

HOUSE COMMITTEE ON CHILDREN AND FAMILIES

January 27, 1993  
- 10

Hearing Room F 1:30 p.m.

Tapes 09

MEMBERS PRESENT: Rep. Patti Milne, Acting Chair Rep. Gail Shibley

MEMBERS EXCUSED: Rep. John Meek, Chair Rep. Lisa Naito,  
Vice-Chair

VISITING MEMBER: Rep. Ron Adams

STAFF PRESENT: Annette Price, Committee Administrator Edward C.  
Klein, Committee Assistant

INFORMATIONAL MEETING: Continuation of overview of DHR

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These minutes contain materials which paraphrase and/or summarize statements made during this session. Only text enclosed in quotation marks report a speaker's exact words. For complete contents of the proceedings, please refer to the tapes. [--- Unable To Translate Graphic ---]

TAPE 09, SIDE A

003 REP. MILNE, Acting Chair: Calls the committee to order at 1:34 p.m.

ROLL CALL: PRESENT: Adams, Shibley, Milne EXCUSED: Rep. John Meek, Rep. Lisa Naito

CONTINUATION OF OVERVIEW OF DEPARTMENT OF HUMAN RESOURCES -- EXHIBIT A

Witnesses: Kevin Concannon, Director, Department of Human Resources (DHR) Vickie Gates, DHR

013 KEVIN CONCANNON, Director, DHR: Would like to highlight some important programs we are investing in. -Medicaid is the centerpiece of the Oregon Health Care plan. -He discusses the recent Oregon Business Council study.

043 REP. SHIBLEY: Is trying to arrange for a joint briefing on the Business Council study.

CONCANNON: It is an excellent document and would be of use to this committee. -He continues discussing Medicaid. -The Oregon Health Plan is a move in the right direction. -We are making progress on access to prenatal care for poor women. -For about 35% of Oregon births, the prenatal care and delivery costs are paid for by the state Medicaid program. -For every dollar we spend we save about four or five dollars in the first five years of life. -It is an expensive program for which we're spending tens of millions of dollars. -There has been a significant increase in money for childcare; the single most expensive

elements in Oregon's welfare reform efforts. -We've made an investment on childcare in the state. -He discusses the CSD study. -The budget reflects the recommendations of that report. -We propose to have a number of functions currently provided by CSD be

contracted out to counties or other individual providers. -He discusses foster care. -He discusses the Family Unity Model. -He discusses the Juvenile Justice component of CSD. -He discusses the legislated cap for children in closed custody. -He discusses mental health. -He discusses early periodic screening, diagnosis and treatment (EPSDT). -He discusses vocational rehabilitation. -He discusses alcohol and drug programs. -We have been experimenting and doing more with organizational changes. -He refers to pages 9, 10 and 11, DHR1993-95 Governor's Budget (EXHIBIT A). -Oregon leads the nation in returning teen parents to schools. -The teenagers at most risk of having a child are those that already have a child. -Four out of five teen mothers that turn to DHR haven't finished high school. -We have very strong partnerships across the state. -There has been very little increase in AFDC in Oregon. -We work very closely with the schools that have health clinics.

TAPE 10, SIDE A

020 CONCANNON: We've revised our mission statement during the interim, to reflect the importance of having people successfully exit schools. -We very interested in expanding our relationship with schools. -School superintendents are more willing to have DHR in their schools. -We're focused on maximizing that relationship. -He continues discussing service integration sites, pages 9 to 11 (EXHIBIT A). -He discusses confidentiality. -He discusses the new confidentiality form.

103 REP. MILNE: Asks for clarification on confidentiality.

CONCANNON: Responds. -A parallel effort relates to the work going on in the Workforce Quality Council. -There's been a regulation prohibiting the use of social security numbers for school systems. -We ought to be able to easily access how children in our custody are doing in school. -He discusses new uses of technology. -He discusses electronic benefit transfer. -This would not only eliminate the use of food stamps, but also get rid of the stigma associated with using food stamps. -The banking industry is very supportive. -Several states have had pilot programs for electronic benefit transfers. -The State of Arkansas uses this technology for their Medicaid program. -He discusses the advantages of their move to the new building. -He discusses the relational data base. -It's impossible to extract vital information from our computer systems. -He expects the existence of this data base will be helpful to the Legislature.

356 REP. ADAMS: Having the caseworker in the schools is wonderful. -Is there a stigma problem for the kids?

CONCANNON: That's why we have pilot projects. -There is not total ease with additional social workers in the schools. -Being connected with the schools is less stigmatizing than going to a

state office. -CSD expressed concerns about whether the caseloads would explode. -We see more sooner, but over time there is a reduction of caseloads. -We have different pilot programs to see what works best over time.

TAPE 09, SIDE B

027 CONCANNON: It's very early in the experiment. -We're concerned about having every parent-child issue turned over to the state. -He hears from the principals that the teachers are enthusiastic about having social workers in the schools.

040 REP. ADAMS: The surge in caseloads is early intervention. -One of the problems in schools are that teachers get all of these other things that they are not trained to handle. -At least if they come to the social worker we have identification.

058 CONCANNON: Early intervention makes situations easier to resolve. -Unless we make children successful in school they will be dependant early in life. -Some of our experienced caseworkers feel we need to start with children in the third and fourth grade. -We need to keep the performance data on how the kids in foster care do in school. -It's encouraging that the schools are interested in having us.

110 REP. ADAMS: Is this a larger expense for you?

CONCANNON: Responds. -He can't give a cost structure, because it's limited to the pilot programs.

136 REP. MILNE: What's an outstation?

CONCANNON: Responds.

171 REP. MILNE: It's clear that we have reached a point of recognizing that a lot of families need services. -She has a concern that it's disruptive for a child to move in and out

of the classroom to receive social services. -How do you schedule services so it's most appropriate and beneficial to the student, without interrupting their academics? -Do you have a view of how this all works together.

210 CONCANNON: Is starting from the point of view of how we can use the resources we already have. -Higher percentages of limited state dollars are going to mandates. -We aren't expecting there to be a new wave of social service investments. -We still have a 20% to 24% dropout rate. -We're spending large amounts of money remediating. -We need to make better investments to insure better school outcomes. -To the extent we can help families, the better it is over time that they can help themselves. 255 -The direction we're moving in the schools, if successful, will move us in putting some of the resources we have in substitute care into supplementing care. -Right now students are being removed from classes to go outside of the school for services. -Services in the schools will lessen the time away from school. -Some schools don't count absences. -There is little research that speaks to absenteeism.

304 REP. MILNE: Would still like to know more of the actual day-to-day operation. -If it happens before or after school, we get into totally other issues.

318 CONCANNON: The beauty of these different models is we discover what works.

323 VICKIE GATES, DHR: We should arrange for some of the local

partners to testify before you.

332 REP. ADAMS: The thing that keeps coming to my mind is the super caseworker, who literally takes whatever comes at them. -Technology would really help them. -Do you have those caseworkers?

356 CONCANNON: We're not trying to make caseworkers that can be all things to all people. -We're talking about case managers who know how to get people access to the appropriate programs. -We have such people now and we have to support them.

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021 REP. ADAMS: Believes strongly in people being able to work where work is best for them. -He would rather have the workers where the people are. -The case manager, by definition, will end up taking risks by trying to make things work. -We go to a lot of time and effort to avoid taking risks. -How do you protect these folks while letting them be effective?

051 CONCANNON: That is one of the frustrating aspects. -It's harder for people to latch on to the concrete issues. -He has to appear before the Senate Human Resources Committee.

REP. MILNE: We'll need to have you come back.

130 REP. SHIBLEY: Has several questions she'll ask him at a later time.

REP. MILNE: Adjourns at 3:10 p.m.

Submitted by,

Reviewed by,

Edward C. Klein,

Annette Price, Committee Assistant  
Committee Administrator

EXHIBIT LOG:

A - Committee Questions and DHR, 1993-95 Governor's Budget - Kevin Concannon - 72 pages