

BEFORE THE BOARD OF COUNTY COMMISSIONERS  
FOR MULTNOMAH COUNTY, OREGON

**RESOLUTION NO. 00-194**

Providing Policy Direction for a Restructured Mental Health System that meets the Vision Statement Adopted by the Board of County Commissioners on September 28, 2000

**The Multnomah County Board of Commissioners Finds:**

- a. On March 30, 2000, the Multnomah County Mental Health Task Force, appointed by the Board of County Commissioners, issued a report identifying significant problems with the County's mental health system and making recommendations for an overhaul of the system.
- b. In response to the Task Force's report, on May 4, 2000 the Board of County Commissioners passed Resolution 00-063 creating a Mental Health Design Team "to work with county, state, and community personnel to develop short and long term action plans to improve County mental health services."
- c. On September 28, 2000, the Board of County Commissioners passed Resolution 00-161 adopting a vision statement for a consumer and family-centered mental health system based on the recommendations of the Design Team. This vision statement emphasizes rehabilitation and recovery for adult consumers and a system of care for consumers who are children.
- d. Through the Design Team, numerous stakeholders have worked to develop plans, priorities and options for restructuring the public mental health system in Multnomah County. The Board of County Commissioners expresses its deep appreciation to members of the Mental Health Design Team, including all of the work groups for their tremendous dedication and hard work.
- e. Hundreds of dedicated staff members have worked hard, in spite of many obstacles, to provide high quality services to people with mental illness. At the same time, funding shortfalls and other system problems have created substantial problems with services.

- f. The State of Oregon committed up to \$1.5 million to Multnomah County for emergency improvements to finance planning for decisive systems change and to increase access to the mental health system. The Board of County Commissioners approved an additional \$800,000 in funding for those services.
- g. The Department of Community and Family Services has made substantial changes in the last 18 months to improve services including the following: hiring mental health consumers to staff new high priority services; increasing the involvement of families of children with mental illness; expanding housing support services which have made additional housing available; stabilizing Crisis Triage Center services; and implementing intensive case management services.
- h. Despite these improvements, there is an urgent need to reconfigure the public mental health system in order to increase and improve services and conform to the vision adopted by the County.

**The Multnomah County Board of Commissioners Resolves:**

1. The Department of Community and Family services will immediately begin work to transform the County's existing mental health organization to provide a consumer and family-centered mental health system for Multnomah County. The redesigned mental health organization will meet the urgent community need for expanded and improved services.
2. In order to maximize coordination and participation by consumers, family members, mental health professionals and other vital stakeholders, the Board of County Commissioners will create the Multnomah County Mental Health Coordinating Council to oversee the implementation of this transformation.
3. Multnomah County will begin discussions with CareOregon regarding the conditions required to have CareOregon become the mental health organization for the County.
4. The decision to contract with CareOregon as the mental health organization for the County will be based on the performance of the redesigned mental health organization and on CareOregon's interest and capacity to assume the contract.

5. Multnomah County will work with the State of Oregon to take the steps necessary to consolidate the full range of state mental health funding as soon as possible so that it flows to a single mental health organization in Multnomah County as described in this resolution.
6. Multnomah County will utilize the tools of continuous quality improvement, as embodied in the RESULTS initiative, to overcome inflexible regulations, complex government requirements and additional barriers faced by other jurisdictions in their efforts to implement county-run mental health organizations.
7. The redesigned mental health organization will:
  - manage risk in such a way as to provide incentives that reward the attainment of positive outcomes, including reduced hospital stays, coordinated care, and other goals consistent with the vision adopted by the County;
  - develop an integrated management information system that will allow it to effectively manage risk and utilization;
  - reduce existing layers of administrative overhead and expense by contracting directly with entities providing services and minimize the use of financial intermediaries, such as mental health networks;
  - work with provider organizations to reduce hospitalizations, develop an integrated provider network that will improve coordination of care, reduce administrative expenses, increase access to care, promote sharing of information technology and increase capacity for risk bearing or risk sharing;
  - fully integrate the Crisis Triage Center into a unified system of care and assure that crisis response and stabilization services are responsive, timely and cost effective;
  - reduce hospital utilization by implementing a range of mid-level services including housing, intensive case management and respite beds;
  - work to improve the integration of mental health services with physical health and alcohol and drug services.
8. The Director of the Department of Support Services, in coordination with the redesigned mental health organization, will present a report to the Board of County Commissioners regarding options for Multnomah County to bear the

risk related to the operation of a mental health organization, including estimates of the cost of reinsurance. The risk options report will be presented to the Board and the Mental Health Coordinating Council no later than February 2001.

9. The Director of the Department of Support Services will present to the Board no later than February 1, 2001 baseline mental health consumer satisfaction and performance measurement data that has been gathered by the State of Oregon Office of Mental Health Services. The report will include recommendations as to additional data that may be necessary for effective management of the local mental health system.
10. Pursuant to the recommendation of the Supported Housing Workgroup of the Mental Health Design Team, the Board of County Commissioners, with assistance from the Department of Environmental Services, will convene a meeting of key decision makers before April 1, 2001 in order to develop specific strategies for increasing the supply of special needs housing in Multnomah County.
11. The Board of County Commissioners will continue to direct resources to the Children's Mental Health Partnership and the Early Childhood Mental Health Partnership and will encourage other partners to continue and expand their support.
12. The Public Affairs Office will include in the County's legislative agenda increased mental health funding as a key Multnomah County priority request to the Oregon State Legislature and will work with the Association of Oregon Counties, the Governor's Office and other stakeholders to secure legislative support.
13. In the 2001-2002 budget for the mental health system, the County Chair will propose using savings from reduced administrative costs and lower hospital utilization for programs such as increased intensive case management services by the county, an ombudsprogram, increased access to supported housing and other recommendations contained in the report by the Technical Assistance Collaborative.
14. Working within its established guidelines, the Living Wage Review Board will give high priority to the review of contracts for mental health services

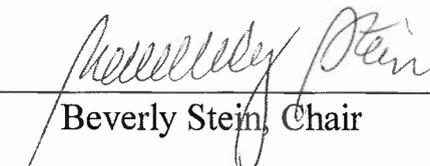
and will provide available information to the Mental Health Coordinating Council regarding wages and benefits of employees of non-profit mental health organizations under contract to the County.

15. In order to maintain communication and reduce confusion during the transition to a new mental health system, the Department of Community and Family Services will develop a plan to communicate with consumers about changes and will establish a single telephone number to call for information with staff to provide answers to questions from consumers and the public.

ADOPTED this 7th day of December, 2000.

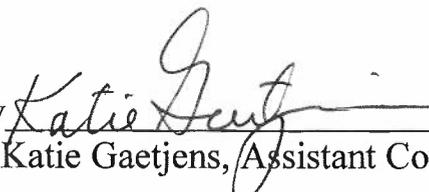


BOARD OF COUNTY COMMISSIONERS  
FOR MULTNOMAH COUNTY, OREGON

  
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Beverly Stein, Chair

REVIEWED:

THOMAS SPONSLER, COUNTY ATTORNEY  
FOR MULTNOMAH COUNTY, OREGON

By   
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Katie Gaetjens, Assistant County Attorney