

SECTION FOUR

ORGANIZATIONAL STRUCTURE

Assisting seniors and people with disabilities of all ages to achieve individual well-being through opportunities for community living, employment and services that promote choice, independence and dignity.



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Historical Structure of Seniors and People with Disabilities

The central office structure was formed October 1981 and consolidated the former Office of Elderly Affairs (OEA) and the Long Term Care Unit of Adult and Family Services Division (AFS). The OEA was the former State Unit on Aging, primarily responsible for administering the Older Americans Act programs and the state-funded Oregon Project Independence program, which serves persons in their homes who are considered to be at risk of institutionalization. The Long Term Care Unit of AFS was principally responsible for administration of Title XIX and Title XX programs in Long Term Care. This consolidation combined primary funding sources for service delivery to the elderly and for certain disabled persons; both community-based and long term care programs.

The structure of services for older Oregonians has evolved steadily since the mid-1970s, when Oregon implemented the nation's first state-funded supportive services program for elders—Oregon Project Independence (OPI). In 1981, the legislature created the Senior Services Division within the Department of Human Services. In 1989, the division enlarged its scope, becoming the Seniors and Disabled Services Division. In 2001 House Bill 2294, authorized the creation of multi-service teams to service clients and eliminating the Departments divisional structure with a name change to Seniors & People with Disabilities (SPD).

The State Unit on Aging

As noted in the historical structure above, the Department of Human Services (DHS), Seniors & People with Disabilities (SPD), as designated by the legislature and governor is accountable for the implementation of programs for elderly and disabled Oregonians. The State Unit on Aging (SUA), a part of SPD, is charged with purpose and responsibility of implementing Older Americans Act (OAA) programs. The SUA is responsible for each facet of administering the OAA. Examples include, but are not limited to, advocacy, outreach planning, budgeting, fund disbursement, management of information, training, monitoring of agency activities, and technical assistance.

Pursuant to the OAA, DHS must submit to the Administration on Aging a periodic state plan on aging that serves as the planning and compliance document for fulfilling its responsibilities under Title III and Title VII of the OAA

for the provision of services for older individuals in Oregon.

In its capacity as the State Unit on Aging, DHS will be the leader in aging issues on behalf of older Oregonians. In this capacity, DHS undertakes a broad range of functions, including advocacy, information and referral systems, monitoring and evaluation, planning and coordination, long-term care ombudsman, and community and interagency partnerships.

The goal of these functions is to establish, increase, and improve comprehensive and coordinated community-based systems serving elders throughout the state, in support of the efforts of older Oregonians to live safe, healthy, independent, and dignified lives.

DHS will designate Area Agencies on Aging (AAAs) to carry out programs designed to achieve this goal. DHS will ensure that the resources it makes available to the AAAs are used to carry out these crucial functions. The means used by the AAAs for these purposes will address not only remedial services but also preventive measures.

AAAs identify and prioritize activities aimed at ensuring that older Oregonians have access to, and assistance in securing and maintaining, benefits and rights. The SUA Legal Services Developer (LSD) provides technical assistance to all AAAs to ensure implementation of OAA programs. The LSD conducts *continuing education* workshops throughout the State for licensed attorneys and social service staff on multiple subjects all pertaining to older Oregonians rights. Examples are Nursing Home Rights, Housing Discrimination, Facets of Nursing Home Law and New Medicare Issues for older Oregonians.

Oregon Department of Human Services participates actively in the National Network on Aging. This network consists of all federal, state, intrastate regional, and local agencies/institutions with responsibility to implement the OAA. Within the state, it contracts with AAAs to carry out activities consistent with the state plan to effect the applicable provisions of the OAA.

Objective

The overall purpose of Seniors and People with Disabilities is to meet the individual needs of older Oregonians and those with disabilities served by the Department, through effective advocacy, planning, coordination and delivery of services. Local planning, decision-making, and implementation of a

coordinated service system are key components of this model.

Service Delivery System

Services across the Department were integrated at the local community level into Community Services providing leadership to ensure, in part, that Oregon elders receive necessary care and services at the least cost and in the best-coordinated manner, and providing appropriate services to persons with disabilities. Multi-service teams have succeeded the Department's former divisional structure. At the program administration level, there are now three program and policy units: health services; children, adult, and family services; and seniors and people with disabilities services.

DHS continues to develop resources for users and prospective users of its services. Many communities now have multiple-service offices where elders and persons with disabilities can obtain a broad range of information and access a multiplicity of services. In addition, the Department has unveiled a Network of Care website that is a statewide compendium of community services. Finally, the Department is collaborating with public and private partners to develop a statewide "211" system to quickly and easily by use of dialing a three digit number, connect the public with social service information and resources. Both of these innovations are expected to give rural and isolated elders significantly improved access to services.

In an effort to minimize and/or eliminate supplanting of pre-existing funds, DHS, through contractual requirement, asks that each AAA establish policies and procedures to accomplish program goals, including detailed annual budgets of projected revenue and expenses, a general ledger that sets forth accounting of all grant incomes, in-kind income, program income, other cash match income and related expenses by categorical grant.

Social Services Programs

The Department, or designated agency, contracts for the provision of services to Oregon's most impaired and disadvantaged elderly and physically disabled adults.

Services administered by the Department are detailed in the following categories:

Cash/Medical Assistance

The Department determines eligibility for the following programs for people who are aged and/or disabled:

- Medicaid (Title XIX), including enrollment in the Oregon Health Plan
- Food Stamps
- Oregon Supplemental Security Income Program (OSIP)

Oregonians receiving Supplemental Security Income (SSI) from the Social Security Administration are entitled to a small supplemental grant from the State and may qualify for some special needs.

General Assistance

General Assistance (GA) provides a small cash grant for disabled adults who have extremely limited resources and income, are unemployable because of disability, and are expected to qualify for Social Security Disability or Supplemental Security Income within one year.

Long Term Care Services

The Department purchases the following services on behalf of eligible persons who need Long Term Care services:

Nursing Facility Care

Nursing facility care is provided in licensed certified nursing facilities. Nursing facilities provide comprehensive care for persons who require assistance with activities of daily living and 24-hour nursing care.

Community-Based Care

Community-based care is provided in a person's own home or in a substitute home. Community-based care provides comprehensive care for persons who require assistance with activities of daily living and who may need nursing services.

In-Home Services can be provided on an hourly basis or by an attendant who lives with a client who needs 24-hour services.

Home Delivered Meals provide a nourishing meal 1-2 times a day for clients who are homebound.

Assisted Living is a licensed facility that provides home care services for persons living in individual apartments. The licensed facility has the capacity to meet unscheduled service needs, including

access to RN services, on a 24-hour basis.

Adult Foster Care provides room, board and personal assistance with activities of daily living for five or fewer unrelated persons in a licensed home.

Enhanced Residential Care provides room, board and personal assistance with activities of daily living for six or more persons in a licensed facility.

Specialized Living Facility services are provided for persons with spinal cord injuries, head injuries, or for persons with exceptional needs in independent living.

Oregon Project Independence (OPI) is a home-care program for persons 60 years of age or older or with Alzheimer's disease. The program provides home care, day care, or other approved support services that allow persons to remain in their own homes as long as possible before being admitted to a residential facility.

Personal Care is a home-care program for Medicaid eligible persons regardless of age who require relatively unskilled care.

Providence Elder Care is an inclusive program of care integrating long-term and acute care for persons at high risk of nursing facility care.

Adult Day Care/Health Services are social and health services provided in a day care setting for people at risk for nursing facility care. This service often supplements the care provided by families and informal caregivers.

Older Americans Act Programs

Older Americans Act Services are targeted to persons 60 years of age and over and are administered by the Area Agencies on Aging. A number of services are mandatory and local advisory committees determine others. Donations for services are encouraged, but not required and each AAA is required to clearly inform each recipient that there is no obligation to contribute and that the contribution is purely voluntary. Collected contributions are to be used exclusively to expand the service for which the contributions were given. To date, Oregon has chosen not to pursue the newly allowed option to collect fees for some Older Americans Act services. The State of Oregon authorizes AAAs to provide the following services:

- Social services including case management;
- Information and assistance;

- Transportation;
- Outreach;
- Legal Services Development;
- Congregate Meals which are nutritious and served at meal sites that target socially and economically disadvantaged seniors;
- Meals are supplemented with donated commodity foods or cash-in-lieu of donated foods;
- Home delivered meals for homebound seniors;
- In-home services;
 - Health promotion and disease prevention activities, including medication management services;
 - Family caregiver support services;
- The Senior Employment Program (AAAs may choose to offer Title V, but are not mandated);
- Vulnerable Elder Rights Protection Activities which include Legal Services for the Elderly, funding for the Long Term Care Ombudsman Program, insurance counseling for Seniors, and protective services activities;
- Support for coalitions that engage the business community in creating caring communities.

Area Agencies on Aging & Disability are required to outline within their Area Plans the methods used to meet service needs of low-income minority older Oregonians. Examples include ethnic mealsites, affirmative action employment plans, health promotion and disease prevention with focus upon diabetes which strikes a high number of Latinos.

Protective Services

The Department has the responsibility to protect vulnerable seniors and adults with physical disabilities. Protection activities include the following:

- Establishing standards and licensing of Long Term Care facilities including nursing facilities, residential care facilities, assisted living facilities, adult foster homes, and specialized living programs;
- Establishing standards and registration of board and room facilities, continuing care retirement communities, Alzheimer special care units, and adult day care;
- Investigating mandatory reports of nursing facility resident abuse;
- Investigating mandatory reports of elder abuse;
- Providing protective services for vulnerable adults who have been abused or who are at risk of abuse and who cannot protect themselves.

The Abuse Prevention Unit is instituted within DHS and each Type B AAA office serving older Oregonians and persons with disabilities has one or more designated and trained adult protective service staff. Type A AAA offices work closely with Adult Protective Service staff at local SPD offices and have coordinated a referral process for all possible abuse and/or neglect allegations. OAR 411-021 contains administrative rules concerning alleged elderly abuse, mandatory reporting, response, reporting systems and confidentiality. The State assures that individuals considered at-risk, for example, self-neglect has the right to refuse services if they are mentally capable of making an informed choice. Except in life-threatening instances or there is reason to believe a crime has been committed, all parties involved in the investigation process are under no authority or stipulations by the State of Oregon. Currently, DHS conducts approximately 17,000 criminal background checks per month, which includes checks for long-term care facilities, childcare providers, foster care facilities, potential adoptive parents and providers for individuals with mental health and developmental disability clients.

Abuse Prevention

Elder abuse is a multidimensional problem that impacts a large number of Oregonians each year – much of it undetected. Experts anticipate that between 1 in 5 to 1 in 14 cases of elder abuse, including physical abuse, sexual abuse, financial exploitation, neglect and abandonment go unreported each year. Governor Ted Kulongoski established the Elder Abuse Task Force in February 2004 as part of his comprehensive review of the public safety system in Oregon.

A report from the Elder Abuse Task Force¹¹ contains four key recommendations that will be pursued through administrative action in partnership with AAA's, state, local and private offices to strengthen protection for older Oregonians. These include development – by the Department of Human Services (DHS) – of a quick response process to expedite criminal background checks to reduce the current backlog of those waiting resolution of their background status. Additionally, the task force recommended that DHS strengthen guidelines to those caregivers who are hired before criminal background checks are completed so that they have closer supervision until their check is cleared. The creation of a criminal history registry by the state to immediately alert care-providers if an applicant has already been identified as someone who has a criminal record. This system would set up barriers for those that seek employment in other related care-providing fields. Renewed

training for front-line banking staff on the indicators and prevention measures regarding financial exploitation of the elderly. The development of a best practices curriculum and training video to teach proper care-giving techniques and to alert caregivers of the signs of elder abuse that might be perpetrated by others. The video will be developed in conjunction with the long-term care industry and the Home Health Care Commission.

Governor Kulongoski announced the “Oregon Elder Justice Act of 2005” which changes statutory language to better protect older Oregonians and strengthen the Elderly Persons and Persons with Disabilities Abuse Prevention Act (ORS 124.005 – 124.040) providing additional protection for older Oregonians who have been the victim of financial exploitation, theft, or physical abuse, assist in the prosecution of sexual abuse against older Oregonians including abuse as part of the statutory definition of elder abuse, and enhance the mandatory reporting law to better protect vulnerable elders.

The SUA Legal Service Developer has coordinated with the Oregon State Bar, State Attorney General’s office and the aging network to develop pro bono resources and support and published Elders’ Consumer Fraud Information.

Long Term Care Ombudsman Agency

The Oregon Long Term Care Ombudsman Office enhances the quality of life, improves the level of care, protect individual rights and promote the dignity of each Oregon resident of a nursing facility, adult foster care home, residential care facility or assisted living facility. The office investigates and resolves complaints made by or on behalf of long term care facility residents as authorized in ORS 441.100 — 441.153. Funding is provided by at least one percent of the Title III(B) of the Older Americans Act funding received by the state. A nine-member Long Term Care Advisory Committee appointed by the Governor and Legislative leaders monitors the program and advises the Governor and Legislative Assembly.

The Governor’s Office established the Long Term Care Ombudsman Office as independent from any other state agency. In 1995 the Legislative Assembly provided the Long Term Care Advisory Committee authority over Ombudsman actions. The Committee oversees the Ombudsman Program, advises the Governor and Legislative Assembly on the Ombudsman Program, and nominates Ombudsman candidates to the Governor. The Long Term Care Advisory Committee also receives complaints against an Ombudsman

designee (volunteer) and may overturn actions taken to resolve complaints in long-term care facilities.

The Long Term Care Ombudsman Office investigates and resolves complaints made by or for residents of long term care facilities regarding administrative actions that may adversely affect their health, safety, welfare or rights of older residents. Volunteer Ombudsmen are appointed to serve as local representatives of the Office in various districts in the state and monitor functions for compliance with federal, state and local agency policies and procedures that relate to long-term care facilities in the state. In addition, the Office publishes brochures and flyers, prints and posts posters, and distributes press releases to publicize the Long Term Care Ombudsman Office's services, purpose and mode of operation. The Office collaborates with agencies such as the Department of Human Services and the Board of Examiners of Nursing Home Administrators to establish a statewide system to collect, analyze and maintain for public access information on complaints and conditions in long term care facilities for the purpose of publicizing improvements and resolving significant problems.

The LTC Ombudsman Office was represented on the State Plan Advisory Committee and assurance that the special needs of older Oregonians residing in rural areas is considered and will be met. The Ombudsman Office provides advice, support and direct intervention services to friends and relatives of Oregon's long-term care residents including information and referral on long term care services as well as information to organizations and lawmakers about the problems of residents of long-term care facilities and furnishes information and consultation to other agencies on matters relating to long-term care. No less than the Title VII funding allocation for fiscal year 2000 shall be allocated for these services.

Access To and Components of Services

Department of Human Services (DHS) continues the "no wrong door" policy to enable every individual to access services and benefits through contact with any of the state's human services offices, regardless of the designated clientele the office may serve (i.e., children and families, disabled, aging).

The State of Oregon provides assurance that preference will be given to providing services to older Oregonians with greatest economic need and older individuals with greatest social need, with particular attention to low-income and minority older Oregonians residing in rural areas. To ensure service priority remains with low-income minority, and older Oregonians residing in rural areas, Area Agencies on

Aging & Disabilities (O4AD) offices, in coordination with the state human service offices, conduct outreach activities, initiate convenient public sites for intake purposes, and make home visits to enable older Oregonians to access benefits and services for which they may be eligible. Each AAA is required to identify the number of low-income minority older Oregonians and older Oregonians residing in rural areas within their district. Additionally, they must describe within their Area Plans, the methods used to satisfy the service needs of such low-income minority and rural dwelling older Oregonians in their district and provide information on the extent to which they met the objectives described in their *previous* Area Plan to address the needs of low-income minority older Oregonians and older Oregonians residing in rural areas within their district.

Intergovernmental Agreements and Professional Services Agreements with the AAA's have established program outcome measures which include performance standards related to service provision to low-income minority, rural and disabled older Oregonians.

In provision of case management services under Title III of the Older Americans Act, ORS 410.250 (see Section Five) recaps the responsibility of the Area Agencies on Aging (AAA) to fully comply with state and federal laws. Such case management services are assessing needs of the elderly for social and health services; determining resources available to meet those needs, assuring that such resources and services are provided; endeavoring to coordinate and expand existing resources; and serving as an advocate within the government and community at large for the interests of older Oregonians.

OAR 411-011-000 (see Section Five) further states that AAAs must document clearly in their Area Plan, both justification for their Title III case management services, duties specific to case management, and assurances that these duties will not duplicate services provided under other state and federal programs such as Medicaid or Oregon Project Independence. DHS has final authorization over terms of these case management services and provision of these services must indicate client choice in the documentation and ORS 410.250 reiterates the responsibility of the AAAs to fully comply with state and federal laws.

DHS regularly participates in a variety of task forces targeted at older Oregonians' needs and issues of high risk. Examples include the Nutritional Council of Oregon, Oregon Hunger Relief Task Force and Community Mental Health Task Force.

Supportive Service needs are evaluated by review and evaluation of area plan objectives on an annual basis. DHS State Unit on Aging also conducts periodic analysis of service and client assessment data to identify trends and needs as well

as conducts periodic community forums to meet with older Oregonians, their family members and the aging network to discuss demographics, and current and projected future key issues and needs. Each AAA details within their Area Plan outreach activities planned to ensure that older Oregonians, low income, minority and rural older Oregonians are aware of OAA programs offered by their AAA and have access to and assistance in obtaining and maintaining benefits and rights.

Declaration of Objectives of the Older Americans Act of 1965

The objectives that inspire DHS's efforts and those of the national aging network are found in Title I of the Older Americans Act and read as follows:

The Older Americans Act of 1965, as amended, finds and declares that, in keeping with the traditional American concept of the inherent dignity of the individual in our democratic society, the older people of our Nation are entitled to secure equal opportunity to the full and free enjoyment of the following objectives.

An adequate income in retirement in accordance with the American standard of living.

The best possible physical and mental health which science can make available and without regard to economic status.

Obtaining and maintaining suitable housing, independently selected, designed and located with reference to special needs and functional limitations and available at costs which older citizens can afford.

Full restorative services for those who require institutional care, and a comprehensive array of community-based, long-term care services adequate to appropriately sustain older people in their communities and in their homes, including support to family members and other persons providing voluntary care to older individuals needing long-term care.

Opportunity for employment with no discriminatory personnel practices because of age.

Retirement in health, honor, and dignity achieved after years of contribution to the economy.

Participating in and contributing to meaningful activity within the widest range of civic, cultural, education and training, and recreational opportunities.

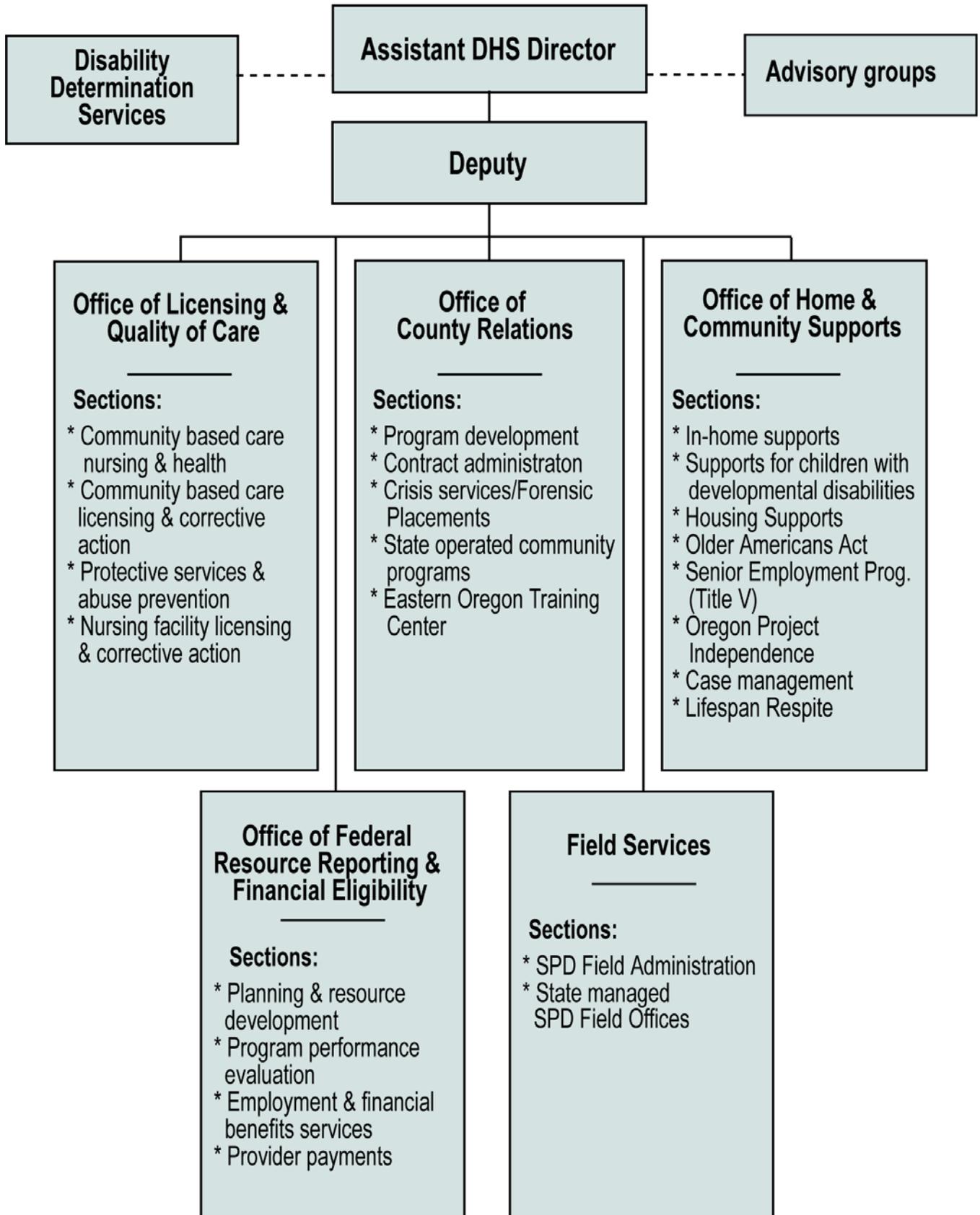
Efficient community services, including access to low-cost transportation, which provide a choice in supported living arrangements and social assistance in a coordinated manner and which are readily available when needed, with emphasis

on maintaining a continuum of care for vulnerable older individuals.

Immediate benefit from proven research knowledge, which can sustain and improve health and happiness.

Freedom, independence, and the free exercise of individual initiative in planning and managing their own lives, full participation in the planning and operation of community-based services and programs provided for their benefit, and protection against abuse, neglect, and exploitation.

Seniors and People with Disabilities



Overview Of Area Agencies On Aging & Disabilities

As stated in Oregon Administrative Rules,¹² an Area Agency on Aging (AAA), known in Oregon as an Area Agency on Aging & Disabilities (O4AD) is the designated entity with which the Department of Human Services contracts to provide Older Americans Act services to the older and disabled population within designated planning and service areas.

A planning and service area is the geographical area, consisting of one or more counties, for which the AAA is responsible to provide services. Oregon has two types of AAAs, each listed on the preceding two pages.

Type A

A public or private non-profit agency or unit of local government that administers the Older Americans Act and Oregon Project Independence programs for a planning and service area. In a Type A agency, a Department of Human Services Seniors & People with Disabilities local office administers Medicaid, financial and adult protective services, and regulatory programs for the elderly and disabled.

Type B

A local government administering the Older Americans Act, Oregon Project Independence program, Medicaid, financial and adult protective services, and regulatory programs for the elderly and disabled. Type B agencies may contract with DHS for the services of state employees to administer Medicaid, regulatory and protective services or they may have state employees transferred to AAA employment through a transfer agreement. If the agency contracts for state employees they are referred to as a Type B Contract agency, an agency, which operates under an employee transfer agreement, is referred to as a Type B Transfer Agency.

Oregon contracts with seventeen AAAs, nine of which are Type A designees and the remaining eight are Type B. Three of the Type B agencies contract with DHS for state employees, the other five manage an employee transfer agreement.

Following is a directory of Area Agencies on Aging, their Director's and contact information, followed by two maps - the first, a map identifying the planning and service area by county or counties relevant to each Area Agency on Aging (AAA); the second, reveals, by city, the location of each AAA office and each DHS Seniors & People with Disabilities office.

Oregon's Area Agencies on Aging & Disabilities

Barry Donenfeld, Exec. Dir
NorthWest Senior & Disability Services
Agency
3410 Cherry Ave NE
PO Box 12189
Salem, OR 97309
503/304-3400 fax 503/304-3434
barry.donenfeld@state.or.us

John Mullin, Director
Clackamas County Social Services
2051 Kaen Road
Oregon City, OR 97045
PO Box 2950
Oregon City, OR 97045
503/655-8640 FAX 503-655-8889
johnm@co.clackamas.or.us

Rocky Johnson
Columbia Action Team
310 Columbia Blvd
St. Helens, OR 97051
503/397-3511 FAX 503/397-3290
rocky@cat-team.org

Mary Shortall, Division Director
Multnomah Co, Aging & Disability Services
421 SW 6th Ave, 3rd Floor
Portland, OR 97204-2238
503/988-3620 FAX 503/988-6945
mary.e.shortall@co.multnomah.or.us

Mary Lou Ritter, Director
Washington County Disability, Aging
& Veteran Services
133 SE 2nd Ave
Hillsboro, OR 97123-4026
503-640-3489 FAX 503/640-6167
marylou.ritter@state.or.us

Scott Bond, Director Disability Services
Oregon Cascades West Council
of Governments
1400 Queen Ave SE, Suite 206
Albany, OR 97321
541/928-3636 FAX 541/967-6423
sbond@ocwcog.org

Ted Stevens, Director
Lane Council of Governments
1015 Willamette, Suite 200
PO Box 11336
Eugene, OR 97440
541/682-4038 FAX 541/682-3959
tstevens@lane.cog.or.us

Peggy Kennerly, Director
Douglas County Senior & Disabilities Srvcs.
621 W Madrone St
Roseburg, OR 97470-3010
541/440-3580 FAX 541/440-3564
pekenner@co.douglas.or.us

Connie Croy, Director
South Coast Business & Employment Corp.
1160 Newport
PO Box 1118
Coos Bay, OR 97420-4030
541/269-2013 FAX 541/267-0194
ccroy@scbec.org

Don Bruland, Director
Rogue Valley Council of Governments
155 S 2nd Street, Room 210
PO Box 3275
Central Point, OR 97502-2209
541/664-6674 FAX 541/664-7927
dbruland@rvcog.org

Oregon State Plan on Aging

John Arens
Mid-Columbia Council of Governments
1113 Kelly Ave
The Dalles, OR 97058
541/298-4101 FAX 541/298-2084
johna@mccog.com

Carol Bro, Exec. Director
Central Oregon Council on Aging
1135 SW Highland Ave
Redmond, OR 97756
541/548-8817 FAX 541/548-2893
carol.bro@state.or.us

Mike O'Brien, Director
Klamath Basin Senior Citizens Council
2045 Arthur Street
PO Box JE
Klamath Falls, OR 97602-1205
541/882-4098 FAX 541/883-7175
mob41@juno.com

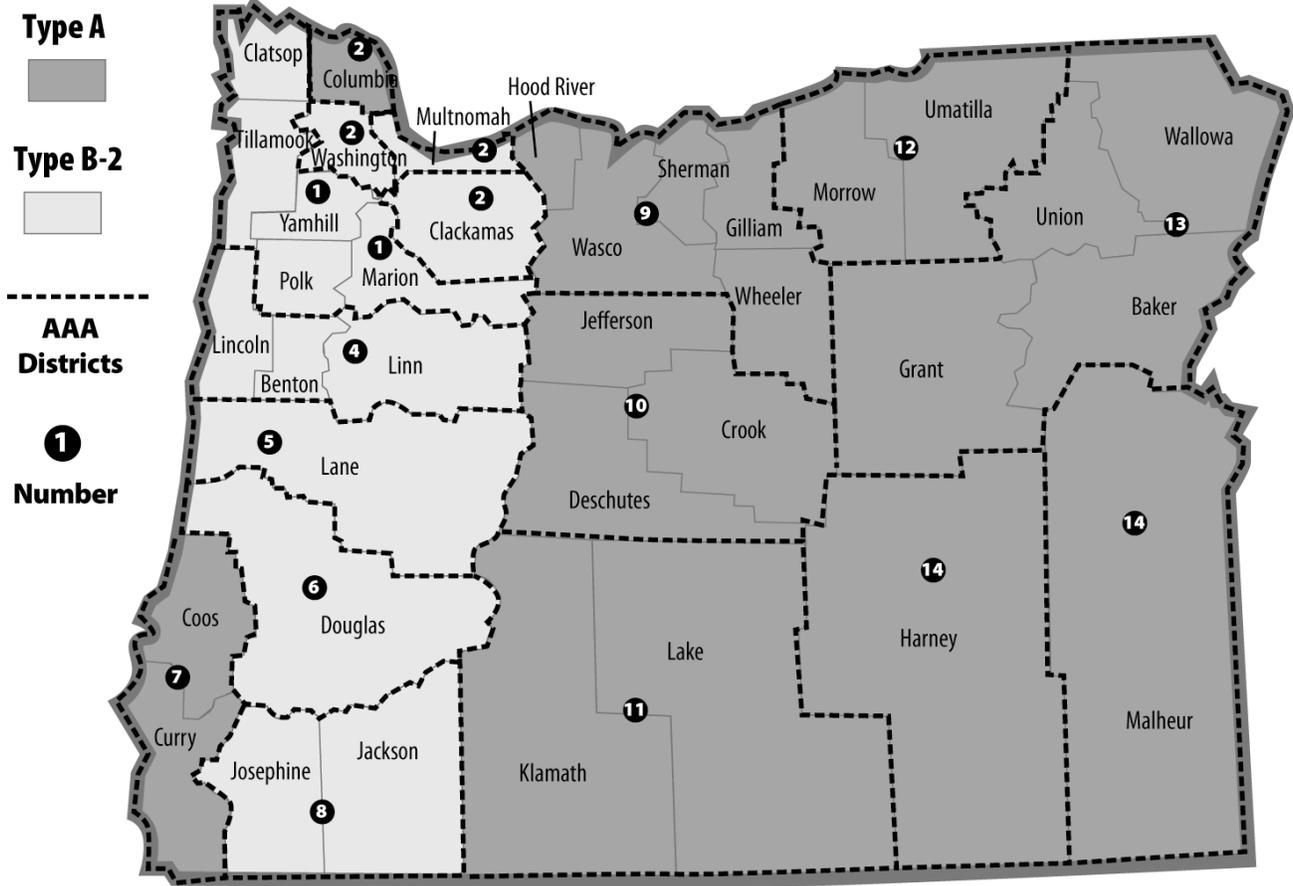
Eva Mabbott, Director
Community Action Program East
Central Oregon
721 SE 3rd, Suite D
Pendleton, OR 97801
1/800-752-1139 FAX 541/276-7541
emabbott@uci.net

Margaret Davidson, Exec. Dir
Community Connection of Northeast Oregon
104 Elm Street
LaGrande, OR 97850-2621
541/963-3186 FAX 541/963-3187
margaret@ccno.org

Theresa Williams, Director
Harney County Senior &
Community Services Center
17 South Alder Street
Burns, OR 97720-2048
541/573-6024 FAX 541/573-6025
theresa.williams@state.or.us

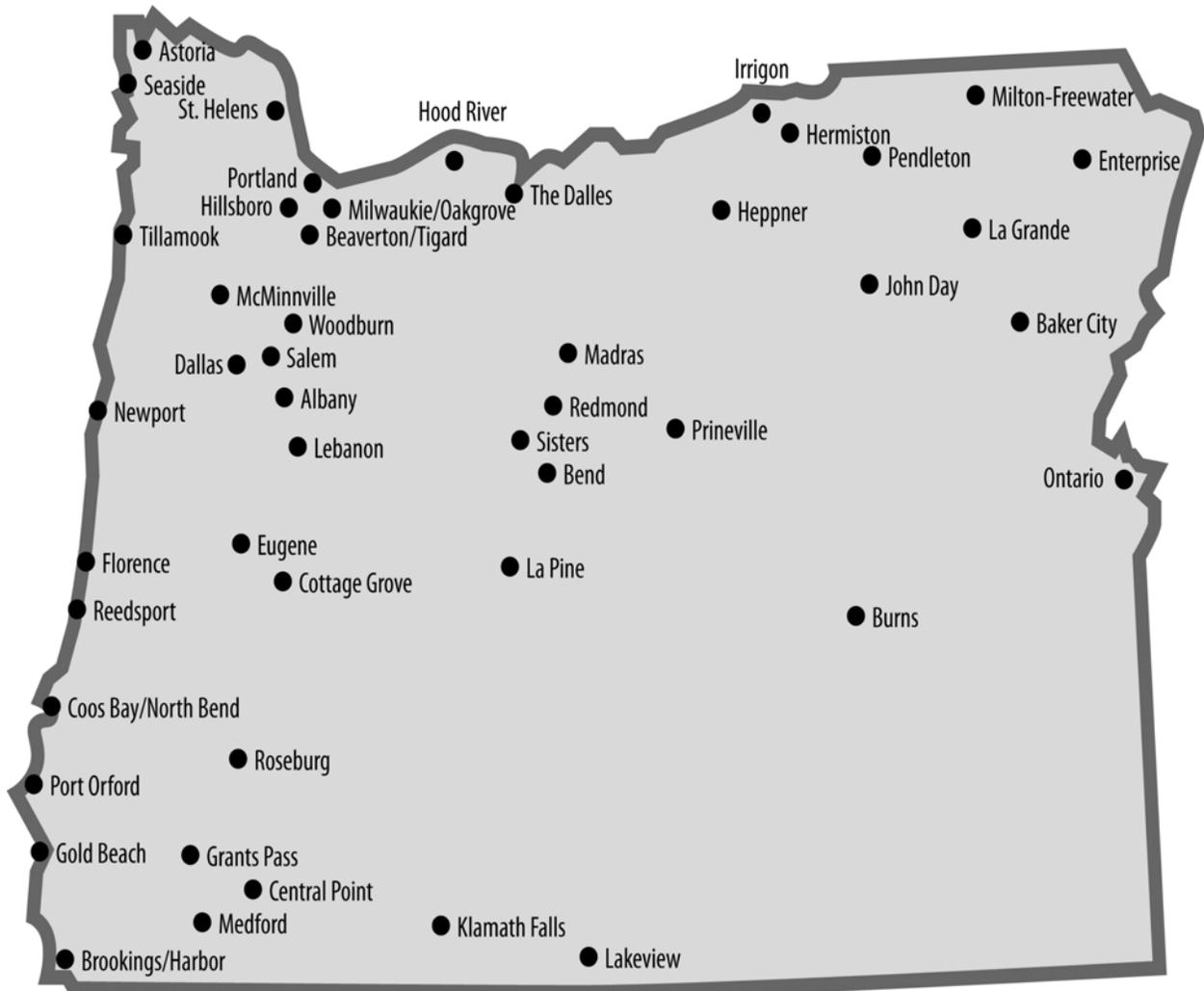
Sherri Massongill, Director
Malheur Council on Aging
& Community Services
842 SE 1st Avenue
PO Box 937
Ontario, OR 97914-3621
541/889-7651 FAX 541-889-4940
smassongill@srvinet.com

Location of AAA's



- 1** NWSDS
NorthWest Senior & Disability Service
- 2** CAT
Columbia Action Team
- 2** CCSS
Clackamas County Social Services
- 2** MCADS
Multnomah County Aging & Disability Services
- 2** WCDASV
Washington County Disability, Aging & Disability Services
- 4** OCWCOG
Oregon Cascades West Council of Governments Senior & Disability Services
- 5** LCOG
Lance Council of Governments
- 6** DCSDSD
Douglas County Senior & Disabilities Services Division
- 7** SCBEC
South Coast Business Employment Corp.
- 8** RVCOG
Rogue Valley Council of Governments
- 9** MCCOG
Mid-Columbia Council of Governments
- 10** COCOA
Central Oregon Council on Aging
- 11** KBSCC
Klamath Basin Senior Citizens Council
- 12** CAPECO
Community Action Program of East Central Oregon
- 13** CCNO
Community Connection of NE Oregon
- 14** HCSCS
Harney County Senior & Community Services
- 14** MCOACS
Malheur Council on Aging & Community Services

Area Agency on Aging/ Seniors and People with Disabilities Field Office System (AAA/SPD)



Governor's Commission on Senior Services (GCSS)

The Governor's Commission on Senior Services is an official state commission of volunteers appointed by the legislature. The Commission is dedicated to enhancing and protecting the quality of life for older Oregonians. Through cooperation with other organizations and advocacy, it works to ensure that seniors have access to services that give them choice, independence, and dignity.

The Commission performs its duties through four working committees under the leadership of the executive committee. The committees are:

- Health and long-term care
- Legislation
- Mental health and addictions issues
- General issues

The Commission issues reports on key issues to its partners and the public, and provides community education on issues of importance to older Oregonians.

In the 2005-2009 state plan development process, three members of the Commission served on the State Plan Advisory Committee, representing the special concerns of the Commission. A small delegation of Commission members reviewed the final draft of the proposed state plan goals, objectives and strategies, offering comments and suggestions.

GCSS Web Address:

<http://www.dhs.state.or.us/seniors/advocacy/gcss.htm>

The following page lists Oregon's current member roster for the Governor's Commission on Senior Services.

Governor's Commission On Senior Services Membership Roster

BARRETT, Elaine
Lane County
Term: 3/01/04-2/28/07

BUTSCH, Donald
Lincoln County
Term: 10/01/02-9/30/05

DEITZ, Estill
Multnomah County
Term: 10/01/02-9/30/05

DUTTON, Eunice
Douglas County
Term: 10/01/02-9/30/05

EWING, John
Lane County
Term: 7/15/03-7/14/06

FLAMMANG, Chris
Coos County
Term: 10/11/04-10/10/07

HELM, John
Columbia County
Term: 10/11/04-10/10/07

HINDS, Marilyn
Benton County
Term: 10/11/04-10/10/07

HUBERT, Dolores
Multnomah County
Term: 10/01/02-9/30/05

KIRKBRIDE, Kay
Washington County
Term: 10/11/04-10/10/07

KURTZ, Charles
Multnomah County
Term: 10/11/04-10/10/07

LAWRENCE, Robert
Clackamas County
Term: 3/01/04-2/28/07

MILLER, Linda
Benton County
Term: 7/15/03-7/14/06

NELSON, Barbara
Yamhill County
Term: 3/01/04-2/28/07

RAYMOND, Dolores
Washington County
Term: 7/15/03-7/14/06

ROBERTS, Jack
Malheur County
Term: 10/11/04-10/10/07

SIMPSON, Remona
Linn County
Term: 1/01/04-12/31/06

SMITH, Maria
Clackamas County
Term: 7/15/03-7/14/06

*Appointed by the
Speaker of the House:*
Rep. George GILMAN

*Appointed by the
President of the Senate:*
Sen. Bill MORRISETTE

*Governor's Commission
on Senior Services staff:*

Morgen BRODIE
Legislative and advocacy
coordinator

Marc OVERBECK
Legislative and advocacy
specialist

