V - 6: NOTICE. Notice of all public meetings of the CAMHAC will be provided as required by law.

V - 7: ANNUAL MEETING. The Annual Meeting of the CAMHAC will be held the second Tuesday in October of each year. Election for expired terms of the CAMHAC Executive Committee and CAMHAC members will be held at this time.

ARTICLES VI - OFFICERS

The officers of the CAMHAC shall be a Chairperson, Vice Chairperson/Chairperson-Elect, and a Secretary/Community Relations Liaison, to be elected from the members of the CAMHAC. These officers shall be members of the CAMHAC who were elected annually by the CAMHAC. They serve for a period of one (1) year, and until their respective successors shall qualify. A vacancy created during a regular term of office shall be filled by a special election by the CAMHAC. The Chairperson shall be the presiding officer at the CAMHAC meetings and shall be the primary liaison regarding matters of interest between CAMHAC members and the OCAMHS Program Office during the interim between meetings, and shall also be the liaison to the CAMHAC. In the absence of, or in the event of the disability of the Chairperson, the Vice-Chairperson shall perform all duties of the Chairperson.

ARTICLE VII - EXECUTIVE COMMITTEE

The CAMHAC shall have an Executive Committee composed of five members including the Chairperson, Vice-Chairperson, Secretary and two other CAMHAC members. The two other members of the Executive Committee will be selected as follows. In consultation with the Chairperson, the OCAMHS Program Office shall nominate representatives and present these nominations to the CAMHAC. Appointment is contingent on ratification by the majority of the CAMHAC.

The term of office shall be one year and members may be reappointed to additional terms. Members appointed to the Executive Committee may resign at any time by giving notice to the OCAMHS Program Office and may be removed with just cause by a majority of the CAMHAC members or at a requested review by the OCAMHS Program Office.

The Executive Committee shall meet at least once prior to regularly scheduled CAMHAC meetings and more frequently if necessary. Meetings may be convened at the request of the OCAMHS Program Office or any Executive Committee member.

ARTICLE VIII - PURPOSE OF THE EXECUTIVE COMMITTEE

The following shall be the purposes and functions of the Executive Committee:

- (a) Establish the agenda for CAMHAC meetings;
- (b) Conduct the business of the CAMHAC between CAMHAC meetings;
- (c) Act as a liaison between OCAMHS Program Office and CAMHAC members and other community members;
- (d) In consultation with the OCAMHS Program Office, assist in appointing subcommittee members and special Task Force members; and
- (e) Act as the Nominating Committee for the CAMHAC.

ARTICLE IX - OCAMHS PROGRAM OFFICE RESPONSIBILITIES

The OCAMHS Program Office will attend all CAMHAC and Executive Committee meetings; solicit representation for new CAMHAC members as required; bring relevant issues and/or questions to the attention of the CAMHAC; provide written minutes of all CAMHAC meetings to its members; and whenever possible, provide written materials to CAMHAC members prior to the full CAMHAC meeting.

ARTICLE X - COMMITTEES

The Chairperson may appoint such committees as are required for the adequate functioning of the organization. Such committees shall function during the term of office of the Chairperson who appointed them.

ARTICLE XI - CONFLICTS OF INTEREST

Any member of the CAMHAC who has special interest in any matter before the CAMHAC shall so inform the CAMHAC and refrain from voting on the matter. However, the interested member may participate in any discussion by the CAMHAC of such matter.

ARTICLE XII - CAMHAC ADVISORY COUNCIL ADDRESS

The mailing address of the CAMHAC shall be in the care of:

Multnomah County Department of Social Services
OCAMHS Program Office
426 SW Stark, 7th Floor
Portland, OR 97204

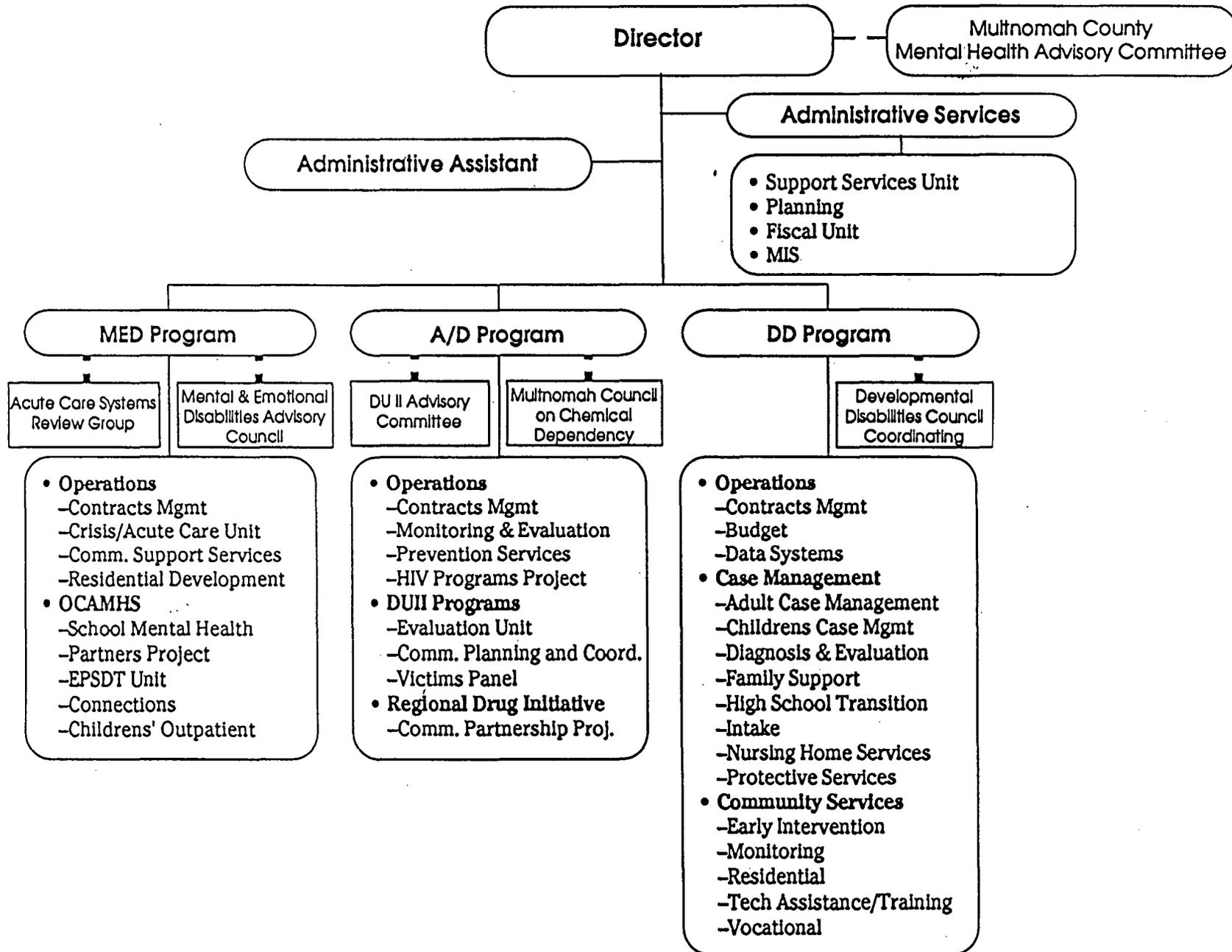
The telephone number is (503) 248-3691.

ARTICLE XIII - AMENDMENTS

These bylaws may be amended by an affirmative vote of two-thirds of the full CAMHAC membership. To be considered at a regular meeting, a full statement of each proposed amendment must be included in the written agenda for the regularly scheduled meeting.

Multnomah County Department of Social Services

Mental Health, Youth & Family Services Division





MULTNOMAH COUNTY OREGON

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MEMORANDUM

TO: Gladys McCoy, Multnomah County Chair
Commissioner Dan Saltzman
Commissioner Gary Hansen
Commissioner Tanya Collier
Commissioner Sharron Kelley

VIA: Dr. Gary Nakao, Director, Department of Social Services

FROM: Gary Smith, Director, Mental Health Youth and Family Services Division
James Edmondson, Program Manager, Office of Child and Adolescent Mental Health Services

DATE: January 4, 1993

SUBJECT: Child and Adolescent Mental Health Advisory Committee

ISSUE

The Office of Child and Adolescent Mental Health Services (OCAMHS) was officially formed in 1990 and has operated without the benefit and support of an advisory committee ever since. All other program offices in the Mental Health, Youth and Family Services Division (MHYFSD) have an advisory committee that provides valuable assistance to their operations. The area of child and adolescent mental health is one of the fastest expanding and most challenging of all of our services. It is vital that County government have the benefit of input from a broad constituency.

BACKGROUND

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GWS/mas

[6009B]



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VIA: Dr. Gary Nakao, Director, Department of Social Services

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GWS/mas

[6009B]

Meeting Date: JAN 07 1993

Agenda No.: B-1

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SUBJECT: Child and Adolescent Mental Health Advisory Committee

BCC Informal January 5, 1993 BCC Formal _____
(date) (date)

DEPARTMENT Social Services DIVISION Mental Health, Youth & Family Services

CONTACT Gary Nakao TELEPHONE 248-3782

PERSON(S) MAKING PRESENTATION Gary Nakao, James Edmondson and Gary Smith

ACTION REQUESTED:

INFORMATIONAL ONLY POLICY DIRECTION APPROVAL

ESTIMATED TIME NEEDED ON BOARD AGENDA: 30 Minutes

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BRIEF SUMMARY (include statement of rationale for action requested, as well as personnel and fiscal/budgetary impacts, if applicable):

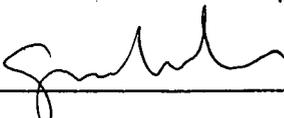
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Commissioner Gary Hansen
Commissioner Tanya Collier
Commissioner Sharron Kelley

VIA: Dr. Gary Nakao, Director, Department of Social Services

FROM: Gary Smith, Director, Mental Health Youth and Family Services Division
James Edmondson, Program Manager, Office of Child and Adolescent Mental Health Services

DATE: January 4, 1993

SUBJECT: Child and Adolescent Mental Health Advisory Committee

ISSUE

The Office of Child and Adolescent Mental Health Services (OCAMHS) was officially formed in 1990 and has operated without the benefit and support of an advisory committee ever since. All other program offices in the Mental Health, Youth and Family Services Division (MHYFSD) have an advisory committee that provides valuable assistance to their operations. The area of child and adolescent mental health is one of the fastest expanding and most challenging of all of our services. It is vital that County government have the benefit of input from a broad constituency.

BACKGROUND

In 1991, OCAMHS convened the Child and Adolescent Mental Health Planning Group in order to develop a comprehensive plan for mental health services to Multnomah County children and adolescents with mental and emotional disabilities. This plan was invaluable in helping to prepare a subsequent RFP for all County contracted child and adolescent mental health services. One of the recommendations of the Planning Group was to form a standing child and adolescent mental health advisory group. This same recommendation had been made by the Children's Work Group, consumers, service providers, and advocates. The Multnomah County Mental Health Advisory Committee has also endorsed the formation of this new committee and advised the MHYFSD to proceed with the necessary steps.

DISCUSSION

In order to more effectively meet the needs of the children and families of Multnomah County, contact and communication on a regular basis with a cross section of representatives of the community on children's mental health issues is imperative. The representatives will provide direction, planning, and organizational input. Categories of membership will be the same as those within the former Child and Adolescent Mental Health Planning Group. In fact, several of the same members will serve on the new advisory committee, providing continuity to the planning process.

RECOMMENDATION

It is recommended that the MHYFSD establish the Child and Adolescent Mental Health Advisory Committee to provide guidance to the OCAMHS. The new committee will be affiliated with the Mental Health Advisory Committee and will have two representatives as voting members on the Mental Health Advisory Committee.

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