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SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

February 27, 1997 Hearing Room B

3:00PM Tapes 26 - 28

MEMBERS PRESENT:

Sen. Bill Fisher, Chair

Sen. Jeannette Hamby, Vice-Chair

Sen. Lenn Hannon

Sen. Marilyn Shannon

Sen. Susan Castillo

Sen. Thomas Wilde

MEMBER EXCUSED:

STAFF PRESENT:

Anne E. Tweedt, Administrator

Sandy Thiele-Cirka, Administrative Support

MEASURE/ISSUES HEARD:

Informational Meeting

Overview of Long Range Plan for Developmental Disability Services (Fairview Training Center)

* AFSCME

Ralph Groener

Colleen Moen

* Oregon Advocacy Center

Bob Joondeph, Director

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

Tape/#	Speaker	Comments
TAPE 26, A		
003	Chair Fisher	Calls meeting to order at 3:11pm, opens informational meeting.
<u>INFORMATIONAL MEETING</u>		
010	Bob Joondeph	Director, Oregon Advocacy Center, Portland. Submits and provides testimony (EXHIBIT A) covering litigation history of Fairview. Provides documentation indicating Fairview's inability to comply with consent decree of 1989.
086	Joondeph	Continues outlining events and legal actions taken from 1989: * Department of Justice emergency motion, June, 1990 * Department of Justice emergency motion, October, 1990 * Department of Justice Motion for Contempt, May 31, 1991
120	Joondeph	Continues with summary of August, 1994, Oregon Report conducted by advisory panel. Identifies areas of frustration that all parties experienced.

		Continues with Fairview's agreement to cooperate with report's recommendation, pp3 EXHIBIT A.
187	Chair Fisher	Questions if an attempt was made to define 'adequate'.
190	Joondeph	Responds that no definition was provided; 'adequate' was defined through the eyes of the expert doing the evaluation. Continues with ongoing problems facing Fairview while under court supervision.
252	Joondeph	Focuses on key points from HCFA survey, June 7, 1996.
306	Chair Fisher	Asks for definition of IPP.
308	Joondeph	Responds individual program plan (IPP). Continues with deficiencies noted by HCFA in 1996.
358	Joondeph	Reviews laws affecting Fairview closure. Notes ORS 427.007 establishes parameters for the state to develop community services for developmentally disabled members of the community.
400	Joondeph	Directs comments towards ORS 427.007 and 430.610.
TAPE 27, A		
010	Joondeph	Continues overview of the Fair Housing Act and the Omnibus Budget Reconciliation Act of 1987. Notes how these two pieces of legislation prohibits communities to exclude individuals with disabilities from living within their communities.
057	Joondeph	Highlights the Americans with Disabilities Act. Provides case history of how this law applies to the developmentally disabled. However, this concept has not been applied to training centers.
101	Sen. Shannon	Questions if the Martin Cottage is a legal training center.
111	Joondeph	Responds that the entire Fairview campus is classified as a training center.
116	Sen. Shannon	Comments that she questions if some of the current Fairview residents can be trained.
124	Joondeph	Responds that individuals in a smaller, more individualized environment respond better.
146	Sen. Shannon	Comments on clients with behavioral issues and how those behaviors will impact the communities.
		Responds that before individuals are placed in the community, the community setting has to have controls and supervision necessary

163	Joondeph	to accommodate specific needs. Directs comments towards the process of the Psychiatric Security Review Board and the Forensic Unit
217	Sen. Shannon	Questions how many supervisors are available in the group home setting.
218	Joondeph	Responds that it is determined individually.
219	Sen. Shannon	Responds that supervision coverage averages 2-5. Notes that this creates difficulty for 24-hour supervision.
221	Sen. Castillo	Notes that high-risk individuals have been transitioned into the community and return to Fairview because of security issues, what are the recommendations for these types of problems.
232	Joondeph	Responds that the community has adjusted to the influx of new people and the results have been good. Notes that the long range plan for closing Fairview includes regional crisis units and consultant services so that immediate problems can be addressed. These centers would provide a safe environment for clients that need to be removed from the community for everyone's safety.
285	Sen. Castillo	Comments about conflicting information the committee is receiving about care received, requests a recommendation for resolution.
296	Joondeph	Comments on his role within this issue, he's not in the position to make a recommendation.
328	Chair Fisher	Discusses the witness's representation of community based care versus direct care costs. Notes that outcomes may depend on good or bad administrations, not the wage scale.
344	Joondeph	Responds that the ultimate goal is a well-funded community system, that includes well paid employees to achieve quality services.
377	Sen. Wilde	Questions how many members make up the client care monitoring unit for the HCFA survey.
385	Joondeph	Responds that there were 3 individuals present at the exit hearing.
390	Sen. Wilde	Questions how long the surveys take and whether they are conducted randomly. How are the results determined?
394	Joondeph	Responds that a representative from state government could answer these questions better. However, from data given to witness, file samples were used to determine findings.
404	Sen. Wilde	Comments on confusion about activities that occur or do not occur at Fairview. Example: how many physical therapists are available in a group home?
		Responds that the advocacy center's concern has been that, when an individual leaves Fairview, that a comprehensive individual

422	Joondeph	plan be in place for services necessary within the community. Notes that if the plan is not completed or strongly assured, then Fairview is in violation of the consent decree.
TAPE 26, B		
014	Joondeph	Continues testimony that development of the safety portion of the long range plan is critical. Safety and adequate care for individuals has to be assured.
032	Ralph Groener	Representative, AFSCME, Council 75 of Salem. Provides personal and professional background. Comments on private and state operated group homes. Introduces witnesses testifying.
099	Kathy A. Ross	Vice-president, AFSCME, Local 1246, non-guard unit, and Fairview employee. Submits and provides personal testimony opposing the long range plan of Fairview (EXHIBIT B).
169	Ross	Continues testimony providing description of regional wages.
194	Chair Fisher	Comments that everyone involved in these hearings is welcome to participate in the process of resolution.
235	Ross	Responds that her testimony was in response to previous testimony regarding the current wages being paid in the community group homes.
247	Chair Fisher	Questions the sources used for obtaining wage information.
249	Ross	Responds that she used classified advertisements from the <u>Statesman Journal</u> and <u>The Oregonian</u> .
253	Chair Fisher	Notes that those homes that do not advertise in the newspaper might offer a different salary scale.
255	Ross	Responds in agreement.
258	Groener	Comments on employee wages in private group homes, \$6.00/hr. with no retirement benefits and minimal health insurance coverage. Comments on the union's role in this procedure.
285	Don Loving	Public Affairs Director, AFSCME, submits and provides testimony on long range plan Fairview Training Center and position of AFSCME (EXHIBIT C).
340	Loving	Continues testimony covering AFSCME position that they do not believe every MR/DD clients belong in the community.
395	Loving	Continues with primary concerns regarding the closure plan: * the plan is unclear as to what community services are available and who will provide them * questions county ability to assume MR/DD services with passage of Measure 47 and Measure 30

		<p>* the state's concept of regional centers is vague</p> <p>* the state plan has no fail-safe</p>
TAPE 27, B		
010	Loving	Continues with alternative plan proposal; opening up Fairview to provide services for the individuals and families on the wait list.
065	Loving	Comments that the state of Virginia has recently filed suit to separate the Department of Justice from its Mental Health Division. Questions why Oregon has not considered the same action.
080	Chair Fisher	Questions if Virginia was under consent decree at the time law suit was filed.
081	Loving	Responds that Department of Justice had intervened in Virginia, but the consent decree was not the same as Oregon's.
085	Chair Fisher	Comments that there were legal arguments that took place with the federal government and the Attorney General of Oregon.
104	Loving	Responds that he will provide additional information about the Virginia case. Continues offering alternative solutions, and summarizes.
145	Colleen Moen	Fairview employee, provides testimony including staff consistency, turn over rate, and quality of care. Offers statistics on Fairview's current staff experience.
196	Moen	Continues with salary schedule, starting wage \$9.09/hr to the top wage of \$11.89/hr. for direct care worker; and benefit package. Focuses on state operated group homes. AFSCME operates five group home corporations. Comments that the state operated group homes have the same difficulties accessing community services as the non-profit group homes.
250	Moen	Continues comments towards the HCFA survey of 1996. Provides explanation that requirements were not being met in the area of documentation. After the survey corrective measures were implemented, and upon the follow-up inspection, Fairview passed.
300	Moen	Continues with MR/DD individuals currently in correctional facilities. Summarizes testimony
327	Groener	Addresses being a part of the solution, being included in the process and continuing to provide quality care for the MR/DD population.
382	Chair Fisher	Comments on SB 406 and the committee process.
398	Groener	Repeats that it is their hope to be a part of the resolution process

		for Fairview.
415	Chair Fisher	Comments that if Fairview were a private facility it would have had to change a long time ago.
436	Groener	Responds that the resources available within the current Fairview staff should be turned around and utilized for those 3500 people on the wait list.
TAPE 28, A		
014	Matthew Gruber	Physician in Oregon, physician and chief medical officer at Fairview in 1976-77. Testifies that some form of Fairview is necessary for the future of Oregon
048	Gruber	Comments that direct client care was very good, but management continued the 'warehouse' philosophy.
107	Gruber	Continues testimony offering alternative plan for Fairview. Outlines other uses for Fairview that would generate revenue and reduce cost per individual. Directs the possibility that Fairview is an asset to the state, not a liability. Redesigning the present operations is necessary.
192	Gruber	Comments that Fairview can be useful for the community and the severely handicapped.
227	Chair Fisher	Comments directed to home health care/support.
250	Gruber	Responds in agreement; and states that Fairview should not be closed, but modified and redesigned.
283	Chair Fisher	Adjourns meeting 5:18pm.

Submitted By, Reviewed By,

Sandy Thiele-Cirka, Anne E. Tweedt,

Administrative Support Administrator

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EXHIBIT SUMMARY

A - Oregon Advocacy Center, Bob Joondeph, 5pp

B- Written testimony, Kathleen A. Ross, 4pp

C- Oregon AFSCME, Don Loving, 9pp
