

Legislative and Policy Committee Meeting Minutes
September 2, 2015 - 3:00- 4:30 p.m.
Oregon Health Authority, Transformation Center Training Room
421 SW Oak St., Ste 775 - Portland, OR 97204
1-888-251-2909 | Participant Pass Code 301558

Council members: Erin Neff-Minyard, Melanie DeLeon (phone)
Community members: Lois Feuerle (phone), Helen Eby (phone)
Staff: David Cardona (in person)
Start time: 3:00 pm End time: 4:25pm

#	Discussion Item	Action Item
1	Welcome and introductions	
2	Reviewed and approved minutes from last month	Erin will send meeting minutes from today's meeting to April Turner
3	<p>Reviewed Lois' suggestions to Bylaws.</p> <p>Group agreed to change all sentences with "will" to "shall" for consistency. "Shall" expresses obligation.</p> <p>Group will correct formatting errors after all content is reviewed.</p> <p>See attached document (2015-9-2_Bylaws.doc) for extensive comments, edits, and clarification language added to sections "Duties of Officers", "Officer Vacancies", "Attendance", "Notice of Meetings, Minutes, and Records", "Decision-Making Process", and "Committees".</p> <p>Group deferred discussion on Article VII "Conflict of Interest" and election of officers until October.</p>	Erin will move the changes from Lois' document that the group reviewed and edited during this meeting to the latest version from 8/5/2015. New document is entitled "2015-9-2-Bylaws_ALL.doc" and will be attached to the minutes.
4	No members of the public were in attendance to comment.	

Next meeting:
 Wednesday, October 7, 3-4:30 pm
 Transformation Center Training Room
 421 SW Oak St, Suite 775
 Portland OR, 97204

Contact:
 April Johnson
 Health Equity Workforce Manager
 Office of Equity and Inclusion
 971-673-3389
April.R.Johnson@state.or.us

Oregon Council on Health Care Interpreters
By-Laws
Approved 10/14/10

Comment [NEK:IS1]: The formatting and numbering will be corrected once the content of the entire document is reviewed.

ARTICLE I

Oregon Council on Health Care Interpreters

1. The Oregon Council on Health Care Interpreters (~~the~~ Council) was created pursuant to ORS ~~413.55009-615~~ through ORS ~~413.56009-625~~. The Council works in cooperation with the Oregon Health Authority (OHA) to:

A. Develop ~~testing~~ qualification and certification standards for health care interpreters, ~~for persons with Limited English Proficiency (LEP)~~.

B. Coordinate with other states to develop and implement educational and testing programs for health care interpreters.

Comment [OHA2]: Expectations need to be clarified on this to ensure standards are not compromised.

C. Examine and make recommendations about operational and funding issues, including but not limited to the feasibility of developing a central registry and annual subscription mechanism for health care interpreters.

Comment [OHA3]: What does this mean? Get clarification.

D. Do all other acts as shall be necessary or appropriate under the provisions of ORS ~~413.55009-615~~ to ~~413.56009-623~~.

2. The Council works to address the following findings and implement the following policies:

A. Persons with LEP are often unable to interact effectively with health care providers. Because of language differences, persons with LEP are often excluded from health care services, experience delays or denials of health care services, or receive health care services based on inaccurate or incomplete information.

Comment [OHA4]: Add language on hard of hearing

B. The lack of competent health care interpreters among health care providers impedes the free flow of communication between the health care provider and patient, preventing clear and accurate communication and the development of empathy, confidence, and mutual trust that is essential for an effective relationship between health care provider and patient.

C. Health care for persons with LEP is to be provided according to the guidelines established under the policy statement issued August 30, 2000, by the U.S. Department of Health and Human Services, Office for Civil Rights, entitled, "Title VI of the Civil Rights Act of 1964; Policy Guidance on the Prohibition Against National Origin Discrimination As It Affects Persons With Limited English Proficiency," ~~and~~ the 1978 Patient's Bill of Rights and ORS 413.550 to 413.560.

D. The Council may accept contributions of funds and assistance from the United States Government or its agencies or from any other source, public or private, for purposes consistent with the purposes of the Council. All moneys received by the Oregon Council on Health Care Interpreters under ORS ~~413.55009-615~~ to ~~413.56009-625~~ shall be paid into the Oregon Health Authority Fund and credited to an account designated by the OHA authority. Such moneys shall be used only for the administration and enforcement of the provisions of ORS ~~413.55009-615~~ to ~~413.56009-625~~.

ARTICLE II

Council Support

The Oregon Health Authority shall provide the Council with such services, materials and/or human resource support ~~and employees~~ as the Council requires to carry out its duties.

ARTICLE III

Council Composition

The Council shall consist of 25 members appointed as follows:

- A. The Governor shall appoint two members from each of the following groups:
1. Consumers of medical services who are persons with LEP and who use health care interpreters;
 2. Educators who either teach interpreters or persons in related educational fields, or who train recent immigrants and persons with LEP;
 3. Persons with expertise and experience in administration or policymaking related to the development and operation of policies, programs or services related to interpreters, and who have familiarity with the rulings of the federal Office for Civil Rights concerning interpreter services for various institutions;
 4. Health care providers, consisting of one physician and one registered nurse, who utilize interpreter services regularly in their practice;
 5. Representatives of safety net clinics that predominantly serve persons with LEP; and
 6. Representatives of hospitals, health systems, and health plans predominantly serving persons with LEP.
- B. The Governor shall appoint one representative from each of the following agencies and organizations after consideration of nominations by the executive authority of each:
1. The Commission on Asian Affairs;
 2. The Commission on Black Affairs;
 3. The Commission on Hispanic Affairs;
 4. The Commission on Indian Services;
 5. The International Refugee Center of Oregon;
 6. The Oregon Judicial Department's Certified Court Interpreter program;
 7. The Commission for Women; and

- 8. The Institute for Health Professionals of Portland Community College.
- C. The Director of the Oregon Health Authority shall appoint three members including:
 - 1. One member with responsibility for administering mental health programs;
 - 2. One member with responsibility for administering medical assistance programs; and
 - 3. One member with responsibility for administering public health programs.
- D. The Director of Human Services shall appoint:
 - 1. One member with responsibility for administering developmental disabilities programs; and
 - 2. One member with responsibility for administering programs for seniors and persons with disabilities.
- E. The membership of the Council shall be representative of the racial, ethnic, cultural, social, and economic diversity of the people of this state.
- F. The term of a member shall be three years. A member may be reappointed.
- G. If there is a vacancy for any cause, the appointing authority shall make an appointment to become immediately effective for the unexpired term. The appointing authority may appoint a replacement for any member of the Council who misses more than two consecutive meetings of the Council. The newly appointed member shall represent the same group as the vacating member.
- H. An OHA representative ~~The Health Care Interpreters Program Manager~~ shall attend and participate in Council meetings but is not a voting member of the Council.

Comment [OHA5]: Will update with new language

ARTICLE IV

Council Compensation and Reimbursement

- A. Members of the Council may be compensated pursuant to ORS292.495. ~~are not entitled to compensation.~~
- ~~A.~~ B. ~~At~~ but at the discretion of the Director of the Oregon Health Authority, Council members may be reimbursed for actual and necessary travel and other expenses incurred by them in the performance of their official duties, subject to ORS 292.495.

Comment [OHA6]: We verified that this is still current. David will find out if there is any available funding for Council compensation.

ARTICLE V

Members and Officers of the Council

Section 1: Member Terms

The term of a member shall be three (3) years. A member may be reappointed for a maximum of two terms.

Section 2: Officer Terms

The term of an officer shall be two (2) years. Officers may be re-elected once and may serve only a maximum of ~~one~~ two terms in each position as an officer.

Comment [OHA7]:

Section 3-2: Officers

The Council shall ~~select~~ one member as chair and one member as vice chair for such terms and with duties and ~~powers~~ ~~responsibilities~~ as described in Section 23 or additionally as the Council may determine necessary for the performance of the functions of such offices.

Section 4: Election of Officers

START HERE FOR SEPTEMBER MEETING

A nomination committee shall be formed when necessary to oversee the election of officers.

Council members interested in becoming Chair or Vice Chair shall complete a nomination form and candidate interest form.

Council members shall be nominated by themselves or other Council members for Chair and Vice Chair via a form made available by the Oregon Health Authority.

Nominees shall submit a nomination form at least 30 days in advance of the scheduled election. The summary shall be provided to the Council at least three weeks prior to the meeting at which the election ~~will~~ shall take place.

Officers shall be elected by secret ballot.

Section 32: Duties of Officers

- A. The Council Chair shall endeavor to preside at all meetings of the Council and shall perform such other duties as may be assigned by the Council. The Chair ~~will~~shall:
1. Coordinate meeting agendas in consultation with the OHA staff assigned to the Council.~~Health~~ ~~Care~~ ~~Interpreters~~ ~~Program Manager,~~
 2. Finalize the agenda for each Council meeting.
 3. Review all draft Council meeting minutes prior to the meeting at which they are to be approved, and
 34. Make Seek Council input regarding Committee Chair assignments and appoint committee chairs.
- B. In the absence of the Council Chair or in the event of the Chairperson's inability or refusal to act, ~~as determined by the Council,~~ the Vice Chair shall perform the duties of the Chair, and when so acting, shall have all the ~~powers-responsibilities~~ of and be subject to all the restrictions imposed upon the Chair. The Vice Chair shall perform such other duties as from time to time may be assigned by the Council Chair.
- C. The Council Chair and Vice Chair shall ~~have~~be subject to the same attendance requirements as members per Article VI, Section 34, below.

Section 43: Officer Vacancies

- A. If a vacancy occurs in the office of the Council Chair, the Vice Chair shall ~~carry out~~assume the functions of the Chair until the Council ~~selects~~ a new Chair.
- B. If a vacancy occurs in the office of the Vice Chair, the office shall remain vacant until the Council ~~selects~~ a new Vice Chair.
- C. If a vacancy occurs in the office of the Chair when the office of the Vice Chair is vacant, the Council shall designate one of its Council Members to serve as chairperson pro tem over meetings until the Council ~~selects~~ a Chair or a Vice Chair.

Section 54: Absence of Officers from Meetings

- A. If neither the Chair nor the Vice Chair is able to attend any duly called Council meeting, the Chair or Vice Chair of the Council shall designate a Council Member to serve as chairperson pro tem for that meeting.
- B. If no one has been designated to serve as chairperson by the Chair or Vice Chair, in order of priority, first a committee chair or second, other Council member shall preside over the meeting.

ARTICLE VI

Council Meetings

Section 1: Regular and Special Meetings

- A. The Council shall meet at least once every three months at a place, day, and hour determined by the Council and ~~the Health Care Interpreters Program Manager~~ an OHA representative.
- B. After prior consultation with the ~~Health Care Interpreters Program Manager~~ OHA representative, the Council may meet at other times and places specified by the call of the Chair or a majority of the Members of the Council, or as otherwise specified in these Bylaws.
- C. Council meetings ~~will~~ shall be held within the geographic boundaries of the state.

Section 2: Meetings by Telecommunication

- A. A regular or special meeting of the Council may be held by telephone, video conferencing, or other electronic means in which all Council Members may hear each other so long as ~~this arrangement~~ complies with the Oregon Public Meetings Law.
- B. If a Council Member is unable to attend any meeting in person, the Member may participate via telephone, video conferencing or other electronic means, providing that all participants can hear each other and members of the public attending the meeting can hear any Council Member who speaks during the meeting. Council Members attending through such electronic means shall be included in constituting a quorum.

Section 3: Attendance

Regular attendance at meetings is expected of each Council Member. A Member should notify the Chair, facilitator, or the Oregon Health Authority staff assisting the Council, at least 24 hours in advance of a meeting if the Member is unable to attend. In an emergency, the Member shall contact ~~them~~ any of these parties as soon as reasonably possible.

The Council Chair and committee Chairs will keep a spreadsheet of attendance records for each committee and Council meeting separate from the meeting minutes. These records will be available to the Oregon Health Authority.

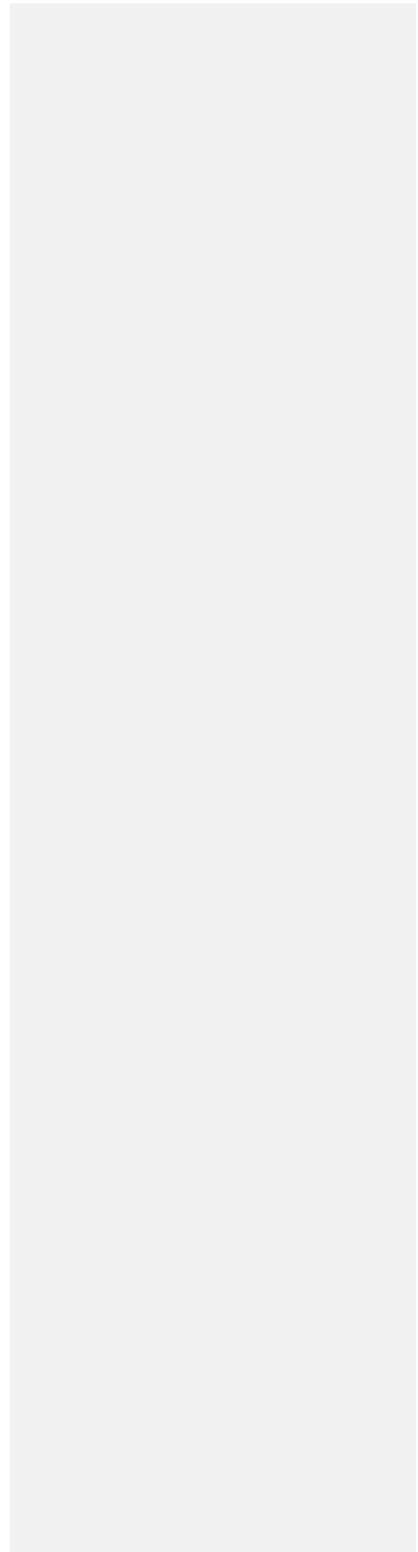
Comment [NEK:IS8]: We wanted to add this to make it easier to see who is in attendance without having to sift through all meeting minutes.

Any member may raise for ~~C~~ council consideration the lack of attendance of a member. The Council recognizes the subjective nature of ~~issue an absence~~ and will ~~shall~~ make recommendations as to the action to be taken on a case-by-case basis.

Section 4: Notice of Meetings, Minutes, and Records

- A. Meetings of the Council are subject to the Oregon Public Meetings Law.
- B. There ~~will~~ shall be no electronic recording or filming of Council meetings without ~~giving notice~~ informing to the meeting participants.
- C. Notice of scheduled meetings, together with an agenda and minutes of the previous meeting ~~will~~ shall be made available to all Council members and to the public at least ten (10) business days prior to such meetings, or if ten days' notice is not practicable, then such lesser notice as is practicable.
- D. Typed draft minutes of all meetings of the Council shall be distributed to all Council Members and made available to the public no later than thirty (30) days after the meeting and are subject to amendment and approval at the next meeting of the Council.

Comment [NEK:IS9]: "Giving notice" deleted because it would need a process to explain how notice is given. Group decided if anyone did not want to be filmed, they could call into the meeting rather than be there in person.



E. The Council shall maintain all records in accordance with the Oregon Public Records Law. Council records, such as formal documents, discussion drafts, transcripts, meeting summaries, and exhibits are public records. Council communications (oral, written, electronic, etc.) are not confidential and may be disclosed. However, private documents unrelated to Council business held by individual Council members and not shared with the State are not considered public records and are not subject to disclosure under public records laws.

Section 5: Rules of Order

- A. Procedures - The Council willshall conduct its business through discussion, consensus-building, and informal meeting procedures. The officers may, from time to time, establish specific procedural rules of order, subject to approval by the Council members, to assure the orderly, timely, and fair conduct of business. They may refer to the most recent edition of Robert's Rules of Order for guidance.
- B. Public Comment - The officers willshall provide periodic public comment opportunities for non-Council members during meetings before the Council makes a decision. Comments from the public willshall be limited in time to allow sufficient opportunity to conduct the other portions of the Council agenda. Typically, comments willshall be limited to a maximum of three minutes per person. The public is encouraged to submit written comments to staff for circulation to the full Council. Staff willshall have a clear procedure for the public to sign up to speak and to obtain interpretative services for the Council meetings.
- C. Council Member Commitments to Each Other - The members, project staff and participants willshall participate in good faith, which means ~~to~~they must:
1. Prepare for and set aside time for the meetings and the whole process,
 2. Participate fully, honestly and fairly, commenting constructively and specifically,
 3. Speak respectfully, briefly and non-repetitively; not speaking again on a subject until all other members desiring to speak have had the opportunity to speak,
 4. Allow people to state their ideas or opinions without fear of reprisal from Council members, sponsors, or others,
 5. Avoid side conversations during meetings,
 6. Provide information as much in advance as possible of the meeting in which such information is to be used and share all relevant information to the maximum extent possible,
 7. Generate and explore all options on the merits with an open mind, listening to different points of view with a goal of understanding the underlying interests of other Council members,
 8. Agree to work toward fair, practical and durable recommendations that reflect the diverse interests of the entire Council and the public,
 9. When communicating with others, accurately summarize the Council process, discussion and meetings, presenting a full, fair and balanced view of the issues and arguments out of respect for the process and other members,

10. Not attempt to effect a different outcome outside of the Council process once the Council has reached a decision,
11. Strive vigorously for consensus and closure on issues, and
12. Self-regulate and help other members abide by these commitments.

Section 6: Decision-Making Process

- A. Quorum - A simple majority of the currently appointed members of the Council shall constitute a quorum for the transaction of business. ~~The continued presence of a~~ quorum is required for any official vote or action of the Council ~~throughout an official meeting. When the Council does not have a quorum, it may continue to deliberate on issues but may not vote or take action. Less than a quorum of the Council may receive testimony.~~
- B. Voting - All official actions of the Council must be taken by a public vote. A "voice" vote may be used for ~~On all motions or other matters, "voice" vote may be used.~~ At the discretion of the Chairperson or at the request of a Council Member, a show of hands or "roll-call" vote may be conducted. Proxy votes ~~are~~ shall not be permitted. The results of all votes and the vote of each member by name must be recorded. When there is a quorum present at a meeting, a simple majority of the Council Members present is ~~necessary~~ required to pass motions or take other action during a meeting. Abstaining votes shall be recorded as abstention.
- C. Consensus - The Council ~~will~~ shall endeavor to make decisions by consensus. Consensus decision-making is a process that allows Council members to distinguish underlying values, interests, and concerns with a goal of developing widely accepted solutions. Consensus does not mean 100% agreement on each part of every issue, but rather support for a decision, "taken as a whole." This means that a member may support a consensus proposal even though they would prefer to have it modified in some manner in order to give it their full support. Consensus is a process of "give and take," of finding common ground and developing creative solutions in a way that all interests can support. Consensus is reached if all members at the table support an idea or can say, "I can live with that."

Section 7: Committees

- A. Advisory and Technical Committees:
 1. The Council may establish such advisory and technical committees as it considers necessary to ~~aid~~ support and advise the Council in the performance of its functions. The committees may be ~~continuing standing~~ or temporary committees. The Council shall determine the representation, membership, terms, leadership, and organization of the committees and shall appoint committee members.
- B. Committee Procedures, Recommendations and Reports to the Council
 1. Meetings of the Committees are subject to the Public Meetings Law. Each Committee Chairperson shall work with Oregon Health Authority staff to provide for the distribution and content of an agenda and for the recording of committee meeting minutes, and shall be responsible for calling meetings to the order and conduct of ~~the~~ presiding over meetings.

2. A recommendation from a Committee to the Council requires an affirmative vote of a simple majority of the Committee members using the same Decision-making Process, noted above.
3. The work of the Committees must be arranged to permit the timely completion of tasks requested by the Council or included within the Committee's mandate. The Committees will work cooperatively with the Council and staff to provide requested information.

ARTICLE VII

Conflict of Interest

Council members are appointed, in part, because of their diverse experiences in their professional and civic lives. They bring valued histories of service to varied populations or stakeholder groups. By accepting membership on the Council, members agree to serve the broader goals of establishing health care interpreter policy for the State of Oregon.

Voting members of the Council should identify situations that present possible conflicts of interest and describe appropriate procedures if a possible conflict of interest arises. Members seek to promote transparency and integrity of the Council's decision-making process by abiding by this policy. Questions about this policy should be directed to the Director of the Oregon Health Authority.

An **actual** conflict of interest means "any action or any decision or recommendation by a person acting in a capacity as a public official, the effect of which would be to the private pecuniary benefit or detriment of the person or the person's relative or any business with which the person or a relative of the person is associated unless the pecuniary benefit or detriment arises out of circumstances described in [ORS 244.020(12)]."

A **potential** conflict of interest means:

Any action or any decision or recommendation by a person acting in a capacity as a public official, the effect of which could be to the private pecuniary benefit or detriment of the person or the person's relative, or a business with which the person or the person's relative is associated, unless the pecuniary benefit or detriment arises out of the following:

(a) An interest or membership in a particular business, industry, occupation or other class required by law as a prerequisite to the holding by the person of the office or position.

(b) Any action in the person's official capacity which would affect to the same degree a class consisting of all inhabitants of the state, or a smaller class consisting of an industry, occupation or other group including one of which or in which the person, or the person's relative or business with which the person or the person's relative is associated, is a member or is engaged.

(c) Membership in or membership on the board of directors of a nonprofit corporation that is tax-exempt under section 501(c) of the Internal Revenue Code.

ORS 244.020.

The Council members recognize that the standards that govern their conduct are fully set forth in ORS Chapter 244. All Council members, upon confirmation of appointment, and periodically thereafter, should maintain knowledge of the requirements of this law and subsequent versions thereof. The statutory requirements are binding on members, as are these policies.

Council members are encouraged to examine prospective issues at the earliest opportunity for the potential of a conflict of interest and are reminded that compliance with the statutory requirements often require sensitivity to avoiding the appearance of impropriety. Members are to consult with the Director of the Oregon Health Authority for guidance where appropriate.

Council members should disclose to the Council Chairperson as soon as the Council member is aware of the actual or potential conflict of interest.

Council members must publicly announce the nature of the conflict of interest before participating in any official action (discussion or voting) on the issue giving rise to the conflict of interest.

- A. Potential conflict of interest: Following the public announcement, the Council member may participate in official action on the issue that gave rise to the conflict of interest.
- B. Actual conflict of interest: Following the public announcement, the Council member must refrain from further participation in official action on the issue that gave rise to the conflict of interest.

If a Council member has an actual conflict of interest and the Council member's vote is necessary to meet the minimum number of votes required for official action, the Council member may vote. In this situation, the Council member must make the required announcement and refrain from any discussion, but may participate in the vote required for official action by the Council. These circumstances are rare.

The Council shall keep a record of disclosures of conflict of interest and the nature of the conflict in the public record.

ARTICLE VIII

Rules of Construction and Amendments to Bylaws

- A. All references in these Bylaws to "mail" or "mailing" shall also include electronic mail to a Member or an addressee who has an email address on file with the Council.
- B. All procedures in these Bylaws shall be construed in accordance with the intent and purpose of applicable state laws and regulations.

- C. These Bylaws may be amended or repealed and new bylaws adopted- by the Council at any regular or special meeting of the Council provided that twenty (20) days written notice of the proposed amendment shall be given to each Member of the Council prior to any regular or special meeting of the Council at which the proposed amendment is to be considered and acted upon. Amendment of the Bylaws requires an affirmative vote of a 2/3 majority of the Council Members.
- D. Nothing contained in these Bylaws shall be deemed to limit or restrict the general authority vested in the Council or the Oregon Health Authority by law.