

**Minutes of the Board of Commissioners
Multnomah Building, Board Room 100
501 SE Hawthorne Blvd., Portland, Oregon
Thursday, March 20, 2014**

REGULAR MEETING

Acting Chair Marissa Madrigal convened the meeting at 9:37 a.m. with Vice-Chair Diane McKeel and Commissioners Liesl Wendt, Loretta Smith and Judy Shiprack present.

Also attending were Jenny M. Madkour, County Attorney, and Marina Baker, Assistant Board Clerk.

Chair Madrigal: GOOD MORNING. WELCOME TO TODAY'S REGULARLY SCHEDULED BOARD MEETING.

CONSENT AGENDA

- C.1 Extension of the Intergovernmental Agreement (IGA) with the Oregon Department of Transportation for the 223rd Ave Railroad Undercrossing
- C.2 Transfer of Unclaimed Property in the Amount of \$13,607.06 to the County General Fund
- C.3 NOTICE OF INTENT to Submit an Application for up to \$50,000 to Social Venture Partners Portland

Chair Madrigal: COMMISSIONER SMITH, I BELIEVE YOU HAVE AN ITEM THAT YOU WOULD LIKE TO REMOVE FROM THE CONSENT AGENDA?

Commissioner Smith: YES, I WOULD LIKE TO MAKE A MOTION TO MOVE ITEM C-3 TO NEXT WEEK'S REGULAR AGENDA.

Commissioner Shiprack: SECOND.

Chair Madrigal: COMMISSIONER SMITH MOVES TO MOVE CONSENT ITEM C-3 FROM THE CONSENT AGENDA TO NEXT WEEK'S REGULAR AGENDA. SECONDED BY COMMISSIONER SHIPRACK. ANY DISCUSSION OR QUESTIONS? OKAY. ALL IN FAVOR VOTE AYE.

[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? C-3 MOVED TO THE REGULAR AGENDA NEXT WEEK. MAY I HAVE A MOTION ON THE REGULAR CONSENT CALENDAR?

Commissioner Smith: SO MOVED.

Commissioner Wendt: SECOND.

Chair Madrigal: COMMISSIONER SMITH MOVES AND COMMISSIONER WENDT SECONDS APPROVAL OF THE CONSENT CALENDAR. ALL IN FAVOR VOTE AYE.
[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? THE CONSENT CALENDAR IS APPROVED.

PUBLIC COMMENT

Opportunity for Public Comment on non-agenda matters. Testimony limited to three minutes per person unless otherwise designated by the presiding officer. This is a time for the Board to hear public testimony, not for Board deliberation.

Board Clerk: MADAM CHAIR. WE HAVE FOUR PEOPLE SIGNED UP. PLEASE COME UP WHEN I CALL YOUR NAME. PAUL ADOLPH PHILLIPS, JOE WALSH, PETER WATTS AND CHARLES JOHNSON.

Mr. Phillips: YES, I'M PAUL PHILLIPS, AND I SPOKE HERE MARCH 13th, WAS THE LAST TIME, AND I WANT TO CORRECT MYSELF, LAST WEEK I WAS STATING THAT THERE WAS 353,000 HIP SURGERIES A YEAR, WITH THE POPULATION OF THE UNITED STATES BEING 300 MILLION, THAT WOULD ACTUALLY FIGURE OUT TO ONE IN 850, NOT 900. AND THAT'S EVERY YEAR THAT THOSE OPERATIONS OCCUR FOR THE POPULATION. AND THEY'RE PREDICTING, I BELIEVE, WHAT THE PAPERS THAT I SUBMITTED FROM THE CDC, THAT IT WAS 2018, OR 2030 THAT THERE WAS GOING TO BE SOME 500,000 HIP SURGERIES A YEAR. THAT WOULD PUT IT AT ONE IN 600 AT THE POPULATION -- IF THE POPULATION HOLDS CONSTANT. THAT'S A LOT BETTER ODDS THAN WHAT THE OREGON LOTTERY IS OR ANY LOTTERY. WITH THIS, THE SAME SUBJECT THIS WEEK, ERIK HOLDER WAS REPORTED IN THE NEWS BEING TAKEN TO A HOSPITAL WHERE HE WAS LIGHT-HEADED AND THERE WASN'T ANYTHING WRONG WITH HIM. HE'S THE UNITED STATES ATTORNEY GENERAL FOR THE DEPARTMENT OF JUSTICE. AND I DON'T THINK THAT ERIC HOLDER IS THE ONLY LIGHT-HEADED PERSON. HAVING SEVEN DOG ATTACKS ON MY SERVICE ANIMAL BY THE SAME DOG, I THINK THAT SOMEBODY WOULD HAVE TO BE CONFUSED OR IMPAIRED WITH THE COMMENTS THAT I HAVE STATED HERE, SUCH AS ASKING CHUCK, THE ANIMAL CONTROL SUPERVISOR, I ASKED HIM WHAT THE RECORD FOR THE NUMBER OF DOG ATTACKS WAS, AND HE SAID THAT HE DIDN'T KNOW, BUT IT DID SEEM LIKE A HIGH RIGHT OF INCIDENCES. THAT WAS AFTER THE 5th ATTACK, AND THEN I REPORTED THE 6th ATTACK. AND OF COURSE THE 7th ATTACK I COULDN'T REPORT IT BECAUSE I WAS HAVING HIP SURGERY AND DEALING WITH TWO FRACTURES TO MY SPINAL CORD INJURY, WHICH I'M STILL DEALING WITH. FOR CONSUMERS REPORTS, AS I REPORTED LAST WEEK, THEY SAID THAT THAT WAS A -- AN ELECTED SURGERY. HIP SURGERY IS, AND IT WASN'T ELECTIVE FOR ME AT ALL. IT WAS MANDATORY. OTHERWISE I WOULD HAVE HAD A WORSE INFECTION AND, OF COURSE, BEEN CRIPPLED WITH MY HIP BEING FRACTURED AND THE TWO SPINAL CORD INJURIES, I HAD QUITE A TROUBLE WITH THROWING UP AFTER MY SURGERY.

Chair Madrigal: THANK YOU, MR. PHILLIPS.

Mr. Phillips: IS MY TIME UP?

Chair Madrigal: GO AHEAD AND FINISH YOUR THOUGHT.

Mr. Phillips: AFTER MY SURGERY, THEY EXPLAINED TO ME THAT IN THE RECOVERY AREA THAT TWO PHYSICAL THERAPISTS WANTED TO GET ME TO MOVING. THEY SAT ME UP THE FIRST DAY AND -- ON THE BED. THEY PICKED ME UP AFTER AWHILE AND I THREW UP AND THEY GO WELL THAT'S GOOD. AND THEY PUT ME BACK IN BED. THE SECOND DAY, THE SAME PROCESS. SET ME ON THE BED AND STOOD ME UP AND I THREW UP AND SET ME BACK IN THE BED. THIRD DAY, SAME PROCESS, SAT ME ON THE BED, STOOD ME UP, I THREW UP. PUT ME BACK IN BED. THEY DIDN'T SAY THAT WAS GOOD. THAT WAS THE END OF THE PHYSICAL THERAPY.

Chair Madrigal: THANK YOU, MR. PHILLIPS.

Mr. Walsh: MY NAME IS JOE WALSH. I REPRESENT INDIVIDUALS FOR JUSTICE. SEVERAL MONTHS AGO, I CAME BEFORE YOU AND TALKED TO YOU ABOUT THE DROP-IN CENTERS THAT THE FEDERAL JUDGE THAT WE'RE ALL BEING CALLED BACK ON MONDAY WILL BEGIN HIS DECISION-MAKING PROCESS. THE FOUR PRINCIPALS HAVE REFUSED TO AMEND THE AGREEMENT BETWEEN THE CITY AND THE DEPARTMENT OF JUSTICE. BUT THERE IS AN ITEM THAT'S IN YOUR REIGN OF AUTHORITY, AND THAT'S THE DROP-IN CENTERS. HERE IS HOW IT SHOULD WORK. A POLICE OFFICER CONFRONTS SOMEBODY WITH MENTAL ILLNESS, AND THEY TAKE HIM TO A PLACE THAT IS READY AND WILLING AND CAPABLE OF DEALING WITH MENTAL ILLNESS. THAT'S THE WAY IT SHOULD WORK. THE WAY IT WORKS NOW, HE GOES TO JAIL. AND YOU'VE SEEN SOME OF THE STATISTICS AND YOU HEAR THE SHERIFF TODAY, WHICH IS JUST A COINCIDENCE, ASKING FOR OVERTIME. THE REASON THEY NEED OVERTIME IS YOU HAVE 40% OF THE PEOPLE IN YOUR JAILS HAVE MENTAL ILLNESS, BUT WE HAVE NO DROP-OFF CENTERS. AND HE IS GOING TO ASK FOR \$748,000 FOR OVERTIME BECAUSE THE OVERTIME IS TO WATCH THE PEOPLE IN THE JAIL WHO MAY COMMIT SUICIDE WHO HAVE MENTAL ILLNESSES. I HOPE YOU SEE THE CONNECTION. IT'S SO SIMPLE TO ME. WHETHER THE CITY IS STOPPING THIS OR YOU'RE STOPPING THIS, OR THE STATE IS STOPPING THIS, SOMEBODY IS GUILTY OF NEGLIGENCE HERE. I DON'T CARE WHO IT IS. I JUST WANT THESE DROP-IN CENTERS. YOU HAVE TO DO THAT. THIS FEDERAL JUDGE'S LIMITATIONS CAN ORDER YOU TO DO IT. YOU HAVE TO HAVE THE WILL TO DO IT. AND YOU HAVE TO HAVE THE WILL TO SAY TO THE CITY, HEY, MAN, THIS HAS TO HAPPEN. WE CANNOT SHOOT PEOPLE ANYMORE. CHASSE, OTIS, CAMPBELL -- THEY WERE SHOT BECAUSE THEY HAD MENTAL ILLNESSES AND YOU HAVE AN OPPORTUNITY. GET ON THE PHONE. HEY, MR. MAYOR, WHAT THE HELL IS THE MATTER WITH YOU? PLEASE, THANK YOU.

Chair Madrigal: THANK YOU.

Mr. Watts: MY NAME IS PETER WATTS, CO-COUNCIL INVOLVED IN THE VOTING EFFORTS ON A THEORETICAL CONVENTION CENTER HOTEL. WE WERE HAPPY TO FIND OUT THAT THE COURT OF APPEALS, IF WE PREVAIL -- TO ORDER THE ELECTIONS DIVISION TO ACCEPT OUR PETITION TO SIGNATURES -- WE HAVE TRIED

MULTIPLE TIMES TO TURN IN AND HAVE BEEN UNABLE TO DO SO. COUNT THOSE SIGNATURES AS WELL AS TAKE ANY OTHER STEP NECESSARY TO PUT THE REFERENDUM ON THE BALLOT. EARLIER IN THE WEEK, TOM HUGHES SAID IN AN ARTICLE IN THE OREGONIAN THAT WE WERE ENGAGED IN DELAY TACTIC AND REFERRED TO US AS A SMALL AND LOCAL MINORITY. I THOUGHT IT WOULD BE APPROPRIATE TO BRING -- TO SEND YOU EVIDENCE OF THAT GROUP OF PEOPLE, VIA EMAIL YESTERDAY, BUT ALSO BRING -- SO YOU COULD SEE VISUALLY WHAT THE -- THE SIGNATURES OF 20,000 MULTNOMAH COUNTY RESIDENTS LOOK LIKE. THESE ARE PEOPLE THAT WOULD VERY MUCH LIKE TO VOTE ON THIS ISSUE. AND AS TO -- AS TO THE STATEMENT ABOUT A DELAY TACTIC, WE WOULD LIKE TO BE ON THE BALLOT AS SOON AS PRACTICALLY POSSIBLE AND WILLING TO WORK WITH YOUR ELECTIONS DIVISION TO MAKE THAT HAPPEN ON AN EXPEDITED BASIS AND THAT WOULD END ALL DELAYS. SO, THANK YOU VERY MUCH FOR YOUR TIME.

Chair Madrigal: THANK YOU.

Mr. Johnson: GOOD MORNING, COMMISSIONERS. GOOD TO BE BACK WITH YOU. MY NAME IS CHARLES JOHNSON, AND ALTHOUGH I AM CONCERNED ABOUT THE OVERTIME NEEDS OF THE SHERIFF DEPARTMENT, THAT IS NOT WHAT I'M GOING TO SPEAK ON. AS WE COME IN, WE PASS SOMETHING ALONG THE LINES OF COMMUNITY INVOLVEMENT, AND IT NOTES THAT OUR GOOD NEIGHBORS HAVE VOLUNTEERED SOMETHING SOMEWHAT EQUIVALENT TO \$3 MILLION WORTH OF VOLUNTEER SERVICES. BUT I HOPE WHEN PEOPLE SEE THAT NUMBER, THAT THEY WILL THINK ABOUT THAT LITTLE PHRASE THAT STARTED PROBABLY BACK IN THE '60s OR '70s, THAT IT WILL BE A GREAT DAY WHEN THE AIR FORCE HAS TO HAVE BAKE SALES TO BUILD BOMBERS AND SCHOOLS ARE FULLY FUNDED. AND I JUST WANT TO ENCOURAGE YOU TO REDEDICATE YOURSELVES TO WORKING FOR GOOD LIVING WAGE JOBS AND BUILDING A COMMUNITY WHERE PEOPLE WHO ARE DOING WORK THAT IS ACTUALLY PROBABLY MORE IMPORTANT THAN WELDING PARTS FOR BOMBERS AND BUILDING FOSSIL FUEL -- WHERE PEOPLE ARE DOING HUMAN SERVICES WORK AND TEACHING. I WANT TO ENCOURAGE YOU LADIES TO CONTINUE YOUR VERY HARD WORK TO MAKE SURE THAT IN PORTLAND, WE'RE A LEADER WHERE PEOPLE CAN GET GOOD HUMAN SERVICES JOBS AND NOT RELY ON THE WAR MACHINE OR THE FOSSIL FUEL EXTRACTION MACHINE THAT IS POISONING OUR ENVIRONMENT. I THANK YOU FOR WHAT YOU HAVE DONE. IF YOU CAN FIND IT IN YOURSELVES TO DO MORE, THAT'S GREAT, TOO.

Chair Madrigal: THANK YOU.

REGULAR AGENDA

R.1 BUDGET MODIFICATION # MCSO-04 Requesting General Fund Contingency Transfer in the amount of \$748,014 for Third Quarter Overtime Costs as Specified in the FY 2014 Budget Note on Sheriff's Office Overtime. Presenters: Chief Deputy Drew Brosh & Chief Deputy Linda Yankee.

Chair Madrigal: MAY I HAVE A MOTION?

Vice-Chair McKeel: SO MOVED.

Commissioner Wendt: SECOND.

Chair Madrigal: COMMISSIONER McKEEL MOVES, COMMISSIONER WENDT SECONDS, APPROVAL OF R-1. GOOD MORNING.

Chief Deputy Brosh: GOOD MORNING. I'M CHIEF DEPUTY DREW BROSH, JOINED BY CHIEF DEPUTY LINDA YANKEE. WE'RE HERE TO REQUEST APPROVAL OF \$748,014 IN GENERAL FUND CONTINGENCY FOR THE THIRD QUARTER OVERTIME COST OUTLINED IN THE 2014 BUDGET NOTE ON THE SHERIFF OFFICE OVERTIME. THAT BUDGET NOTE CONTAINS A NUMBER OF REQUESTS FOR INFORMATION FOR WHICH WE HAVE PREPARED A -- SOME SLIDES FOR THAT.

Commissioner Shiprack: CAN I ASK A QUESTION? I THOUGHT THAT THE SHERIFF WAS GOING TO BE HERE THIS MORNING. WE LOVE TO SEE YOU, DREW, AND LINDA. BUT I'M CONCERNED THAT THE SHERIFF IS NOT HERE.

Chief Deputy Brosh: OKAY. I CAN CONVEY THAT. ORIGINALLY BELIEVE THAT WE WERE DOING THIS A WEEK PREVIOUS. AND IT GOT MOVED TO THIS WEEK. SO, CURRENT VACANCIES IN THE SHERIFF OFFICE OVERALL, SECOND QUARTER, WE HAVE 37 VACANCIES IN THE CORRECTIONS DIVISION, 9.5 IN THE ENFORCEMENT. UNDER BUSINESS SERVICES, I NOTICE IN THE SECOND QUARTER BOX IT SAYS THREE. ACTUALLY THAT SHOULD BE NINE, BECAUSE WE -- WE FAILED TO COUNT SIX OF OUR TECHNICIAN VACANCIES AND NONE OF THE EXECUTIVE OFFICE. OVERALL VACANCIES SHOULD BE WHAT 54.5. OBVIOUSLY THE FOCUS -- IF YOU WANT TO GO TO THE NEXT SLIDE -- FOR US IS IN THE CORRECTIONS DIVISION. A LARGE NUMBER OF THE VACANCIES WE HAVE ARE IN THE CORRECTIONS DEPUTY JOB CLASSIFICATION. THOSE VACANCIES ARE PART OF WHAT DRIVES OVERTIME, BECAUSE WE BUILD OUR PROGRAMS BASED ON TOTAL NUMBERS OF STAFF. AT THE TIME AT THE END OF THE SECOND QUARTER, WHICH WAS IN DECEMBER, END OF DECEMBER, THE CORRECTIONS VACANCIES WERE 26. WE ACTUALLY HAVE HIRED SINCE THEN AND OUR CURRENT VACANCIES ARE SITTING AT 20. ADDITIONALLY, WE HAVE ASKED FOR IN THIS BUDGET CYCLE AN ADDITIONAL TWO BACKGROUNDERS TO BEGIN TO GAIN SOME MORE GROUND ON THOSE VACANCIES. WE HAVE BEEN ABLE TO BALANCE WITH NUMBER OF RETIREMENTS AND SEPARATIONS WE HAVE HAD WITH THE RESOURCES THAT WE HAVE AND WE THINK ADDING THOSE RESOURCES WILL HELP US TO NOT ONLY ADDRESS THE RETIREMENTS COMING, BUT TO, YOU KNOW, GET UP TO A LEVEL WHERE WE'RE NOT -- WE'RE NOT USING SO MUCH OF OUR OVERTIME ON THOSE VACANCIES. IF WE CAN GO BACK FOR A SECOND. ONE OTHER THING, A BIT OF GOOD NEWS, IS THAT YOU WILL SEE SEPARATIONS, AND THAT SEPARATIONS FROM THE JOB CLASS. SOMETIMES WE TAKE PEOPLE IN THE JOB CLASS LIKE CORRECTIONS DEPUTY AND PROMOTE THEM TO SERGEANT OR SUPERVISOR, AND FOR US, THAT IS GOOD FOR US IN TERMS OF PLANNING, AND THAT IS A -- THAT STILL LEAVES A HOLE IN THE CORRECTIONS DEPUTY JOB CLASS. NEXT SLIDE. THIS NEXT CHART SHOWS OVERTIME HOURS. ONE THING I WOULD POINT OUT OVER THE LAST QUARTER, SICK LEAVE HOURS DOWN ALMOST 1,000 HOURS. ALSO HERE IN REGARDS TO LEAVE, THIS IS WHEN THANKSGIVING AND CHRISTMAS TAKE PLACE AND CONTRACTUALLY, SO THEN

FOLKS ON DUTY DURING THE ACTUAL DAY OF THANKSGIVING, CHRISTMAS, RECEIVE OVERTIME FOR THAT. NEXT SLIDE. THIS WAS A REQUEST WHEN I PRESENTED TO THE BOARD STAFF, THEY REQUESTED THAT WE LOOK AT LAST YEAR AT THIS TIME AND THIS YEAR AT THIS TIME, IN TERMS OF OVERALL HOURS WORKED. I HAD REPORTED TO THE BOARD STAFF THIS WEEK THAT THE MONEY BETWEEN LAST YEAR AND THIS YEAR IN TERMS OF OVERTIME WAS ABOUT EVEN, BUT WHEN WE DRILL DOWN INTO THIS FARTHER, WE DISCOVERED BECAUSE OF THE COLA INCREASES, ACTUALLY OUR OVERALL OVERTIME HOURS WERE DOWN BY 555 BETWEEN NOW AND THIS TIME LAST YEAR. SO THAT WAS PROGRESS AND THAT WAS GOOD. SOMETIMES WHEN YOU LOOK AT THE DOLLARS AND YOU DON'T FACTOR THE COLA IN YEAR TO YEAR TO YEAR, THESE HOURS REPORTS ARE REALLY USEFUL FOR THAT. IT WAS, HOWEVER, LARGELY THE REDUCTIONS WERE IN THE -- IN ENFORCEMENT DIVISION AND IN THE CORRECTIONS DIVISION IN AREAS OTHER THAN SUICIDE WATCH.

Chair Madrigal: WAS THERE ANYTHING SPECIAL HAPPENING IN ENFORCEMENT TO EXPLAIN THAT OR JUST --

Chief Deputy Brosh: YES, WE HAVE ACTUALLY HAD SOME MONTHLY OVERTIME FISCAL REPORTING, VERY SPECIFIC FROM THE PLANNING AND RESEARCH UNIT. BOTH CHIEF GATES AND THE ENFORCEMENT DIVISION, SHULTS -- HAVE REQUESTED THE REPORTS. WE BELIEVE THIS DATA IS HELPING US REDUCE OVERTIME IN SEVERAL AREAS WHILE WE'RE STILL, YOU KNOW, WORKING WITH THE INCREASES WE'RE SEEING IN SUICIDE WATCH.

Chair Madrigal: GREAT.

Chief Deputy Brosh: THESE ARE THE WORKLOAD RELATED HOURS CONTRIBUTING TO THE OVERTIME THAT WE OPERATE. SUICIDE WATCH OBVIOUSLY A BIG LEADER AND WAS UP SOME FROM THE LAST QUARTER, AS WAS MEDICAL TRANSPORT AND HOSPITAL WATCH. OTHER AREAS WERE DOWN TO A SMALL DEGREE, BUT THOSE ARE THE SORT OF SMALLER AREAS. NEXT SLIDE.

Commissioner Wendt: CHAIR, I HAVE A QUESTION.

Chair Madrigal: COMMISSIONER WENDT.

Commissioner Wendt: COULD YOU GO BACK TO THAT SLIDE, DREW. ON THOSE SUICIDE WATCH HOURS, A HUGE CONTRIBUTOR TO OVERTIME. NEXT BUDGET -- WHAT OTHER PROGRAMMATIC ISSUES OR IDEAS ARE YOU LOOKING AT AROUND ADDRESSING SUICIDE WATCH AND THE MENTAL HEALTH ISSUES WITHIN THE JAIL?

Chief Deputy Brosh: OKAY. THERE IS A SECTION AS PART OF THE REPORTING THAT IS SPECIFIC TO THE SUICIDE WATCH AND I CAN GO AHEAD AND ADDRESS THAT NOW, IF YOU WOULD LIKE. AS YOU MENTIONED, WE'RE LOOKING AT HOW THE JAIL IS CONFIGURED AND LOOKING AT FACILITIES TO SEE IF THERE IS A WAY TO CONSTRUCT WITHIN THE CURRENT EXISTING BUILDING IN MDCDC THAT WOULD ALLOW US TO HAVE MORE INMATES ON SUICIDE WATCH GATHER IN A COMMON AREA, THAT WOULD MAKE THAT LESS STAFF INTENSIVE AND THAT'S WHERE THE

HOURS ARE DRIVEN FROM. WE'VE ALSO GOT THE PROGRAM OFFERS SPECIFIC TO THE CURRENT CONSTRUCTION OF OUR JAIL THAT WOULD HELP REDUCE THE RISK OF SUICIDE IN INDIVIDUAL CELLS AND COMMON AREAS IN THE JAIL. BEYOND THAT, WE ARE ALSO LOOKING AT IN OTHER AREAS, WORKING WITH THE HEALTH DEPARTMENT. THE CHAIR CONVENED A PUBLIC SAFETY BUDGET MEETING WITH ALL OF THE PUBLIC SAFETY PARTNERS, AND WE REALLY SPENT SOME TIME TALKING ABOUT THIS ISSUE SPECIFICALLY, WHERE IT INTERFACES WITH THE LARGER PUBLIC SAFETY SYSTEM, FOLKS WHO IS BEING BROUGHT INTO JAIL INITIALLY. ARE THERE ALTERNATIVES? ABILITY TO TAKE SOMEBODY IN A CRISIS AND DEAL WITH THEM WITH A CITATION OR DEAL WITH THEM TO A, SOMEWHERE THEY COULD GO OTHER THAN JAIL TO HELP TO LOWER THAT. I KNOW THAT THE SHERIFF IS ALSO PLANNING ON MEETING WITH THE DEPARTMENT OF COMMUNITY JUSTICE DIRECTOR SCOTT TAYLOR WITH REGARD TO THE SANCTION POPULATION, WHERE WE HAVE THE ABILITY TO PERHAPS FIND ALTERNATIVES TO SANCTIONING SOME FOLKS WITH MENTAL HEALTH ISSUES AND HELP TO FURTHER IMPACT THAT NUMBER. SOME OF THOSE ARE CONVERSATIONS THAT ARE ONGOING, AND SOME ARE NEWER CONVERSATIONS THAT I THINK HAVE REAL TRACTION.

Chair Madrigal: COMMISSIONER SMITH.

Commissioner Smith: WHEN YOU TALK ABOUT PUTTING ALL OF THESE FOLKS IN THE SUICIDE WATCH IN A COMMON AREA, DO YOU MEAN IN A COMMON DORM WHERE THEY WOULD BE OUT SLEEPING NEXT TO EACH OTHER, NOT IN INDIVIDUAL CELLS?

Chief Deputy Brosh: I THINK THERE IS A COUPLE OF MODELS. VEGAS METRO -- HAVING INDIVIDUAL CELLS IN A COMMON AREA ALLOWS ONE OFFICER TO WATCH SEVERAL. WHEN WE HAVE PEOPLE SCATTERED THROUGHOUT THE BUILDING, WE TRY NOT TO DO THAT JUST -- BECAUSE THE PERSON -- THE PERSON MAY BE SICK, THEY MAY BE INFIRM. MAY HAVE TO BE IN AN INFIRMARY, WE HAVE PEOPLE IN MULTIPLE AREAS.

Commissioner Smith: I WOULD BE CONCERNED ABOUT THE SAFETY OF THE INMATES IF THEY'RE OUT IN AN OPEN COMMON AREA AS OPPOSED TO WHERE THEY ARE RIGHT NOW.

Chief Deputy Brosh: WE WILL HAVE TO LOOK AT AND WILL LOOK AT HOW THE OPERATIONS CONDUCTED, LAS VEGAS METRO, TO SEE WHAT THEIR RECORD HAS BEEN AND WHAT THEY HAVE BEEN ABLE TO DO WITH REGARD TO SAFETY, AND, OF COURSE, CONSTITUTIONAL STANDARDS.

Commissioner Smith: IF THEY'RE ALL SUICIDAL, I DON'T WANT THEM HELPING EACH OTHER, ACCESS TO EACH OTHER --

Chief Deputy Brosh: YOU KNOW, IT'S INTERESTING. ONE OF THE RESULTS OF OUR MOVING TO SINGLE BUNKING WAS THAT THERE ARE TIMES WHEN PEOPLE ARE TOGETHER THAT THEY'RE LESS LIKELY TO COMMIT SUICIDE, BECAUSE THEY HAVE PEOPLE WATCHING THEM, IF YOU WILL. I CERTAINLY HEAR YOUR POINT.

Commissioner Smith: OKAY, THANK YOU.

Commissioner Shiprack: CAN I FOLLOW UP ON THAT A LITTLE BIT? I'M JUST CURIOUS. I'M LOOKING AT THE HOURS OF OVERTIME THAT ARE ON THE SUICIDE WATCH. IF WE JUST PULLED SUICIDE WATCH OFF, THERE WOULD BE REGULAR HOURS ON SUICIDE WATCH AS WELL.

Chief Deputy Brosh: THAT'S CORRECT.

Commissioner Shiprack: SO, THE QUESTION THAT I WOULD HAVE -- I WAS DOODLING OUT THE MATH PROBLEM HERE, WHICH IS NOT A SIMPLE STRAIGHTFORWARD MATH PROBLEM, HOW MANY PEOPLE DO WE HAVE ON SUICIDE WATCH ON AVERAGE PER DAY? IT IS A MULTIPLE QUESTION. AND WHO MAKES THE DECISION TO PLACE THEM ON SUICIDE WATCH AND WHAT THE CRITERIA ARE? I WANT TO GO BACK OVER THAT WITH YOU RIGHT NOW, IF WE COULD.

Chief Deputy Brosh: SURE. IN TERMS OF AVERAGE NUMBER OF INMATES ON SUICIDE WATCH, IT HAPPENS -- WE HAVE -- ONE OF OUR DATA GATHERING SYSTEMS IS AN INMATE MANAGEMENT SYSTEM CALLED SIMS -- RECENTLY HAD THEM LOOK AT THAT AND THE ANSWER WAS 13 IS THE AVERAGE NUMBER PER DAY. IN TERMS OF WHO PUTS -- ANYONE CAN PUT SOMEBODY ON SUICIDE WATCH. SECURITY STAFF MEMBER OR A NURSE OR A HEALTH PRACTITIONER CAN PUT SOMEBODY ON SUICIDE WATCH. THE TYPE OF SUICIDE WATCH THEY GO ON IS DETERMINED BY CORRECTIONS HEALTH, AND THEN ONLY CORRECTIONS HEALTH CAN TAKE SOMEBODY OFF OF SUICIDE WATCH. AND THAT'S WHY -- IN MEETING WITH THE HEALTH DEPARTMENT, FOR EXAMPLE, ONE OF THE THINGS WE'RE LOOKING AT IS RATHER THAN JUST PUTTING MORE MONEY IN THE OVERTIME BUCKET OR PUTTING MORE STAFF ON THAT, IF WE HAD -- IF WE HAD A MORE EFFICIENT WAY OF REMOVING PEOPLE FROM SUICIDE WATCH, THAT WOULD AFFECT THE HOURS OVERALL THAT ARE WORKED. FOR EXAMPLE, IN THE EVENINGS AND WEEKENDS, THERE REALLY ISN'T ANYBODY TO COME IN AND DO THAT WORK UNLESS THE CORRECTIONS HEALTH DIRECTOR ACTUALLY CALLS SOMEBODY IN. HAVING ADDITIONAL FTE THERE --

Commissioner Shiprack: WHAT IS THE AVERAGE LENGTH OF STAY OF A PERSON ON SUICIDE WATCH?

Chief Deputy Brosh: I'M GOING TO HAVE TO GO BACK. I'VE GOT THAT INFORMATION ON MY DESK. SORRY, I DIDN'T BRING IT. BUT I WILL GET THAT TO YOUR OFFICE.

Commissioner Shiprack: LET ME BE MORE CLEAR ABOUT THE QUESTION. NOT THE AVERAGE TOTAL LENGTH OF STAY IN THE FACILITY, LENGTH OF SUICIDE WATCH STAY.

Chief Deputy Brosh: CORRECT.

Commissioner Shiprack: THANK YOU.

Chief Deputy Brosh: UH-HMM. GO AHEAD. FOR THE NEXT SLIDE. THIS IS -- THIS GRAPH SHOWS THE GREEN LINE IS WHAT WE'RE BUDGETED FOR. AS

COMMISSIONER SHIPRACK POINTED OUT, A BUDGET FOR SUICIDE WATCH. WE PUT THAT IN THE BUDGET A FEW YEARS AGO AS THAT PROBLEM BEGAN TO -- OR THAT WORK BEGAN TO INCREASE. THE DOTTED GRAY LINE WAS FY-'13, AND THE RED BARS ARE FY-'14 THROUGH DECEMBER. ONE QUESTION THAT WAS RAISED, HOW MANY ARE CONSTANT SUICIDE WATCHES VERSUS ACTIVES? A CONSTANT SUICIDE WATCH IS A SUICIDE WATCH THAT REQUIRES ONE ON ONE OBSERVATION. ACTIVE SUICIDE WATCH, REQUIRES 15 MINUTE CHECKS SO ONE DEPUTY COULD CHECK SEVERAL ON ACTIVE SUICIDE WATCH VERSUS ONE ON ONE FOR CONSTANT WATCH. CONSTANT WATCH ACCOUNTED FOR 14% OF -- THROUGH DECEMBER. ABOUT 13% -- OR, EXCUSE ME -- DURING THE SECOND QUARTER CONSTANT WATCH ACCOUNTED FOR 14%.

Commissioner Shiprack: IT IS INTERESTING, YOU KNOW, WE HAVE DONE A LOT OF STUDIES OF WHAT THE COSTS PER DAY FOR A JAIL BED IS. WHEN YOU LOOK AT THE COST PER DAY FOR A JAIL BED THAT HAS A FULL-TIME SWORN OFFICER ON DUTY WATCHING THAT JAIL BED, THE COST PER DAY TAKES A RADICAL JUMP. AND, SO, THE NEXT QUESTION FOR YOUR BUNDLE OF QUESTIONS FROM COMMISSIONER SHIPRACK IS WHAT IS THE AVERAGE COST PER DAY OF AN INMATE ON SUICIDE WATCH?

Chief Deputy Brosh: AND DO YOU WANT ME TO BREAK THAT DOWN -- BECAUSE ACTIVE IS GOING TO BE A LITTLE LESS PRECISE. BUT CONSTANT IS PRECISE.

Commissioner Shiprack: CONSTANT IS PRECISE. WELL, SINCE WE KNOW HOW MANY WE HAVE ON CONSTANT --

Chief Deputy Brosh: I CAN AVERAGE.

Commissioner Shiprack: LET'S DO THE CONSTANT. I WOULD LIKE TO KNOW WHAT THE COST IS FOR THAT 14% PER DAY. BECAUSE WHEN I -- WHEN I JUST BREAK DOWN THE 7,000 HOURS BY 24 HOURS A DAY, AND 90 DAYS IN A QUARTER, IF I'M NOT, YOU KNOW, BEING TOO WRONG, I THOUGHT I WOULD SHOW YOU HOW I DID THE MATH, I COME UP WITH THREE PEOPLE WHO ARE CONSTANTLY ON SUICIDE WATCH. SO, AND WE MIGHT ABLE TO FIGURE OUT A SOLUTION IF WE TAKE THAT AMOUNT OF MONEY AND ASSIGN IT ELSEWHERE.

Chief Deputy Brosh: WITH THOSE PEOPLE -- IF WE DON'T HAVE THAT WORK TO DO, THEN, ABSOLUTELY.

Commissioner Shiprack: THANK YOU.

Chief Deputy Brosh: UH-HMM. THIS IS LEAVE -- LEAVE HOURS, OVERTIME HOURS, VACANCY HOURS, AND SWAT AND TRAINING HOURS OVERALL, HOW THEY INTERACT. THEY WERE TRENDING DOWN IN THE FIRST QUARTER. IN THE SECOND QUARTER THEY HAVE RETURNED TO THEIR MORE NORMAL PATTERNS. AND THE FINAL SLIDE IS TOP OVER -- TOP 10 OVERTIME RECIPIENTS BY AMOUNT. JUST SO THAT WE'RE NOT CONFUSED, BECAUSE I WAS CONFUSED BY IT WHEN I FIRST SAW IT. ON QUARTER TWO, THIRD FROM THE BOTTOM, THEY SHOW HOURS 256 AND THE AMOUNT IS ACTUALLY LESS THAN THE 189 ABOVE IT. THAT IS HOURLY RATE FOR

THOSE INDIVIDUALS. AND THAT'S ALL I HAVE IN TERMS OF PRESENTING DATA UNLESS YOU HAVE ADDITIONAL QUESTIONS.

Chair Madrigal: COMMISSIONER WENDT.

Commissioner Wendt: BACK TO THE VACANCY SLIDE -- THERE HAS BEEN SOME IMPROVEMENT IN ADJUSTING THE VACANCIES. WHAT ARE THE OTHER STRATEGIES IN PLACE TO REDUCE VACANCY RATES AND CUT INTO THE OVERTIME FOR THAT GROUP?

Chief Deputy Brosh: ONE THING I SHOULD MENTION WE'VE DONE SOME SPECIAL RECRUITMENTS. FOR EXAMPLE, AT THE COLUMBIA COUNTY JAIL, WHICH IS POTENTIALLY -- MAKING POTENTIAL PLANS FOR THAT JAIL TO CLOSE, ACTUALLY, AT THE END OF THE FISCAL YEAR, AND WE WENT THERE, VISITED THEM AND DID A SPECIAL RECRUITMENT FOR THOSE FOLKS. OBVIOUSLY THEY'RE CERTIFIED AND IF THERE COMING IN TO OUR -- WE HAVE THE VACANCIES AND WE'RE WORKING WITH BACKGROUNDS RIGHT NOW TO GET THEM. THE GOOD NEWS FOR THOSE FOLKS IF THEY ARE TO COME TO US, ALREADY CERTIFIED CORRECTIONS OFFICERS, TIME IN ACADEMY TRAINING AND TIME IN FIELD TRAINING WOULD BE REDUCED. ADDITIONALLY OUR HUMAN RESOURCES UNIT HAS ADDITIONAL RESOURCES BEYOND THE BACKGROUNDERS, BUT OTHER FOLKS TO HELP MANAGE THE NON-BACKGROUND PART OF THOSE PROCESSES TO KEEP UP WITH AND GAIN GROUND ON THE VACANCIES.

Chair Madrigal: ANY OTHER QUESTIONS?

Commissioner Smith: I HAVE A QUESTION. WHAT IS OUR TIME LINE TO FILL THE 37 POSITIONS VACANT IN THE CORRECTIONS DEPARTMENT?

Chief Deputy Brosh: WE'RE PROJECTING ABOUT, I THINK 40 TO 45 HIGHER AND THEN A LARGER NUMBER FOR THE FOLLOWING YEAR. I WISH I COULD GIVE YOU AN ACTUAL DROP-DEAD DATE ON THAT. IT DEPENDS ON -- IT DEPENDS ON THE -- THE RATE OF RETIREMENTS AT THIS POINT AND THE RATE OF SEPARATIONS. I -- I WOULD -- I WOULD BE -- I THINK IT'S SAFE TO SAY THAT WE WILL HAVE A SMALLER NUMBER OF VACANCIES AT THE END OF THE YEAR, SIGNIFICANTLY SMALLER THAN WE CURRENTLY SEE.

Commissioner Smith: I'M LOOKING AT THE TABLE AND IT TELLS EACH QUARTER HOW MANY RETIREMENTS WE'VE HAD. FIRST QUARTER IT WAS SEVEN. SECOND QUARTER IT WAS 11. HOW MANY ELIGIBLE PEOPLE DO WE HAVE IN CORRECTIONS FOR RETIREMENT OVERALL?

Chief Deputy Brosh: I HAVE THAT ON A SLIDE FOR ANOTHER PRESENTATION THAT I CAN GET TO YOUR OFFICE.

Commissioner Smith: OKAY. AND ONE LAST QUESTION. COMMISSIONER SHIPRACK HAD ASKED A QUESTION EARLIER, AND I WANTED TO FOLLOW UP ON THAT TO TRY TO IDENTIFY WHAT STEPS WE'RE BASICALLY TAKING TO MANAGE THIS. I DON'T

THINK IT IS VERY CLEAR ON HOW WE'RE MANAGING THE OVERTIME AND WHAT WE SPECIFICALLY DOING TO ELIMINATE THAT.

Chief Deputy Brosh: WELL, AS I STATED PREVIOUSLY, ONE THING THAT WE'RE DOING IS GETTING -- REPORTING FOR LINE BY LINE FOR -- THAT EACH CHIEF IS GETTING EVERY MONTH FROM PLANNING AND RESEARCH TO IDENTIFY AREAS WHERE WE'RE WORKING OVERTIME AND TO BETTER DEPLOY STAFF TO REDUCE THOSE NUMBERS. WE HAVE SEEN SUCCESS, AS I SAY, IN LAW ENFORCEMENT AND CORRECTIONS AND THE NON-SUICIDE WATCH CATEGORY. WE ARE SEEING SOME REDUCTIONS WHICH IS WHAT IS KEEPING US EVEN NOW. LASER FOCUS ON THIS, COMMUNITY PARTNERS INVOLVED, WE'VE GOT THE PUBLIC SAFETY SYSTEM PARTNERS INVOLVED IN THIS, I THINK WE CAN GET TO SOME MORE SOLUTIONS IN THAT REGARD. BUT WE'RE GOING TO -- WE REALLY NEED TO GET, YOU KNOW, COOPERATION FROM THE POLICE AGENCIES IN THIS AREA AND HAVE -- AND HAVE BETTER ALTERNATIVES A THE FRONT DOOR.

Chair Madrigal: DREW, CAN I ASK, OBVIOUSLY THE JAIL POPULATION FLUCTUATES AND WE HAVE CAPACITY FOR 1310. BECAUSE OF THE NUMBER OF VACANCIES IN CORRECTIONS, WHEN THE JAIL POPULATION IS DOWN FAR ENOUGH TO CLOSE A DORM, DO YOU DO THAT? DO YOU SHUT IT DOWN?

Chief Deputy Brosh: WE ABSOLUTELY DO THAT. WE HAVE FACILITY SERVICES COMMANDER, JOSE MARTINEZ, EVERY DAY IS -- WE GET A POPULATION REPORT. SOME OF YOU PROBABLY GET THE JAIL POPULATION REPORT EVERY DAY. WE LOOK AT THE CONFIGURATION OF WHO WE HAVE IN THE JAIL AND CLASSIFICATION SOMETIMES MAKES IT TRICKY, BUT WHENEVER WE POSSIBLY CAN ON A WEEKEND, IF IT IS -- IF THERE IS A DOWNTURN IN THE POPULATION, WE CLOSE THOSE AND WE HAVE DONE THAT ACTUALLY SOME THIS YEAR AND WE'VE BEEN ABLE TO REALIZE SOME SAVINGS FROM THAT.

Chair Madrigal: THANK YOU.

Commissioner Shiprack: AND THAT -- THAT'S A -- I WANT TO FOLLOW-UP ON THE CHAIR'S QUESTION BECAUSE THERE IS ALSO SOME DYNAMIC WITH THE MARSHAL BEDS THAT I FEEL UNCLEAR ABOUT. AND THAT IS THAT -- SO THE U.S. MARSHAL'S BEDS HAVE BEEN KIND OF A LITTLE REVENUE GENERATOR. WHEN THE U.S. MARSHAL BEDS ARE EMPTY AND THEY'RE NOT GENERATING REVENUE, IT SEEMS POSSIBLE THAT THEY COULD BE FILLED UP WITH INMATES AND ACTUALLY BE GENERATING THE OFFICE OF REVENUE, IN FACT, GENERATING OVERTIME HOURS BECAUSE WE HAVE NOT CALCULATED THAT IN THAT BUDGET FORECASTING. IS THAT A DYNAMIC THAT IS ACTUALLY PLAYING OUT THROUGH THE SYSTEM?

Chief Deputy Brosh: YOU KNOW, IT'S -- OKAY. A GOOD AND COMPLEX QUESTION. I THINK -- FROM MY PERSPECTIVE, WE -- WE RESERVE A CERTAIN NUMBER OF BEDS FOR U.S. MARSHAL TO USE. WHEN THEY EXCEED THAT NUMBER, WE TALK TO THEM ABOUT KEEPING BEDS AT A CERTAIN LEVEL. WHEN WE ARE HITTING THE MARK FOR THE MARSHAL BEDS. WHEN THE MARSHALS ARE FILLING THE BEDS AT THE RATE WHICH WE PREDICT THAT THEY WILL, THOSE REVENUES DO ACTUALLY FUND LOCAL CAPACITY AT THE END OF THE SYSTEM. YOU'VE HEARD ME SAY MANY TIMES

THAT THE AVERAGE COST PER DAY IS \$168, AND AS COMMISSIONER SHIPRACK POINTED OUT, THAT IS NOT BECAUSE EVERY SINGLE BED, OPERATION IS 168, WE HAVE LESS EXPENSIVE BEDS, AND MORE EXPENSIVE BEDS DOWNTOWN WHERE THE STAFF RATIOS ARE A LOT HIGHER. IF -- IF YOU REMOVE THE MARSHAL'S CONTRACT ALL TOGETHER, WHAT HAPPENS IS THAT THAT IS GOING TO HAVE AN IMPACT ON CAPACITY BECAUSE OF THE REVENUE. BUT THAT CAPACITY IS GOING TO COME FROM THE CHEAPER PART OF THE SYSTEM. THE LOCAL BED COUNT, DYNAMIC BETWEEN MARSHALS AND THE LOCAL JAIL CAPACITY OR LOCAL POPULATION, ONLY RELATED IN SO FAR IS GENERAL CRIME TRENDS, FEDERAL PROSECUTIONS, LOCAL PROSECUTIONS AND THOSE AREN'T ALWAYS THE SAME. CATEGORICALLY -- JUST AS A SINGLE EXAMPLE, THE LOCAL PUBLIC SAFETY SYSTEM DOESN'T DO PROSECUTIONS WITH REGARD TO IMMIGRATION LAW WHEREAS THE FEDERAL SYSTEM DOES. SO, BEYOND THAT, THERE CAN BE THINGS HAPPENING IN THE FEDERAL SYSTEM THAT IS -- WHERE THEY'RE REDUCING THEIR POPULATIONS, LIKE WITH RECENT SENTENCING REFORMS AND FOR DRUG CRIMES AND THAT KIND OF THING VERSUS LOCAL WHERE YOU MAY HAVE A SPIKE OR INCREASE IN LOCAL CRIME ACTIVITY WHICH MAKES MORE ARRESTS. FELONY ARRESTS, SERIOUS -- IMPACTS THE JAIL CAPACITY.

Commissioner Shiprack: THANK YOU, MADAM CHAIR. AT THE HEART OF MY QUESTION IS THE REASON THAT WE'RE WATCHING THIS SO CLOSELY HAS MORE TO DO, I THINK, JUST SPEAKING FOR MYSELF, WITH THE FACT THAT OVERTIME HAS EXCEEDED THE BUDGETED AMOUNT. WHICH TELLS ME THAT WE'RE NOT DOING A GOOD JOB OF FORECASTING OUR OWN COSTS WITHIN OUR OWN SYSTEM, AND THAT WOULD BE A DIFFERENT DISCUSSION. SO, THE QUESTION THAT, YOU KNOW, WE CALLED YOU BACK TO ASK ON A REGULAR BASIS HAS MORE TO DO, I THINK, WITH THE ATTENTION THAT WE'RE APPLYING TO AN ANTICIPATED OVERTIME AMOUNT, WHICH WE ARE SORT OF ON A REGULAR BASIS EXCEEDING. AND SO THIS DYNAMIC WITH THE U.S. MARSHALS BEDS MAKES ME WONDER IF THE BOARD SHOULDN'T PERHAPS BE MORE CONCERNED ABOUT THE NUMBER OF BEDS THAT WE ALLOCATE FOR OUR USE AND LOOK AT OUR LITTLE PROFIT CENTER OF THE U.S. MARSHAL BEDS AS A DIFFERENT CALCULATION. BECAUSE OTHERWISE THE FUNDABILITY OF BEDS STARTS TO GET REALLY CONFUSING ABOUT WHETHER WHAT WE'RE OPERATING IS SOMETHING THAT'S BEING COMPENSATED BACK TO US OR WHETHER WHAT WE'RE OPERATING IS SOMETHING THAT'S USING UP RESOURCES THAT WE HAVE NOT PLANNED ON USING.

Chief Deputy Brosh: THANK YOU. IT IS MY BELIEF THAT WE ARE RARELY IN A POSITION THAT -- THAT THE -- THAT THE U.S. MARSHAL REVENUE IS NOT ACTUALLY NOT ONLY HOLDING ITS OWN, BUT ALSO CONTRIBUTING TO LOCAL CAPACITY. WHEN I LOOK AT THE NUMBERS -- I LOOK BACK IN 2010, WE DID THE GRAND JURY WORK GROUP WITH MEMBERS OF THE COMMUNITY. COMMISSIONER McKEEL, YOU WERE ON THAT WORK GROUP. WE TOOK A HARD LOOK AT THAT THEN. AT THAT DATE IN TIME WE LOOKED AT NOT ONLY -- SOMETIMES U.S. MARSHAL PRISONERS, THEY'RE PEOPLE JUST LIKE THE PEOPLE WE HAVE LOCALLY. SOME GET SICK. SOME HAVE SUICIDE ATTEMPTS. SOME HAVE SPECIAL NEEDS. WE DRILL DOWN INTO THAT POPULATION, AND WHAT WE DID DISCOVER WAS EIGHT OUT OF 10 MARSHAL PRISONERS WERE HOUSED IN GENERAL HOUSING, WHICH MEANS GENERALLY SPEAKING THEY WERE, YOU KNOW, IN THE INVERNESS JAIL OR SOMEWHERE THAT

WAS A LESS COSTLY AREA THAT WE WEREN'T COMMITTING LOTS OF RESOURCES. WE WILL HAVE OCCASIONAL INMATES, NOTORIOUS INMATES, U.S. MARSHAL'S, FOR WHICH WE ALLOCATE A LOT OF RESOURCES. THAT MUCH IS TRUE. IN THE LARGER EQUATION, EVERY TIME I LOOKED AT THAT STUDY THAT CLOSELY, WE HAVE BEEN IN GOOD SHAPE. RECENTLY, OUR MARSHAL COUNTS HAVE BEEN DOWN SIGNIFICANTLY. YOU HEARD THAT FROM OUR ECONOMIST LAST WEEK. ONE OF THE SIGNIFICANT ANTICIPATORY ITEMS FOR THE COLUMBIA COUNTY JAIL SITUATION, THEY ARE ALSO A CONTRACTOR WITH THE U.S. MARSHALS. I HAVE MET WITH THE MARSHALS, AND IF THEY DO CLOSE, THERE IS A PLAN TO MOVE INMATES THAT ARE CURRENTLY THERE AT THE COLUMBIA COUNTY JAIL BACK TO OUR JAIL SYSTEM.

Commissioner Shiprack: THANK YOU.

Chair Madrigal: DREW, DO YOU HAVE -- THIS IS A DISCUSSION ABOUT THE OVERTIME BUDGET. BECAUSE YOU HAVE SO MANY VACANCIES, I'M ASSUMING THAT YOU ARE UNDERSPENDING IN THE BUDGETED --

Chief Deputy Brosh: PERSONNEL SAVINGS.

Chair Madrigal: PERSONNEL SAVINGS. DO YOU HAVE THOSE NUMBERS? WHAT IS YOUR BUDGET FOR PERSONNEL AND WHAT IS YOUR ACTUAL SPENDING?

Chief Deputy Brosh: I CAN --

Chair Madrigal: COULD YOU GET THAT TO US?

Chief Deputy Brosh: I CAN GET THOSE FOR YOU.

Chair Madrigal: COMMISSIONER WENDT.

Commissioner Wendt: SORT OF A FOLLOW UP ON THAT, DREW. IF YOU WERE TO LOOK AHEAD FOR QUARTER THREE WITH SOME OF THE STRATEGIES IMPLEMENTING ON THE VACANCIES AND SOME OF THE DAILY, WEEKLY ACCOUNTABILITY PIECES THAT ARE IN PLACE, WHAT DO YOU ANTICIPATE THE OVERTIME NUMBERS LOOKING LIKE IN THE NEXT QUARTER?

Chief Deputy Brosh: I ANTICIPATE THE VACANCY -- NOW, WHAT'S TRICKY, WHEN WE HIRE SOMEBODY. WE HAVE NEW FOLKS, WHAT IT DOES IS IT DRIVES THE TOTAL NUMBER OF WORK HOURS. INSTEAD OF HAVING ONE PERSON ASSIGNED TO A JOB, YOU HAVE TWO PEOPLE ASSIGNED TO A JOB. BECAUSE YOU'VE GOT THE NEW DEPUTY ASSIGNED TO THE JOB. AND IT TAKES ABOUT 17 WEEKS FOR THAT NEW DEPUTY TO THEN BE ABLE TO BE ASSIGNED SOMEWHERE BY THEMSELVES, FOR WHICH THEN THEY HELP THE BOTTOM LINE. I THINK FOURTH QUARTER, I THINK IF WE CONTINUE OUR HIRING THE WAY THAT -- WHERE WE'RE HEADING, I THINK THE FOURTH QUARTER WILL PROBABLY LOOK BETTER THAN THE THIRD QUARTER.

Chair Madrigal: ADDITIONAL QUESTIONS?

Commissioner Shiprack: I WANT TO TAKE THIS AS A POST IT AND PUT IT ON THE

DASHBOARD, LIKE THEY SAY. I WOULD LIKE TO HAVE A BOARD BRIEFING AND A REAL CONVERSATION WITH YOU ABOUT, INTERESTINGLY ENOUGH, A QUESTION THAT CAME UP DURING PUBLIC COMMENT TODAY, AND THAT IS OUR 40% OF THE PEOPLE HOUSED IN THE JAIL MENTALLY ILL AND WHO MAKES THAT DIAGNOSIS AND WHAT IS THE DEGREE OF THE ILLNESS AND ARE THESE ILLNESSES THAT COULD BE TREATED SECURELY AND SAFELY AND MORE APPROPRIATELY ELSEWHERE? AND I WOULD REALLY LIKE TO MOVE ALONG THE CONVERSATION THAT YOU AND THE CHAIR'S OFFICE ARE ENGAGING WITH OTHER PARTNERS IN THE PUBLIC SAFETY SYSTEM.

Chief Deputy Brosh: THANK YOU, COMMISSIONER. WE WILL INVITE THAT CONVERSATION AND WE WILL GET THAT SCHEDULED.

Chair Madrigal: COMMISSIONER McKEEL.

Vice-Chair McKeel: I JUST HAVE A COMMENT, SPEAKING OF RETIREMENT

Chair Madrigal: THAT'S RIGHT!

Vice-Chair McKeel: YES, DREW, YOU ARE GOING TO BE RETIRING. WE ARE GOING TO MISS YOU. I ALWAYS APPRECIATE YOUR WILLINGNESS TO LOOK AT A SYSTEM-WIDE APPROACH TO THE ISSUES. TO BE OPEN ABOUT ANSWERING ALL OF OUR QUESTIONS THAT WE HAVE AND MAKING SURE THAT WE HAVE THE INFORMATION THAT WE NEED TO MAKE GOOD DECISIONS, AND, SO, WHILE WE HAVE THIS OPPORTUNITY, I JUST WANT TO SAY THANK YOU. WE ARE GOING TO MISS YOU. AND WELCOME, LINDA. WE ARE LOOKING FORWARD TO YOU --

Chief Deputy Yankee: THANK YOU. I KNOW I HAVE SOME BIG SHOES TO FILL.

Chair Madrigal: COMMISSIONER SMITH.

Commissioner Smith: THANK YOU, CHAIR. I WOULD LIKE TO ECHO WHAT COMMISSIONER McKEEL HAS JUST SAID. IT HAS ALWAYS BEEN GOOD TO HAVE YOU BEFORE US. MANY TIME THE SHERIFF HASN'T BEEN ABLE TO DO THAT. YOU ARE A STRAIGHT SHOOTER. YOU ACTUALLY PROVIDE US SOME TRANSPARENCY THAT WE GET FROM THE SLIDES AND FROM YOUR VERBAL PRESENTATION. I WANT TO THANK YOU FOR YOUR SERVICE. YOUR MANY YEARS OF SERVICE, AND I THINK WE NEED MORE FOLKS WHO HAVE YOUR COMMITMENT AND DEDICATION TO THE COUNTY AND PUBLIC SAFETY. I WISH YOU WOULD STAY, BUT -- THANK YOU SO MUCH.

Chief Deputy Brosh: THANK YOU VERY MUCH. I CAN -- I CAN TELL YOU THAT I SPENT MORE TIME IN MY CAREER FOLLOWING CHIEF DEPUTY YANKEE THAN SHE EVER DID ME, SO YOU GUYS ARE IN GOOD HANDS.

Commissioner Shiprack: THANK YOU. I WANT TO ACKNOWLEDGE THAT. I HAVE A -- I HAVE A REAL HARD TIME REMEMBERING EVERYBODY'S CHAIN IN THE CHAIN OF COMMAND. SO, CHIEF DEPUTY YANKEE, WELCOME, AND I KNOW YOU ARE VERY EXPERIENCED WITH THE OPERATIONS OF THE JAIL AND SPECIFICALLY WITH THIS

ISSUE OF MENTAL HEALTH AND THE JAIL. SO, WELCOME. AND I ADD MY, YOU KNOW, REAL SORROW AT SEEING YOU GET TO RETIRE.

Chief Deputy Brosh: I'M GETTING SOME OF THAT, TOO, YEAH.

Commissioner Smith: VERY JEALOUS.

Chair Madrigal: OKAY. ALL IN FAVOR VOTE AYE.

Board Clerk: WE HAVE ONE PUBLIC TESTIMONY.

Chair Madrigal: OH, OKAY.

Board Clerk: MR. CHARLES JOHNSON. THANK YOU.

Mr. Johnson: GOOD MORNING, COMMISSIONERS, I'M GLAD TO BE BACK IN FRONT OF YOU. I KNOW THIS ISSUE HAS TAKEN UP MANY HOURS OF YOUR TIME, AND I THINK SOMETHING THAT WAS IN THE BACK OF YOUR MINDS THAT DIDN'T QUITE GET FULLY DISCUSSED HERE BECAUSE WE JUST NEED TO GET THE MONEY TO TAKE CARE OF PEOPLE WHO ARE IN NEED IS THE BIG PICTURE THAT I HEAR THE CONVERSATION WITH THE CHAIR GOING ON ABOUT THE ACTUAL PEOPLE AND THE OUTCOMES, THESE PEOPLE WHO ARE STUCK IN SUICIDE WATCH CELLS OR ROOMS WHERE THEY HAVE EITHER 15 MINUTE OR CONSTANT OBSERVATION. AGAIN, AS I DID IN THE EARLIER COMMENT, I WANT TO ENCOURAGE YOU TO PUSH FOR FULL COMPLETE SOLUTIONS WHERE WE LOOK AT THINGS LIKE WHERE ARE THE SUICIDE WATCH PEOPLE COMING FROM? IS THIS ACTUALLY SOMEBODY THAT WE DIDN'T FILTER OUT FROM THE PORTLAND POLICE DEPARTMENT? IS IT JUST SOMEBODY WHO IS DRUNK UNDER THE BURNSIDE BRIDGE AND IS COMING BACK TO DO THEIR 30 DAYS? WHEN I WAS HERE A FEW WEEKS OR MAYBE A COUPLE OF MONTHS AGO, YOU HAD EXCELLENT PRESENTATION ON PARTNERSHIP WITH VETERANS COURT. AND THE CHIEF JUDGE CAME AND I HOPE YOU WILL CONSIDER MAYBE BEFORE WE HAVE TO LOSE CHAIR MADRIGAL AND MS. WENDT -- SO THE WHOLE COMMUNITY CAN GET INVOLVED IN FINDING COST EFFECTIVE SOLUTIONS FOR PEOPLE IN ENVIRONMENTAL DISTRESS. PROCEDURAL THINGS WHERE THE SHERIFF'S DEPARTMENT CAN REFER THIS BACK TO A MAGISTRATE -- PERSON WITH MENTAL HEALTH -- THE BEST THING TO DO IS PUT THEM IN A CAR AND DEPENDING ON THE SEVERITY OF THEIR CRIME AND THEIR CONDITIONS, MAYBE THEY DON'T NEED TO BE IN JAIL. MAYBE THEY'RE COMPETENT TO SIT THIS THE WAITING ROOM WITH OTHER MENTALLY ILL PEOPLE AT CASCADIA. MAYBE WE CAN COME UP WITH FUNDING SO THAT THERE IS NOT SO MANY PEOPLE SITTING IN THE WAITING ROOM AT CASCADIA. I KNOW THESE THINGS ARE ON YOUR MIND. I WANTED TO SPEAK UP FOR WHAT I BELIEVE ARE THE HUNDREDS OF THOUSANDS OF VOTERS ENCOURAGING YOU TO CONTINUE YOUR HARD WORK TO FIND THESE COMPREHENSIVE SOLUTIONS. BECAUSE HAVING 15 PEOPLE IN A DAY ON AVERAGE, SUICIDE-WATCH PEOPLE, IS SYMPTOMATIC OF A PROBLEM NOT BEING PROPERLY ADDRESSED AND IT WILL NOT BE PROPERLY ADDRESSED INSIDE THE SHERIFF DEPARTMENT, WITH OR WITHOUT MR. BOSH STAYING OR GOING INTO RETIREMENT. THANK YOU, COMMISSIONERS.

Chair Madrigal: ALRIGHT, THANK YOU. ALL IN FAVOR VOTE AYE.

[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? THE BUDGET MODIFICATION IS APPROVED.

Chief Deputy Brosh: THANK YOU VERY MUCH.

R.2 Approval of the 2014-2016 Collective Bargaining Agreement between Multnomah County and AFSCME Local 88-4 - Physicians Classification. Presenter: Steve Herron, Labor Relations Director; Dr. Teresa Everson, Multnomah County Physician; Bryan Lally, AFSCME Council 75 Representative.

Chair Madrigal: MAY I HAVE A MOTION?

Commissioner Shiprack: SO MOVED.

Chair Madrigal: COMMISSIONER SHIPRACK MOVES.

Vice-Chair McKeel: SECOND.

Chair Madrigal: COMMISSIONER MCKEEL SECONDS, APPROVAL OF R-2. WE ARE SO EFFICIENT TODAY!

Commissioner Shiprack: JUST EAGER!

Chair Madrigal: GOOD MORNING.

Mr. Herron: GOOD MORNING, MADAM CHAIR AND COMMISSIONERS. THANK YOU FOR YOUR TIME THIS MORNING. I'M STEVE HERRON, LABOR RELATIONS DIRECTOR. TERESA EVERSON, A PHYSICIAN FOR MULTNOMAH COUNTY AND TO HER LEFT, BRIAN LAWLY, THE AFSCME COUNCIL 75 REPRESENTATIVE, EXCLUSIVE REPRESENTATIVE OF LOCAL 88. AND LOCAL 88-4, WHICH IS THE PHYSICIAN'S UNIT.

AS YOU MAY RECALL, WE HAVE BEEN ON A CHALLENGING JOURNEY TO NEGOTIATE A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE COUNTY AND THE PHYSICIANS LOCAL 88-4 FOR A COUPLE OF YEARS OR A YEAR AND A HALF ANYWAY. THE PHYSICIANS WERE RECOGNIZED BY THE EMPLOYMENT RELATIONS BOARD OF THE STATE OF OREGON EMPLOYMENT RELATIONS BOARD IN SEPTEMBER OF 2012 AND WE BEGAN BARGAINING IN NOVEMBER OF 2012. BECAUSE IT WAS A FIRST CONTRACT, THERE WERE SOME VERY FOUNDATIONAL AND DIFFICULT INITIAL ISSUES TO WORK THROUGH BETWEEN THE PARTIES. AND I'M PROUD TO REPORT THAT THE PARTIES WORKED DILIGENTLY AND IN GOOD FAITH ON VERY DIFFICULT ISSUES AND CAME TO A MUTUALLY AGREEABLE RESOLUTION. I THINK THAT BOTH SIDES MADE COMPROMISES IN AREAS THAT THEY HAD STRONG PRINCIPLES AND STRONG INTERESTS RELATED TO AND I BELIEVE THAT THE PARTIES' WILLINGNESS TO BE INVESTED IN THE RELATIONSHIP REALLY UNDER-PINNED OUR ABILITY TO GET TO A CONTRACT THAT THE PARTIES ARE SATISFIED WITH. IT DIDN'T

ULTIMATELY COME DOWN TO ONE PARTY OR THE OTHER POSTURING TO STRONG ARM THE OTHER. I THINK WE BOTH STAYED AT THE TABLE ENGAGED, WORKING HARD AT COMING UP WITH PRACTICAL, MUTUALLY AGREEABLE SOLUTIONS AND I'M PROUD OF THE WORK THAT WE DID AND THE RESOLUTION THAT WE WERE ABLE TO ACCOMPLISH.

IN TERMS OF SUBSTANTIVE CONTRACT TERMS, THE FIRST THING THAT WE NEEDED TO ADDRESS WAS WHAT THE COMPENSATION STRUCTURE WOULD LOOK LIKE FOR THE REPRESENTED EMPLOYEES SINCE THEY WOULD BE MOVING OFF OF THE NON-REP STRUCTURE. A NINE-STEP SALARY SCHEDULE, NEGOTIATED THE PLACEMENT OF THE PHYSICIANS ON TO THAT. YOU MAY RECALL THERE HAVE BEEN ANOMALIES IN PHYSICIAN PAY THAT EVOLVED OVER TIME AND SO THE PLACEMENT ON TO THAT SCHEDULE WAS ACTUALLY A PROCESS THAT TOOK FAIR AMOUNT OF THOUGHT AND WORK FROM BOTH PARTIES. THE PARTIES AGREED TO A CPIW PORTLAND-SALEM COLA FOR YEARS TWO AND THREE OF THE CONTRACT, WHICH WOULD BE EFFECTIVE JULY 1 OF '14 AND JULY 1 OF '15. MINIMUM MAXIMUM ONE TO FOUR. THE PARTIES AGREED TO A MODEST COLLECTION OF PREMIUMS THAT ARE REFLECTIVE OF BOTH THE STATUS QUO AND OTHER PREMIUMS WITHIN THE COUNTY. WE HAVE, FOR EXAMPLE, A BILINGUAL PREMIUM FOR PHYSICIANS WHO ARE BILINGUAL AND PROVIDING THAT AT THE COUNTY'S REQUEST AND DIRECTION. WE HAVE A CONTINUING ED PROVISION FOR FUNDING CONTINUING EDUCATION COURSES AND SO ON. IN RELATION TO HEALTH AND WELFARE, WE MAINTAINED THE STATUS QUO FOR PLANS AND COST SHARING. REALLY OUR INTENT STEPPING IN TO MOST OF THE BENEFIT-RELATED STUFF WAS TO MAINTAIN STATUS QUO. I THINK WE DID ACCOMPLISH THAT ACROSS THE BOARD.

ONE OF THE BIG THINGS WE'RE WORKING ON IS THE REVIEW OF BENEFITS AS IT RELATES TO THE AFFORDABLE CARE ACT AND RELATES TO SUSTAINABLE COSTS, AND SO THE PHYSICIANS LIKE THEIR COUNTERPARTS, AND LOCAL 86, AGREED TO PARTICIPATE IN THE EMPLOYMENT BENEFITS -- EMPLOYEE BENEFITS ADVISORY TEAM AND SO THEY ALSO HAVE A PLACE AT THAT TABLE AS WE WORK COLLECTIVELY TO TRY TO COME TO SOME SOLUTIONS AROUND THAT. TWO OF THE VERY STICKY ISSUES THAT ARE FOUNDATIONAL ISSUES AROUND UNION CONTRACTS, BACKBONE ISSUES, ARE AROUND SENIORITY AND THE ROLE IT MIGHT PLAY IN REDUCTION OF FORCE, FOR EXAMPLE, AND AROUND CONTRACT ENFORCEMENT AND DISCIPLINE-RELATED ISSUES. I THINK THE PARTIES CAME UP WITH SOME NICE COMPROMISES AND CREATIVE IDEAS AROUND THAT THAT I WANT TO SHARE BRIEFLY. IN RELATION TO THE SENIORITY ISSUE, THE PARTIES AGREED THAT THEY WOULD APPLY SENIORITY BASED RIGHTS TO LAYOFF AND RECALL CONTEXT AND NOT TO TRANSFER CONTEXT. AND THAT I THINK WAS A NICE COMPROMISE AROUND THE ISSUE OF SECURITY VERSUS LATITUDE FOR PLACEMENT. AND THAT WAS DIFFICULT. I THINK BOTH PARTIES HAD VERY DEEPLY AND PASSIONATELY SINCERELY HELD CONVICTIONS AROUND THAT AND I THINK THE PARTIES WORKED HARD AT COMING TO A COMPROMISE AROUND THAT. THE OTHER CONTRACT ENFORCEMENT, AS IT RELATES TO EMPLOYEE ASSESSMENT AND DISCIPLINE -- PARTIES AGREED TO A -- NON-DISCIPLINE RELATED MATTERS WOULD BE GRIEVED THROUGH AN ORDINARY PROCESS. DISCIPLINE-RELATED MATTERS WOULD GO TO A PEER PANEL MADE UP OF PHYSICIANS AND MANAGEMENT WITH SPECIALTY IN SELECTING ONE PHYSICIAN WITH EXPERTISE IN

THE SAME AREA. WHICH I -- I FEEL LIKE WAS A -- WAS A CREATIVE AND SORT OF OUTSIDE THE BOX WAY OF -- GETTING TO SOMETHING THAT MADE SENSE TO FOLKS. WITH THAT, I WILL TURN IT OVER TO EITHER -- IF THEY HAVE ANY COMMENTS AND I'M HAPPY TO ANSWER ANY QUESTIONS THAT YOU HAVE.

Chair Madrigal: GOOD MORNING.

Mr. Lally: GOOD MORNING. BRYAN LALLY WITH AFSCME LOCAL 88. I WOULD LIKE TO ECHO SOME OF THE THINGS THAT STEVE SAID. THERE WERE FOUNDATIONAL ISSUES THAT WE HAD TO STRUGGLE TO WORK THROUGH. BOTH SIDES I THINK HAVING TO GIVE IN ORDER TO GET WHERE WE NEEDED TO BE TO CONCLUDE THE CONTRACT. A COUPLE OF OTHER THINGS. I JUST WANT TO EXPRESS PERSONALLY I CONSIDER IT A PRIVILEGE AFTER WORKING WITH THESE DOCTORS THROUGH THIS PROCESS AND GETTING TO KNOW THEM AND THEIR COMMITMENT TO PUBLIC HEALTH. THESE ARE PEOPLE WHO HAVE A WIDE VARIETY OF CHOICES IN THEIR CAREERS AND THEM COMMITTING TO DO THIS KIND OF WORK WITH THE MOST VULNERABLE POPULATIONS WHO HAVE OFTEN THE WORST HEALTH CASES MAKE THIS A VERY CHALLENGING JOB. IT IS INSPIRING TO ME AND I'M HUMBLED BY THE COMMITMENT THAT THEY HAVE MADE TO THIS COUNTY AND THE PEOPLE WHO LIVE HERE.

ALSO, WHILE THE RATIFICATION TODAY WILL BE THE END OF THE BARGAINING PROCESS, IT IS THE BEGINNING OF A NEW RELATIONSHIP BETWEEN THE PHYSICIANS AND THE COUNTY. WE DID GET A LOT OF THINGS HANDLED THROUGH THE CONTRACT, FIRST CONTRACT AND THERE IS STILL PROGRESS THAT NEEDS TO BE MADE STILL. ONE PARTICULAR ISSUE, THAT IS PRETTY THORNY AND DOESN'T LEND ITSELF WELL TO CONTRACT LANGUAGE AND BARGAINING, BUT A SIGNIFICANT ISSUE FOR THE PHYSICIANS, IS WHAT IS CALLED THE PANEL SIZE, WHICH IS THE PATIENT CASELOAD THEY WORK WITH. THIS HAS BEEN A DIFFICULT THING. IT IS REALLY -- IT BECOMES AN ISSUE BECAUSE IT CREATES PROBLEMS FOR ACCESSIBILITY, PATIENTS GETTING ACCESS TO THE PHYSICIANS, TO PHYSICIANS TO PROPERLY CARE FOR THE FOLKS THEY CAN'T SEE AS OFTEN BECAUSE BASICALLY THEY ARE COMPETING WITH OTHER PATIENTS TO GET THIS TIME WITH THE DOCTORS AND CREATE PROBLEMS WITH DOCTORS GETTING THE WORK DONE. A LOT OF WORK OUTSIDE OF THE PATIENT TIME, THEY NEED TO DO A MYRIAD OF OTHER CHORES IN HANDLING THE CASES THAT THEY DEAL WITH. AND, YOU KNOW, I THINK A NUMBER OF THINGS. EITHER WE HAVE TO HIRE MORE DOCTORS TO HELP THESE PATIENTS OR STOP MAKING PROMISES TO THE STATE TO TAKE ALL-COMERS. I THINK THE DOCTORS ARE WILLING TO SEE AS MANY PATIENTS AS THEY CAN.

WE ARE SEEING A BREAK DOWN IN THE SYSTEM AS FAR AS RECRUITMENT AND RETENTION. THIS HAS BECOME AN ISSUE IN THE PAST FEW YEARS. A -- DOCTORS TO ORGANIZE IN THE FIRST PLACE AND THE COUNTY RECOGNIZING THAT AND WORKING ITS WAY INTO THE BARGAINING PROCESS AND RECOGNITION OF THE ISSUES HAS BEEN IN FRONT OF EVERYBODY'S MINDS. WE HAVE GOTTEN GOOD WORK DONE AND THERE IS CERTAINLY MORE WORK TO DO AND WE HOPE THE COUNTY AND HEALTH DEPARTMENT WILL BE RECEPTIVE TO THE ISSUES WHEN WE

BRING THEM FORWARD AND TRY TO FIND THE WAY TO RESOLVE THESE PANEL SIZE PROBLEMS. THANK YOU.

Dr. Everson: I DIDN'T KNOW I WAS GOING TO BE HERE THIS MORNING, I DON'T HAVE ANYTHING PREPARED TO SAY. IT'S BEEN A VERY INTERESTING PROCESS. IF YOU HAD ASKED ME 20 YEARS AGO IF I THOUGHT I WOULD BE INVOLVED IN, WHO THINKS OF PRIMARY CARE PHYSICIANS UNIONIZING. I THINK IT WAS A VERY NECESSARY STEP AND I GUESS FOR MY STANDPOINT, THE BIGGEST BENEFIT WE'VE SYSTEMIZED A WAY FOR ALL PHYSICIANS TO BE ABLE TO GATHER ALL OF THEIR CONCERNS AND COME TO ADMINISTRATION SO THAT WE CAN COME UP WITH MUTUAL SOLUTIONS. IT'S BEEN A PRIVILEGE TO GET TO KNOW THESE PEOPLE AND ALSO GET TO KNOW THE ADMINISTRATORS AND HEAR THEIR SIDE OF WHAT ARE FRUSTRATING ISSUES FOR EVERYBODY. IT HAS OPENED MY EYES TO HOW DIFFICULT THEIR JOB IS AS WELL. I DON'T HAVE MUCH PREPARED BUT I'M HAPPY TO ANSWER ANY QUESTIONS THAT YOU MIGHT HAVE.

Chair Madrigal: THANK YOU.

Mr. Herron: IF I MAY MAKE ONE ADDITIONAL REMARK THAT GOES TO BOTH OF THE TOPICS, THE TOPICS THAT BOTH OF THESE FOLKS RAISED. ONE OF THE ADDITIONAL THINGS WE DID NEGOTIATE THAT I THINK IS GOING TO BE CONSTRUCTIVE, EMPLOYMENT RELATION COMMITTEE SETTING WHICH THERE WILL BE REGULAR MEETINGS AND DISCUSSIONS BETWEEN REPRESENTATIVES OF THE PHYSICIANS AND REPRESENTATIVES OF MANAGEMENT AND THAT GOES TO THE ISSUE OF THE SYSTEMIZATION -- STUMBLING OVER THAT WORD -- OF MEANS FOR TALKING ABOUT ISSUES AS THEY COME UP. I THINK THAT WILL BE A POSITIVE AND A CONSTRUCTIVE FORUM FOR ONGOING CONVERSATION.

Chair Madrigal: ANY QUESTIONS?

Commissioner Smith: I HAVE A QUESTION. WHEN DOES THAT AGREEMENT BECOME EFFECTIVE?

Mr. Herron: UPON RATIFICATION BY THE BOARD.

Commissioner Smith: OKAY.

Mr. Herron: THERE ARE SOME ELEMENTS OF IT APPLIED RETROACTIVELY. BUT NOT EVERYTHING IS APPLIED RETROACTIVELY. AND SO IT'S EFFECTIVE UPON RATIFICATION AND EXECUTION AND THE PORTIONS --

Commissioner Smith: SO AFTER WE VOTE TODAY, WHICH WAY WE VOTE, IT WILL DETERMINE IF THE AGREEMENT IS EFFECTIVE TODAY?

Mr. Herron: CORRECT.

Commissioner Smith: AND SO WHAT WILL HAPPEN, YOU WILL GO BACK AND PAY THEM BACK PAY OR JUST GOING FORWARD?

Mr. Herron: FOR THOSE FINANCIAL ELEMENTS THAT ARE RETROACTIVE, YES, IT WILL BE APPLIED RETROACTIVELY EXACTLY.

Commissioner Smith: GREAT. THANK YOU.

Chair Madrigal: COMMISSIONER SHIPRACK.

Commissioner Shiprack: I HAVE A COMMENT. I APPRECIATE WHAT YOU HAVE TO SAY ABOUT THE REMARKABLE CALIBRE OF PEOPLE WHO WORK FOR MULTNOMAH COUNTY, AND THE VALUE OF A UNION WORK FORCE, WHICH IS SOMETHING THAT WE ACKNOWLEDGE FROM THE DAIS ON A REGULAR BASIS. LABOR UNIONS REPRESENT WORKING PEOPLE, INCLUDING A VERY HIGHLY TRAINED AND VERY HIGHLY RESPECTED WORK FORCE OF PHYSICIANS, AND OUR WORK FORCE AT MULTNOMAH COUNTY IS DEDICATED TO SERVING THE PUBLIC AND TO PROVIDING THE HIGHEST LEVEL OF SERVICE TO THE PUBLIC. AND IT TRULY IS INSPIRING TO I THINK ALL OF US, AND I REALLY APPRECIATE THAT ALL OF YOU HAVE UNDERLINED THE CALIBER OF OUR WORK FORCE, AS WELL AS THE VALUE THAT WE PLACE ON MAKING SURE THAT THE WORK FORCE IS TREATED FAIRLY HERE. SO, THANK YOU FOR THAT.

Chair Madrigal: I'D LIKE TO SAY THANK YOU TOO. THIS IS A TOUGH ONE. IT ALWAYS IS WHEN THERE IS A NEW UNIT FORMING AND I JUST REALLY APPRECIATE HOW EVERYONE KIND OF CAME TO THE MIDDLE, AND CAME UP WITH WHAT I THINK IS A REALLY GREAT CONTRACT. SO, THANK YOU FOR YOUR WORK, AND YOU, BRYAN, I KNOW THIS IS TOUGH, AND, STEVE, OF COURSE. BUT YOU ALL MADE IT HAPPEN. SO, THANK YOU. OKAY. ALL IN FAVOR VOTE AYE.

[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? THE AGREEMENT IS APPROVED.

Mr. Herron: THANK YOU.

R.3 NOTICE OF INTENT for the \$625,000 Drug Free Communities Grant to Support Coalition-led Youth Substance Abuse Prevention Work. Presenter: Devarshi Bajpai, Addiction Services Manager & Sondra Storm, Strategic Prevention Framework State Incentive Grant Coordinator (SPF SIG), MHASD.

Chair Madrigal: MAY I HAVE A MOTION.

Commissioner Smith: SO MOVED.

Commissioner Wendt: SECOND.

Chair Madrigal: COMMISSIONER SMITH MOVES AND COMMISSIONER WENDT SECONDS APPROVAL OF R-3. GOOD MORNING.

Mr. Bajpai: GOOD MORNING. MY NAME IS DEVARSHI BAJPAI AND WITH ME IS SONDRA

STORM, OUR SPF SIG COORDINATOR, I'LL TALK ABOUT A LOT OF ACRONYMS IN THE NEXT TWO MINUTES. THIS IS A STRATEGIC PREVENTION FRAMEWORK STATE INCENTIVE GRANT THAT THE STATE GOT AND WAS FUNNELED TO US TO CREATE A COALITION TO LOOK AT UNDERAGE HEAVY DRINKING AND BINGE DRINKING IN DOWNTOWN AND AT THE COLLEGES. THE -- THAT WAS A PROGRAM THAT STARTED IN 2011, AND HAS HELPED CREATE THE SAFE NEIGHBORHOODS ADVOCACY PARTNERSHIP, SNAP, ANOTHER ACRONYM. SO, THAT GRANT WILL END NEXT YEAR,

THE FEDERAL GRANT. AND THE PARTNERSHIP IS LOOKING AT HOW THEY'RE GOING TO MOVE FORWARD FROM HERE ON. AND WHAT WE'RE ASKING FOR HERE TODAY IS AN APPROVAL TO APPLY FOR A GRANT FOR A DRUG-FREE COMMUNITY GRANT. THAT WILL CHANGE THE -- IT WILL BROADEN THE FOCUS OF THIS COALITION TO LOOK AT UNDERAGE DRINKING, UNDER 18, IN THE DOWNTOWN AREA, AND EXPAND IT A LITTLE BIT. SO IT IS GOING TO COVER A SUBSTANTIAL PORTION OF THE CENTRAL PART OF THE COUNTY. THERE ARE OTHER COALITIONS THAT ARE FOCUSED ON OTHER PARTS OF THE COUNTY. THIS IS A FIVE-YEAR GRANT, \$125,000 PER YEAR. POTENTIALLY UP TO 10 YEARS. ANOTHER PROCESS TO GET THAT. OPENS THE DOOR TO OTHER GRANTS. THIS GRANT IS DUE NEXT WEDNESDAY. AND WE'RE HERE TO SEEK APPROVAL FOR IT.

Chair Madrigal: GREAT. ANY QUESTIONS?

Vice-Chair McKeel: I HAVE A QUESTION.

Chair Madrigal: COMMISSIONER McKEEL.

Vice-Chair McKeel: THANK YOU. YOU SAID THIS GRANT IS SPECIFIC TO DOWNTOWN PORTLAND OR THE PORTLAND CENTRAL DISTRICT, CORRECT?

Mr. Bajpai: CORRECT.

Vice-Chair McKeel: AND YOU SAID THERE WERE OTHER COALITIONS THAT WORK IN OTHER PARTS OF THE CITY, IS -- OR THE COUNTY, I'M LOOKING COUNTY-WIDE STILL.

Mr. Bajpai: YES, THE MAIN ONE IS THE EAST PORTLAND COALITION. THEY'RE ALSO LOOKING AT APPLYING FOR THIS GRANT. THERE IS NO COMPETITION BETWEEN -- AN AREA CAN GET MULTIPLE GRANTS. WE'RE SUPPORTING THEM.

Vice-Chair McKeel: ARE THERE SOME THINGS WE LEARN FROM THIS GRANT THAT WE CAN MOVE TO OTHER PARTS OF THE COUNTY?

Mr. Bajpai: IT'S REALLY INTERESTING PARTNERSHIP, 60 MEMBERS TO THE PARTNERSHIP, INCLUDING OLCC, THE CITY POLICE, THE NEIGHBORHOOD, and OFFICE OF NEIGHBORHOOD INVOLVEMENT. A NUMBER OF AGENCIES. THE WAY THAT WE HAVE ALL WORKED TOGETHER I THINK IS A GOOD MODEL FOR OTHER AREAS WHERE WE CAN WORK TOGETHER WITH OTHER GOVERNMENT AGENCIES, AND THE PRIVATE SECTOR, TOO.

Vice-Chair McKeel: THANK YOU.

Commissioner Smith: I HAVE ONE QUESTION. IN REGARD TO THE GRANT COALITION, ARE WE APPLYING FOR IT ON BEHALF OF THEM OR ARE THEY PARTNERS?

Mr. Bajpai: WE ARE APPLYING TO BE ABLE TO COORDINATE THAT COALITION. SONDRRA --

Commissioner Smith: THEN WE ARE THE PRIMARY GRANTEE?

Mr. Bajpai: THAT'S CORRECT.

Commissioner Smith: AND THEY'RE OUR PARTNERS? WE ARE GOING TO WORK WITH THEM IF FUNDED?

Mr. Bajpai: ABSOLUTELY.

Commissioner Smith: THANK YOU.

Commissioner Wendt: CAN YOU TALK ABOUT THE ROLE OF YOUTH AND WHAT THEIR ROLE IS IN THIS PARTNERSHIP?

Mr. Bajpai: UP UNTIL NOW, THE GRANTS HAVE BEEN FOCUSED ON 18 TO 25-YEAR-OLDS. A COUPLE OF COLLEGE STUDENTS HAVE BEEN INVOLVED HELPING TO DO SURVEYS AND BEING INVOLVED IN THE STEERING COMMITTEE OF THE PARTNERSHIP. THE BROADEN FOCUSED TO UNDERAGE DRINKING UNDER AGE 18, WILL PUT US IN A POSITION TO TRY TO RECRUIT YOUNGER PEOPLE TO BE PART OF THIS AS WELL.

Ms. Storm: WE RECENTLY GOT A GRANT FROM OHA, WE GOT A \$50,000 GRANT SPECIFICALLY FOR THE PURPOSE, RECOGNIZING THAT AS WE BROADEN THE FOCUS, WE NEED TO BROADEN THE YOUTH VOICE IN TERMS OF THE YOUTH-SPECIFIC ISSUES. WE FOUND THERE IS A QUITE A BIT OF OVERLAP IN THE THINKING OF THE HIGH-RISK DRINKING 18-25. ISSUES THAT WE HAVE BEEN EXPLORING, IT IS ABOUT GETTING MORE INPUT FROM YOUTH AND INCLUDING THEM MORE.

Commissioner Wendt: THANKS.

Chair Madrigal: ANY ADDITIONAL QUESTIONS?

ALL IN FAVOR VOTE AYE.

[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? NOTICE OF INTENT IS APPROVED.

Mr. Bajpai: THANK YOU.

R.4 Proclaiming March 14-18, 2014 to be Lesbian, Gay, Bisexual and Transgender (LGBT) Health Awareness Week in Multnomah County, Oregon. Sponsor: Commissioner Judy Shiprack, D-3. Presenters: Dayna Morrison, Coordinator of the LGTBQ Health Coalition of the Columbia-Willamette & Tash Shatz, Basic Rights Oregon.

Chair Madrigal: MAY I HAVE A MOTION?

Commissioner Shiprack: SO MOVED?

Commissioner Wendt: SECOND.

Chair Madrigal: COMMISSIONER SHIPRACK MOVES AND COMMISSIONER WENDT SECONDS APPROVAL OF R-4. COMMISSIONER SHIPRACK.

Commissioner Shiprack: THANK YOU, CHAIR MADRIGAL. I'M PLEASED TO BRING FORWARD THIS PROCLAMATION TODAY. THIS IS LGBT HEALTH AWARENESS WEEK, AND IT IS A TIME TO BRING ATTENTION TO THE DEVASTATING CYCLE OF DISCRIMINATION AND HEALTH DISPARITIES THAT AFFECT LESBIAN, GAY, BISEXUAL AND TRANSGENDER PEOPLE. LGBT PEOPLE ENCOUNTER DISCRIMINATION IN EMPLOYMENT, RELATIONSHIP RECOGNITION, AND INSURANCE COVERAGE ON A REGULAR BASIS. THEY'RE LESS LIKELY TO BE ABLE TO AFFORD VITAL HEALTH CARE THAN THEIR STRAIGHT AND NON-TRANSGENDER NEIGHBORS. AND FOR LGBT PEOPLE OF COLOR, BARRIERS TO CARE AND HEALTH DISPARITIES ARE EVEN GREATER. EARLIER THIS WEEK, SECRETARY KATHLEEN SEBELIUS OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES RELEASED A STATEMENT FOR LGBT HEALTH AWARENESS WEEK THAT I'M GOING TO QUOTE. LGBT AMERICANS HAVE EXPERIENCED AND CONTINUE TO EXPERIENCE HEALTH DISPARITIES AND ARE MORE LIKELY THAN OTHER AMERICANS TO BE UNINSURED OR UNDER-INSURED. NOW BECAUSE OF THE AFFORDABLE CARE ACT, OUR MAJOR NATIONAL HEALTH SURVEYS ARE BEGINNING TO INCLUDE DATA ON LGBT POPULATIONS. THIS WILL GIVE US THE INFORMATION WE NEED TO TARGET AND REDUCE DISPARITIES AMONG THIS GROUP GOING FORWARD. WE HAVE ALSO FORMED AN INTERNAL WORKING GROUP TO ENSURE WE'RE DEVELOPING AND COORDINATING POLICIES TARGETED AND INCREASING ACCESS TO CARE FOR LGBT AMERICANS, AND ADDRESSING THEIR SPECIAL HEALTH CARE NEEDS. SO, I PROBABLY HAVE GONE WAY OVERBOARD IN SETTING THE STAGE FOR OUR PRIMARY PRESENTERS TODAY. I'M GOING TO HAND OVER THE TALKING STICK TO YOU. WELCOME.

Ms. Morrison: THANK YOU SO MUCH FOR HAVING US, COMMISSIONER SHIPRACK AND THE REST OF THE MULTNOMAH COUNTY BOARD. WE ARE SO FORTUNATE TO BE HERE. I LOVED YOUR INTRODUCTION. IT ADDS A GREAT CONTEXT TO THE SLIDES THAT I HAVE, WHICH HIGHLIGHT SOME OF THE DATA AND THE LIMITATIONS TO THE DATA THAT WE HAVE AVAILABLE TO US FOR MULTNOMAH COUNTY. AND SO I REALLY APPRECIATE THAT INTRO AS FAR AS WHERE THE FUTURE IS FOR LGBT HEALTH. THERE IS A LONG ROAD AHEAD AND BRINGING AWARENESS IS THE FIRST STEP IN MOVING FORWARD. THANK YOU FOR THAT AND THANK YOU FOR THIS OPPORTUNITY. I'M DAYNA MORRISON, WITH ME TODAY I HAVE TASH SHATZ FROM

BASIC RIGHT OREGON AND TOGETHER I HOPE WE CAN BRING ATTENTION TO WHAT IS GOING ON AS WELL AS SOME OF THE SUCCESSES. WE ARE FORTUNATE TO LIVE IN SUCH AN AMAZING COUNTY WHERE WE HAVE POLITICAL AND LEADERSHIP SUPPORT OF OUR COMMUNITY AND REALLY PLACING OURSELVES ON A NATIONAL STAGE FOR BEING SUCCESSFUL AND IN DOING INTERVENTIONS. THANK YOU FOR THAT AND ALL OF YOUR HARD WORK. ONE THING I LIKE TO DO AS A DISCLAIMER WHEN I TALK, THE LGBTQ COMMUNITY IS A BROAD AND DIVERSE COMMUNITY AND WE'RE ALL THROWN TOGETHER UNDER A BIG UMBRELLA.

HEALTH RISKS -- AS I GO THROUGH DATA, I DIDN'T PRESENT ANY DATA TODAY THAT IS LGBTQ EVERYONE. I'M LOOKING AT SOME OF THE SPECIFIC SUB-POPULATIONS, BECAUSE THAT IS WHERE WE REALLY SEE THE HEALTH DISPARITIES IS WHEN WE LOOK AT AND ARE ABLE TO TEASE APART WHAT IS GOING ON IN THE COMMUNITY. HEALTH COALITION WORKED CLOSELY WITH THE OREGON HEALTH AUTHORITY AND PROGRAM DESIGN EVALUATION SERVICES, WITH A GRANT NORTHWEST HEALTH FOUNDATION TO LOOK AT THE MINUTIA -- THAT IS WHERE THE DATA COME FROM. I'M STARTING WITH YOUTH. BECAUSE I ALWAYS LIKE TO START WITH WHERE THERE IS A LOT OF HOPE FOR CHANGE. UNFORTUNATELY THE DATA ARE NOT VERY ENCOURAGING. AND IN ALL OF THE POPULATIONS THAT WE LOOKED AT WHEN WE WERE LOOKING AT SUB POPULATIONS, WE DID NOT SEE ANYTHING THAT LGBTQ WERE DOING BETTER THAN THEIR STRAIGHT COUNTERPARTS. WHERE IT SAYS THE SAME, THAT MEANS WE DID NOT SEE A SIGNIFICANT DIFFERENCE. GENERALLY SPEAKING, A LOT OF IT WAS WORSE. PLEASE NOTE THE DATA FROM 2006 TO 2009, AND IT IS OREGON HEALTHY TEENS DATA AND DATA COLLECTED FROM 11th GRADERS. WHEN YOU LOOK AT THE STATISTIC, ONE IN FIVE LGBTQ YOUTH IN OREGON HAVE ATTEMPTED SUICIDE, COMPARED TO ONE IN 22 STRAIGHT YOUTH. THAT IS FROM COMBINED DATA BUT ONLY LOOKING AT 11th GRADERS. THAT'S A HUGE CONCERN FOR OUR COMMUNITY TO BE THINKING ABOUT WHERE OUR YOUTH ARE COMING FROM. WE LOOK AT HARASSMENT IN SCHOOL. ONE IN TWO LGBTQ YOUTH HARASSED IN SCHOOL -- AND THREE TIMES AS MANY MISSED SCHOOL BECAUSE THEY FELT UNSAFE. THAT IS SOMETHING TO PAY ATTENTION TO. NOTICE I'M NOT TALKING ABOUT TRANSGENDER YOUTH IN THIS SLIDE AS WE DON'T ASK GENDER QUESTIONS ON THE OREGON HEALTHY TEENS SURVEY. I CAN TALK ABOUT DATA FOREVER. I WILL GO THROUGH QUICK HIGHLIGHTS. FEEL FREE TO ASK QUESTIONS. THE TOP TABLE IS LOOKING AT OUR OLDER LGB ADULTS. THERE IS NO Q OR T, THIS IS AGAIN DATA LIMITATIONS. GENDER IS ASSIGNED BY THE SOUND OF YOUR VOICE, BEHAVIOR RISK FACTOR SURVEILLANCE SYSTEM. ALL OF THESE TWO TABLES DON'T INCLUDE GENDER AND WE MAY OR MAY NOT BE GETTING EVERYONE COVERED AS FAR AS WHO IS BEING ASKED QUESTIONS. A LOT OF TIMES YOU WON'T BE ASKED ABOUT A PAP SMEAR IF YOU SOUND MALE. THOSE QUESTIONS DON'T GET ASKED BASED OFF OF THE SOUND OF YOUR VOICE. IT IS A TELEPHONE-BASED SURVEY. IT IS IMPORTANT TO NOTE THAT LOOKING AT OLDER COMMUNITY MEMBERS, WE WERE NOT ABLE TO RUN DATA FOR OLDER POPULATIONS. IT IS LIMITED TO 55-70-YEAR-OLDS, AND THAT IS BECAUSE THERE WEREN'T ENOUGH PEOPLE OVER THE AGE OF 70 ANSWERING OUR OLDER OREGONIANS DATA AND A LOT OF THAT IS DUE TO WE THINK THE IMPACT OF HIV ON THE COMMUNITY AND THERE JUST AREN'T THAT MANY OLDER ADULTS LIVING THAT ARE IDENTIFIED AS MEMBERS OF THE COMMUNITY. AND SOME OF THAT HAS TO DO WITH SOME OF THE HEALTH RISKS THAT THEY'RE FACING. INCLUDING MENTAL HEALTH, ASTHMA, FOOD

INSECURITY, SEXUAL ASSAULT, AND INTIMATE PARTNER VIOLENCE. ONE THING THAT -- SCREENING FOR INTIMATE PARTNER VIOLENCE OR DOMESTIC VIOLENCE, YOUNGER HETEROSEXUAL COUPLES, AND THEY DON'T EVEN ASK THE QUESTION TO OUR COMMUNITY MEMBERS. ARE YOU EXPERIENCING IT? AND SADLY OUR COMMUNITY IS MORE LIKELY TO EXPERIENCE THIS THAN PARTNER VIOLENCE THAN THE HETEROSEXUAL COMMUNITY. AND THIS IS TRUE NOT ONLY FOR THE OLDER ADULTS, BUT COMMUNITY IN GENERAL. AND AS YOU CAN SEE ON THE LOWER TABLE, LGB PEOPLE OF COLOR AS WELL. THAT IS LGB PEOPLE OF COLOR, VERSUS THOSE WHO IDENTIFY AS WHITE, AND THAT'S BECAUSE WE DON'T ASK SEXUAL ORIENTATION QUESTIONS ON OUR RACE OVER SAMPLE DATA IN THE STATE OF OREGON.

THERE IS A LOT OF SIMILARITIES IN WHERE THE SIGNIFICANT HEALTH DISPARITIES LIE AND WHERE WE HAVE A LOT OF CHALLENGES IN THE COMMUNITY AND A LOT OF LACK OF AWARENESS ON HOW TO OR WHAT TO SCREEN FOR TO HELP PREVENT SOME OF THIS. SOME OF THE REASONS THAT YOU SEE FLU SHOTS AND HIV TESTING BEING AS SOMETHING THAT THE COMMUNITY IS DOING BETTER, THERE ARE TARGETED INTERVENTIONS TO ENGAGE OUR COMMUNITY IN TESTING AND WE HAVE SEEN THAT WITH THE HIV POSITIVE POPULATIONS, THERE IS NO DECREASE IN LIFE EXPECTANCY BECAUSE THEY TEND TO BE SO ENGAGED IN HEALTH CARE THAT THEY GET A LOT MORE SERVICES AND MORE PREVENTATIVE SCREENING THAN IF THEY ARE HIV POSITIVE. THAT IS WHERE YOU GET THIS BALANCING ACT. . TRANSGENDER DATA, WE DON'T ASK GENDER ON A LOT OF THE STATE BASED SURVEYS. THIS IS FROM THE 2009 SPEAK OUT SURVEY CONDUCTED BY MULTNOMAH COUNTY AS WELL AS A SURVEY BY THE TRANSHEALTH EDUCATION INITIATIVE, WHICH COLLECTED QUALITATIVE RESEARCH. A QUOTE, I WAS DENIED -- EVEN THOUGH THE REDUCTION WAS PROVEN MEDICALLY NECESSARY, I WAS DECLINED BECAUSE MY GENDER IDENTITY WAS TRANSGENDER AND -- IT IS A LOT OF LACK OF INSURANCE UNDERSTANDING, AND I THINK THAT WITH HEALTH TRANSFORMATION, THERE HAS BEEN A LOT OF GREAT PROGRESS IN THE STATE LOOKING AT WHAT WE NEED TO START COVERING, BUT THERE IS ALSO A LONG ROAD. I WANT TO BRING ATTENTION TO SEVEN OUT OF 10 TRANS AND GENDER -- HAVE HEALTH INSURANCE, 11% HAVE ACCESS TO HEALTH INSURANCE THAT COVER TRANSGENDER SPECIFIC HEALTH CARE. THEY MAY HAVE ACCESS TO HEALTH CARE BUT ARE NOT ABLE TO GET THE CARE THEY NEED TO THRIVE. I WILL TURN IT OVER TO TASH TO BRING ATTENTION TO SOME OF THE SUCCESSES IN MULTNOMAH COUNTY OVER THE LAST YEAR, YEAR AND A HALF AS FAR AS BRINGING MORE ATTENTION TO THIS ISSUE AND MAKING PROGRESS TOWARDS HEALTH EQUITY.

Tash: THANK YOU, COMMISSIONERS. MY NAME IS TASH SHATZ AND I AM THE INTERIM PROGRAM DIRECTOR WITH BASIC RIGHTS OREGON WORKING WITH THE TRANSGENDER JUSTICE AND JUSTICE PROGRAMS. I SAW MANY OF YOU HERE WHEN WE WERE TALKING ABOUT GENDER NEUTRAL RESTROOMS. AND THE COUNTY BREAKING GROUND THERE. I WANT TO GIVE CREDIT WHERE CREDIT IS DUE TO CASEY. MULTNOMAH COUNTY SPEAR-HEADED THAT WHICH I THINK YOU ALL HAVE HEARD ABOUT WHAT AN ISSUE OF SAFETY THAT IS FOR TRANSGENDER FOLKS AND FOR MANY OTHER PEOPLE, PEOPLE WHO HAVE ASSISTANCE, SUFFERING WITH DISABILITY, LOTS OF DIFFERENT REASONS, BUT PARTICULARLY FOR THE TRANSGENDER COMMUNITY THIS WAS A REALLY BIG VICTORY AND WE

WERE PROUD TO SUPPORT AS BASIC RIGHTS OREGON AS WELL AS -- AND THE -- IT WAS GREAT TO SUPPORT THE EFFORTS. TRANSACTIVE GENDER CENTER WAS ABLE TO WORK WITH BASIC RIGHTS OREGON TO SECURE COVERAGE IN THE OREGON HEALTH PLAN FOR YOUTH TO ACCESS PUBERTY SUPPRESSING TREATMENTS, FOR TRANSGENDER YOUTH TO HAVE THAT OPPORTUNITY TO SUPPRESS PUBERTY AND BE ABLE TO MAKE MEDICAL DECISIONS WITH THEIR PHYSICIANS AND PARENTS, AS WELL AS EXPANDING MENTAL HEALTH ACCESS THROUGH THE OREGON HEALTH PLAN FOR BOTH YOUTH AND ADULTS WHO ARE TRANSGENDER. AND BASIC RIGHTS WAS ABLE TO WORK OUT A FEW GREAT ISSUES AS WELL. BIRTH CERTIFICATE CHANGES HAPPENED LAST YEAR IN THE LEGISLATURE.

TRANSGENDER OREGONIANS MAY CHANGE OUR BIRTH CERTIFICATES WITHOUT HAVING TO PROVE THAT WE HAVE HAD SURGICAL CARE, AND USE DOCUMENTATION FROM A PHYSICIAN STATING THAT WE HAVE HAD APPROPRIATE CARE WHATEVER THAT LOOKS LIKE BETWEEN US AND OUR DOCTOR. BARRIERS TO HEALTH CARE WORKING WITH THE INSURANCE DIVISION AND -- LOTS OF ACRONYMS. WORKING WITH THE INSURANCE DIVISION TO CLARIFY THAT THE STATE'S NONDISCRIMINATION LAW IS APPLICABLE TO INSURANCE TRANSGENDER OREGONIANS OUGHT TO HAVE ACCESS TO THE SAME TYPE OF COVERAGE -- A LOT OF DETAILS THERE. IT IS ABOUT ONE THIRD OF OREGONIANS WHO ARE WORKING IN THE STATE AND ACCESSING INSURANCE THROUGH THEIR WORK BECAUSE OF THE AFFORDABLE CARE ACT AND OTHER EXPANSIONS TO HEALTH CARE ACCESS. THIS WILL HAVE FARTHER REACHING IMPACTS, SO THAT'S VERY EXCITING. AND WE ALSO ABLE TO WORK WITH OHSU TOWARD THE END OF 2012 TO REMOVE EXCLUSIONS FOR THEIR EMPLOYEES, AS ONE OF THE LARGEST EMPLOYERS IN PORTLAND AND THE STATE OF OREGON AND WORLDWIDE RECOGNIZED MEDICAL SCHOOL, THIS WAS A REALLY AMAZING PROGRESS AND OHSU IS CONTINUING TO REALLY BE ON THE CUTTING EDGE OF NOT ONLY PROVIDING CARE TO THEIR EMPLOYEES THAT IS INCLUSIVE BUT ALSO LOOKING TOWARDS HAVING MEET SPECIFICALLY THE NEEDS OF THE TRANSGENDER COMMUNITY OF OREGON THROUGH THE HEALTH PROGRAMMING SO IT HAS BEEN A CONTINUING EFFORT.

A COUPLE OF PUBLICATIONS TO DRAW YOUR ATTENTION TO RELATING TO LGBTQ HEALTH EQUITY. BENEFITS OF EQUALITY, WHICH IS REALLY A GUIDE THAT BASIC RIGHTS HAS PUT TOGETHER TWO EDITIONS OF, HELPING EVERYONE FROM PEOPLE WHO ARE WORKING IN HR TO PEOPLE WHO ARE EMPLOYEES, TO FOLKS WHO ARE IN COLLEGES AND UNIVERSITIES TO UNDERSTAND THEIR HEALTH BENEFITS AND HOW TO ADVOCATE FOR TRANSGENDER HEALTH BENEFITS, HOW TO UNDERSTAND THE NATIONAL RECOGNITION OF TRANSGENDER HEALTH NEEDS. ALSO THE TRIBAL EQUITY TOOL KIT AMAZING PARTNERSHIP, NATIVE AMERICAN PROGRAM OF LEGAL AIDS SERVICES IN OREGON, INDIGENOUS WAYS OF KNOW, LEWIS AND CLARK, BASIC RIGHTS OREGON -- TO NAME A FEW. A LOT OF FOLKS COLLABORATED AND THIS IS, AGAIN, THE SECOND EDITION OF A TOOL KIT AIMED AT TRIBAL AND NATIVE POPULATIONS. THIS WAS SPECIFICALLY CREATED IN OREGON, BUT IT CAN BE APPLICABLE ACROSS -- ACROSS THE COUNTRY. A LOT OF NATIONAL RECOGNITION OF THIS. REALLY ABOUT LGBTQ FOLKS, TO SPARE INDIVIDUALS BEING FULLY INTEGRATED AND RECOGNIZED WITHIN THE TRIBAL COMMUNITIES SO THIS IS REALLY A GROUNDBREAKING CREATION. I WANT TO GIVE MAJOR CREDIT TO INDIGENOUS WAYS OF KNOWING FOR THAT. URBAN LEAGUE AND PORTLAND P-

FLAG CHAPTER CREATED THE LIFT EVERY VOICE REPORT ON THE BLACK LGBTQ OREGONIAN EXPERIENCE. REALLY LOOKING AT DATA SPECIFIC TO BLACK LGBTQ OREGONIANS AND REALLY LOOKING AT THE INTERSECTIONS IN BETWEEN RACISM, HOMOPHOBIA AND TRANSPHOBIA THAT FOLKS EXPERIENCE AND HOW THAT IMPACTS EVERY AREA OF THEIR LIVES. SO, THERE'S SOME GREAT RESOURCES AND JUST FURTHER AMAZING PROOF THAT OREGON IS REALLY ON THE LEADING EDGE FOR WHAT'S HAPPENING FOR LGBTQ HEALTH.

Chair Madrigal: THANK YOU.

Ms. Morrison: THANK YOU, TASH. ONE OF THE OTHER EVENTS THAT THE LGBTQ COALITION OF THE COLUMBIA WILLAMETTE IS NOW ORGANIZING FOR LGBTQ AWARENESS WEEK IS THE MEANINGFUL CARE CONFERENCE. AND I'M SURE MANY OF YOU HAVE HEARD OF IT BEFORE, AS IT'S SOMETHING THAT WAS STARTED BY MULTNOMAH COUNTY IN 2007 AND I BELIEVE THERE WAS 186 FOLKS IN ATTENDANCE AT THE KAISER TOWN HALL. MULTNOMAH COUNTY RAN THE CONFERENCE FOR THREE YEARS AND THEN TOOK A BREAK. WE ARE NOW DOING THE 2014. WE'VE DECIDED TO DO IT EVERY TWO YEARS TO MEET NEEDS AND GIVE A CHANCE FOR OUR SUCCESSES TO BE KNOWN. THE MEANINGFUL CARE CONFERENCE WILL HAVE A PRESENTATION FROM LIFT EVERY VOICE AND WE'LL HAVE PRESENTATIONS THAT LOOK AT PRESCRIBING GUIDELINES FOR PROVIDERS FOR HORMONE SUPPRESSION AND THINGS THAT ARE BASED OFF THE SUCCESSES OF OUR COMMUNITY PARTNERS AND SO WE WOULD LIVE TO GIVE ENOUGH TIME FOR THAT TO HAPPEN SO THAT WE CAN GET SOME OF THAT BUT WE ARE GETTING MUCH MORE NATIONAL RECOGNITION AND HAVE TWO NATIONAL LEVEL KEYNOTES THIS YEAR, STEVEN BARRIOS, A LEADER IN THE TWO SPIRIT COMMUNITY OUT OF MONTANA, WHO'S BEEN WORKING IN HIV AND SUBSTANCE ABUSE PREVENTION SERVICES IN THE NORTHWEST AND WILL BE OUR LUNCHTIME KEYNOTE. AND WE ARE FORTUNATE ENOUGH TO HAVE DR. SCOUT, WHO WAS VERY ACTIVE IN THE FORMING OF THE LGBT TOBACCO CONTROL NETWORK OVER A DECADE AGO BUT HAS BEEN A LEADER, BRINGING ATTENTION EVEN THROUGH HIS HUFFINGTON POST BLOG ABOUT THE ISSUES FACING OUR COMMUNITY.

WE FEEL REALLY FORTUNATE TO BRING ATTENTION TO OUR NEEDS, WHERE IT STARTED AT MULTNOMAH COUNTY AND REALLY APPRECIATE THE LEADERSHIP SHOWN BY THE COUNTY TO REALLY MAKE THIS CONFERENCE HAPPEN. THIS IS THE FIRST YEAR THAT THE CONFERENCE IS COMPLETELY VOLUNTEER LED. WE HAVE NO PAID STAFF AND IT REALLY IS A GROUP OF DEDICATED COMMUNITY MEMBERS THAT ARE REALLY MAKING THIS HAPPEN AND SO I WANT TO DO A DIG SHOUT-OUT TO ALL OF OUR VOLUNTEERS THAT ARE VERY PASSIONATE TO MAKE SURE THAT THIS EFFORT CONTINUES. I WENT THROUGH THAT. ONE OF THE THINGS THAT WE'RE FOCUSING ON THIS YEAR IS THE ROLE OF PUBLIC HELP AND SYSTEMS CHANGES. THERE'S A LOT OF AMAZING PROVIDERS IN OUR COMMUNITY BUT IF YOU CAN'T GET PAST THE FRONT DESK IN DISCRIMINATION YOU MIGHT NEVER GET TO THOSE PROVIDERS AND SO LOOKING AT NOT ONLY GETTING ALL DIFFERENT LEVELS OF PROVIDERS INVOLVED IN THE CONFERENCE BUT GETTING THE HEALTH SYSTEMS THEMSELVES TO BE SUPPORTIVE OF EFFORTS THAT MAY BE ABLE TO PROVIDE LGBT CARE. WE'RE GOING TO START OUT THE PRESENTATION WITH OHSU SHARING THEIR JOURNEY TOWARDS LGTBQ COMPETENCY JOURNEY. YOU NEVER

REACH A POINT WHERE YOU FIGURE IT ALL OUT. THEY'RE GOING TO BE SHARING THAT JOURNEY AS A HUGE INSTITUTION TO REALLY MAKE THE INSTITUTIONAL CHANGE TO SUPPORT THE PROVIDERS TO PROVIDE THE CARE. THESE ARE SOME OF THE RESOURCES, THERE ARE LOTS OF RESOURCES IN OUR COUNTY OF FOLKS THAT ARE DOING THIS WORK THAT I WANTED TO BRING SOME ATTENTION TO AS WELL AS THANK FOR THEIR INVOLVEMENT IN HELPING TO ORGANIZE OR PRESENT THE CONFERENCE. AND IN THE INTEREST OF TIME I'M JUST GOING TO LEAVE IT OPEN TO QUESTIONS BUT REALLY THANK MULTNOMAH COUNTY FOR HAVING THE VISION TO START THIS PROCESS AND CONTINUE WITH US ON THIS JOURNEY.

Chair Madrigal: ANY QUESTIONS?

Commissioner Smith: I HAVE A COMMENT, CHAIR MADRIGAL.

Chair Madrigal: COMMISSIONER SMITH.

Commissioner Smith: THANK YOU, COMMISSIONER SHIPRACK, FOR BRING THIS FORWARD AND ORGANIZING THIS. THE MEANINGFUL CARE CONFERENCE FOR ME IS AN INCREDIBLE OPPORTUNITY TO EMPOWER SERVICE PROVIDERS WITH THE TOOLS THAT THEY NEED TO DELIVER THE BEST CARE TO THE LGTBQ COMMUNITY AND SERVICE PROVIDERS. OFTEN WE SPEAK ABOUT CULTURAL COMPETENCE IN THE CONTEXT OF RACE AND ETHNICITY BECAUSE WE KNOW THAT SERVICES PROVIDED WITHOUT THE FILTER OF EQUITY LEAD TO DISPARITIES THAT ECHO THROUGHOUT GENERATIONS AND THIS IS WHERE WE ARE TODAY. SO THIS IS SO HELPFUL. AND AFTER THIS PRESENTATION, I WAS THINKING, I WAS REMINDED THAT THE SAME LESSONS APPLY FOR MEMBERS OF THE LGTBQ COMMUNITY. IF WE DON'T HELP PEOPLE FEEL COMFORTABLE AND SAFE WHEN THEY SEEK SERVICES AND RESOURCES, PARTICULARLY FROM THE PUBLIC DOLLAR, THEY WON'T BE ABLE TO ACCESS THE HELP THAT THEY REALLY NEED. SO THIS IS VERY IMPORTANT. IT'S CRITICAL WORK AND THANK YOU FOR ALL THAT YOU DO.

Ms. Morrison: THANK YOU.

Chair Madrigal: COMMISSIONER MCKEEL.

Vice-Chair McKeel: I ALSO WANT TO THANK YOU FOR THIS PRESENTATION, ALL THIS WORK, COMMISSIONER SHIPRACK FOR BRINGING THIS FORWARD. YOUR DATA, IT'S AMAZING. I NOTICED THAT IT'S 2006 TO 2009. ARE YOU ABLE TO UPDATE DATA OR DO YOU SEE THAT YOU WOULD BE LOOKING AT THAT? I'M CURIOUS TO KNOW IF THERE'S BEEN SOME CHANGES.

Ms. Morrison: RIGHT, I GOT A PHONE CALL FROM KARI GREENE AT PROGRAM DESIGN EVALUATION SERVICES AT THE OREGON HEALTH AUTHORITY, AND SHE HELPED RUN ALL OF THIS DATA. SHE GOT A GRANT WITH CONJUNCTION WITH THE OREGON STATE SCHOOLS AND COMMUNITIES COALITION AND THEY NOW HAVE ANOTHER DATA SET THAT THEY'RE RELEASING SHORTLY. SHE'S LIKE, "OH, I WOULD'VE SNUCK SOME MORE DATA IN", BUT THERE WASN'T TIME IN THE PRESENTATION. SO THERE IS A 2013 REPORT, BUT A LOT OF IT, YOU'LL NOTICE WE HAVE TO COMBINE LARGE YEARS OF DATA TO GET A LARGE ENOUGH SAMPLE SIZE

TO BE ABLE TO REPORT ANYTHING. SO, THERE IS A RECENTLY GO OF THAT. A LOT OF THE RACIAL AND ETHNIC DATA WE DEAL WITH FROM THE 2008-2009 RACE OVERSAMPLES THROWN IN THERE, NOT THE RACE OVERSAMPLES BUT THAT DATA, NOW THAT WE'RE DOING THE RACE OVERSAMPLE AGAIN, THEY DID ONE I THINK IN 2012, AND I THINK THEY WERE TRYING TO ADD THE SEXUAL ORIENTATION QUESTION. WE CAN LOOK AT SPECIFIC RACE AND ETHNICITY RATHER THAN JUST LGTBQ PEOPLE OF COLOR, WHICH IS NOT THE BEST WAY TO UNDERSTAND THE DATA THAT WE'RE SEEING OTHER THAN THERE'S A PROBLEM. AND SO IT'S GOOD TO KNOW THERE'S A PROBLEM BUT IT'S NOT THE WAY THAT WE WOULD PREFER TO REPORT DATA.

Vice-Chair McKeel: THANK YOU AND I JUST, YOU KNOW, AM INTERESTED TO SEE IF THERE'S ANY AND HOPEFUL TO SEE IF THERE'S ANY CHANGES IN THE DATA WHEN WE CONTINUE TO UPDATE IT.

Ms. Morrison: I WILL FOLLOW UP WITH KARI AND ENCOURAGE THEM TO PERHAPS GIVE A PRESENTATION WHEN THEIR DATA IS IN A PRESENTABLE FORMAT.

Vice-Chair McKeel: I'M VERY PLEASED THAT OHSU HAS TAKEN SUCH A PARTNERSHIP IN THIS. I THINK THAT'S PRETTY IMPACTFUL. I THINK IT WILL BE VERY IMPACTFUL. SO GREAT, THANK YOU SO MUCH.

Ms. Morrison: THANK YOU.

Commissioner Wendt: THANK YOU, A COMMENT, I WAS THINKING DURING YOUR PRESENTATION, TO LIVE IN A COMMUNITY WHERE CLEVELAND AND GRANT HIGH SCHOOLS WERE IN A COMPETITION TO SEE WHO COULD HAVE A TRANSGENDER BATHROOM FIRST, THE YOUTH LEVEL, WANTING TO MAKE THE SCHOOL AN INVITING PLACE. SO THAT'S GREAT BUT THE DATA I WAS THINKING SIMILAR TO COMMISSIONER SHIPRACK, I'M HOPEFUL TO SEE THE NUMBERS GO DOWN AS THAT LEVEL OF ACCEPTANCE AND AWARENESS GOING UP, BUT THANK YOU FOR BRINGING IT FORWARD.

Ms. Morrison DEFINITELY AND WE, SADLY, WE DON'T OFFER THE OREGON HEALTHY TEENS SURVEY ANYMORE DUE TO LACK OF FUNDING. SO THEY GOT REALLY CREATIVE ABOUT THEIR DATA BUT IT'S NOT THE SAME POPULATION-WIDE DATA AS OREGON HEALTHY TEENS PROVIDED.

Commissioner Wendt: THANK YOU.

Commissioner Shiprack: AND THANK YOU TO MY COLLEAGUES AND TO THE PRESENTERS AND IF YOU INDULGE ME, ONE OTHER COMMENT, I WANT TO SAY THAT I APPRECIATE THAT OUR HEALTH DEPARTMENT HAS WORKED ON THIS IN THE PAST AND THAT THEY HAVE WORKED ON HOLDING THE CONFERENCE THIS YEAR AND I WAS DISAPPOINTED TO HEAR THAT THEY WEREN'T FINANCIAL PRIORITIES AND I'M DELIGHTED TO REPORT THAT MY OFFICE WILL BE A SPONSOR OF THE CONFERENCE THIS YEAR. AND IN FUTURE YEARS PERHAPS WE CAN COME BACK INTO THE HEALTH DEPARTMENT FOLD BUT IN THE MEANTIME WHAT A GREAT OPPORTUNITY FOR D-3. SO I ALSO WANT TO THANK MATTHEW LASHUA, MY CHIEF

OF STAFF, WHO WAS THERE WHEN THE MEANINGFUL CARE CONFERENCE STARTED. SO THANK YOU MATTHEW. AND IF YOU WILL INDULGE ME I'LL PROCEED THE PROCLAMATION.

[COMMISSIONER SHIPRACK READ THE PROCLAMATION INTO THE RECORD]

Chair Madrigal: ALL IN FAVOR VOTE AYE.

[UNANIMOUS AYES]

Chair Madrigal: OPPOSED? THE PROCLAMATION IS ADOPTED.

Commissioner Smith: THANK YOU.

Chair Madrigal: THANK YOU.

Ms. Morrison: THANK YOU SO MUCH FOR YOUR SUPPORT. [APPLAUSE]

BOARD COMMENT

BC.1 Opportunity as time allows, for the Commissioners to provide comment on non-agenda items.

Chair Madrigal: NOW IS THE TIME WE HAVE FOR BOARD COMMENTS ON NON-AGENDA ITEMS. DOES ANYONE HAVE AN ITEM TO DISCUSS TODAY?

Commissioner Smith: I WANTED TO REMIND FOLKS WHO ARE UNINSURED AND WHO ARE UNDERINSURED THAT THEY HAVE UNTIL MARCH 31st TO SIGN UP FOR CARE OREGON'S HEALTHCARE.

Chair Madrigal: THANK YOU. ANY OTHER ANNOUNCEMENTS? OKAY. GO FORTH, HAVE A WONDERFUL WEEKEND. THANK YOU. WE ARE ADJOURNED. [GAVEL]

ADJOURNMENT

There being no further business, the meeting was adjourned at 11:15 a.m.

This transcript was prepared by LNS Captioning and edited by the Board Clerk's office. For access to the video and/or board packet materials, please view at: http://multnomah.granicus.com/ViewPublisher.php?view_id=3

Submitted by:
Lynda J. Grow, Board Clerk and
Marina Baker, Assistant Board Clerk
Board of County Commissioners
Multnomah County