December 15, 2004

Oregon Department of Human Services

Government-to-Government Report, 2004

INTRODUCTION

The Oregon Department of Human Services is pleased to share this 2004 Annual Report with the Legislative Commission on Indian Services, as required by Senate Bill 770. In this report, we believe DHS' commitment to addressing the full range of human services issues with the Tribes of Oregon is illustrated. Major areas of work with the Tribes are:

- Health care
- Child welfare
- Public welfare
- Alcohol and drug abuse prevention and treatment
- Public health
- Mental health
- Developmental disability services
- Elder care
- Care for persons with disabilities
- Vocational rehabilitation
- Any human services issues that the Tribes wish to discuss

This report summarizes recent and current work in many of these areas, paying particular attention to the interaction between the Tribes and DHS.

Several of the areas covered in this report were identified during Government-to-Government Health Services Cluster meetings, conducted quarterly, as required by Senate Bill 770.

“Assisting People to Become Independent, Healthy, and Safe”
2004 Activity Highlights

DHS Structure

During 2004, DHS reviewed its massive restructuring and streamlining work, authorized by House Bill 2294.

DHS asked the Tribes of Oregon and other partners about the reorganization, what was working and what needed to be improved. This was done to achieve better outcomes for clients and communities through collaboration, integration and shared responsibility.

DHS has sought and received reorganization consultation from the Tribes of Oregon, who continue to be valued advisers.

Director’s Office and Administrative Services

Supporting government-to-government meetings

DHS is the lead agency for the Health Services Cluster meetings, required by Senate Bill 770. DHS organizes and provides logistical support for the quarterly meetings.

DHS is working with its other State partners in these meetings to improve communication between state agencies and the Tribes of Oregon. Oregon Housing, the Commission on Children and Families, and the Department of Business and Consumer Services have all developed higher profiles at the Senate Bill 770 meetings. This has resulted in developing major policy changes related to private health insurance and the Tribes of Oregon. The first-ever housing summit between the Tribes and the Oregon housing agency was held during the past year.

Communication between the DHS Director's Office and the Tribes of Oregon

DHS Directors have sought a more positive communication with the Tribes and Urban Indian programs. Jean I. Thorne, former director, started to meet each Tribe at their tribal offices, which then-Deputy Director Jim Neely followed with problem-solving meetings with Tribes.

There was a change of DHS administration in 2004 and the new DHS director, Gary K. Weeks, immediately took on a new of meeting with the Tribes and the Urban Indian Programs. As of November 2004, seven of the nine Tribes had had a personal visit by the DHS Director and supporting staff, and DHS representatives
also visited the Native America Rehabilitation Center in Portland, the largest urban Indian program in Oregon. The DHS Director’s Office has been aggressively pursuing improved dialogue and relationships with the Tribes.

**Funding and contracting**

DHS continues to lead in the area of funding for the Tribes of Oregon. As a result of research by a DHS Director's Office team, the Tribes are now able to access Title XIX administrative funds. Targeted Case Management (TCM) is now available to the Tribes, with Warm Springs taking the lead to develop a TCM program. This will result in the Tribes being able to expand their human services programs.

DHS administration has been working with the Tribes to establish a seamless contracting process between the Tribes and DHS. DHS has been seeking better communication between DHS and the Attorneys General's office to develop and maintain contract language respectful of Tribal sovereignty. DHS contracts personnel and the Tribes continue to discuss the consolidation of contracts between DHS and the Tribes to further simplify contracting with DHS.

The Tribal Relations Liaisons office in the DHS Director’s Office continues to work diligently to problem solve, to expand communication, and to bring tribal issues to the DHS administration for resolution.

**Health Services: Health care**

Health care continues to be a major agenda item between DHS and the Tribes, with the DHS Office of Medical Assistance Programs (OMAP) continuing its leadership in this area.

DHS asked the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), to implement SB 878 and an Operational Protocol Amendment allowing American Indian/Alaska Native (AI/AN) clients who are eligible for OHP-Standard coverage to continue to be allowed retroactive enrollment. OMAP is still awaiting CMS approval. OMAP has asked that CMS withhold a decision on Oregon’s requests pending CMS’ decision in a similar Washington state case.

Programs that Tribes operate on contract with the federal government are referred to as 638 programs. DHS is working with 638 facilities to convert to 100 percent cost-based reimbursement, which is allowed by the 1996 Memorandum of Agreement (MOA). The MOA allows tribal facilities that receive Title I or Title III Funding the option of reimbursement methodology: Tribal rate set by the federal
government, or 100 percent cost-based, or fee-for-service payment. Two tribes have converted to the 100 percent cost-based reimbursement with three other tribes reviewing the requirements.

OMAP implemented reimbursement for Out-Stationed Eligibility Workers (OSEW) on an annual basis, retroactive to January 1, 2003. Tribes that have OSEW contracts with OMAP can submit their costs associated with OSEW annually, ensuring the ability for Tribes to provide outstationed activities.

OMAP provides on-going technical assistance for day-to-day operations ranging from assistance with billing to the implementation and testing of the new HIPAA-compliant software for electronic billing.

**Health Services: Mental Health**

DHS continued its dialogue with Tribes about tribal-specific children’s residential mental health; specifically dialogue with the Confederated Tribes of the Umatilla Indian Reservation for services for their children.

The DHS Office of Mental Health and Addiction Services (OMHAS) continued discussions with the Oregon Indian Council about SB 267, which addresses “Scientific Evidence Based Programs” in mental health and addiction services as they relate to Tribes and their contracts.

OMHAS staff and tribal representatives continued to discuss issues related to mental health and cultural competence for OMHAS-sponsored conferences and other events.

Within OMHAS, greater coordination was developed between the areas of mental health and addictions throughout the year.

OMHAS staff participated on the Indian Child Welfare Act (ICWA) advisory council.

The Office of Mental Health and Addiction Services developed and adopted a written policy regarding Tribal Liaison roles and responsibility.

**Health Services: Alcohol and Drug Abuse**

The Tribes of Oregon, the Native American Rehabilitation Association (NARA) and the Chemawa Indian Center have formed Fetal Alcohol Syndrome teams. They have completed the first phase, which consisted of increasing awareness of fetal
alcohol syndrome and forming the teams. The continued training was a booster session to review what they learned and to refine their teams. To accomplish this OMHAS prevention dollars were used from state general funds. The next phase will kick off soon with federal funds from the DHS Children, Adults and Families cluster.

Alcohol and drug prevention coordinators for the Tribes and OMHAS staff meet regularly to discuss prevention best practices, an important concept to both the Tribes and DHS. A committee was established to define best practices in public contracting as it relates to Indian issues.

All nine Tribes are receiving $47,500 annually to address alcohol and other drug Prevention. With the exception of the Coos and Coquille, all Tribes have letters of approval from DHS to provide these services.

**Health Services: Public Health**

At the request of the Grand Ronde Tribe, the Office of Public Health Systems made a presentation at a quarterly meeting about the nutritional impact on fish of the proposed dredging of the Columbia River. This presentation also opened avenues for better sharing of the State of Oregon fish advisories with Tribes. The Tribes continue to be updated on the status of Columbia River dredging, with an update delivered to the Siletz Tribal Council.

The Siletz Tribe was one of six recipients of funding to develop a public education campaign for safe fish consumption from the Portland Harbor Super-fund Site through a grant from SHINE, the Super-fund Health Investigation & Education Program.

The Breast and Cervical Cancer Program continued funding of a half-time breast and cervical cancer prevention coordinator at Indian Health Services. Funding is provided to Tribes for education and promotion. Funding is also provided to Siletz for screening services. Technical assistance is provided to the Women’s Health Promotion Coalition, which is made up of representatives from each of the Tribes, NARA, and the NW Area Indian Health Board.

The Women, Infant and Children’s program (WIC) works at the local level with the Confederated Tribes of the Warm Springs Reservation and the Confederated Tribes of the Umatilla Reservation, both of which manage their own WIC programs. DHS provides funding to these programs, which operate under DHS assurances, with training, staff development, consultation and nutritional services are provided by DHS.
Seniors and People with Disabilities

Increased outreach and service coordination

Three 2004 tribal trainings were held focusing on the abuse of elders and people with disabilities. These trainings were with the Coos Tribe in Coos Bay on May 13; with Klamath Tribes in Chiloquin on August 27; and with the Umatilla Tribe in Pendleton on June 30. Training topics included investigative strategies and response protocols; interviewing procedures; barriers in reporting and participating in the criminal justice system; and available community resources.

The 2003-2007 Area Plans were received this year from the Oregon Area Agencies on Aging with the requirement to address tribal coordination and outreach. Each AAA had to outline at least one goal, complete with objectives, activities, target dates and anticipated outcomes with accomplishments. These activities are considered part of the statement of work in the AAA contracts with the State.

DHS attended the U.S. Department of Health and Human Services (HHS) Second Annual Region X Tribal Consultation Session in Portland. This consultation was conducted in accordance with Executive Order 13175 on tribal consultation, the HHS tribal consultation policy, and the desire to continue to strengthen the government-to-government relationship between HHS and American Indian and Alaska Native Tribes.

The SPD Tribal Liaison invited Terry Duffin from the Region X Administration on Aging to a Tribal quarterly meeting held in Salem in August. Duffin talked about the grant process for receiving Title VI funds and encouraged the Tribes to apply. She also presented this information to the Oregon AAAs at an 04AD meeting in November.

DHS attended the Eighth Annual Title VI Training Workshop in Seattle on Oct. 28-29, hosted by the U.S Region X Administration on Aging for Alaska Native and American Indian Elders Programs from Idaho, Alaska, Washington and Oregon. We shared information about the DHS Lunch and Learn Placemat Project, and many of the tribal coordinators from the Pacific Northwest states (many from Oregon) requested copies for their use. The colorful mats are to be used at congregate and home-delivered meal sites for elders. They contain information about the risk factors of heart disease and diabetes as well as food-choice and wellness tips.
SPD invited tribal members to General Assistance trainings that clarified the eligibility-determination process and decision levels with the system. The trainings also included the rudiments of Social Security Disability criteria and impairment listings.

DHS attended the ICWA conference in Pendleton in October. We presented placemats for distribution to the elders for their congregate meal sites and for the home-delivered meals.

**Children, Adults and Families**

**2004 Indian Child Welfare Act (ICWA) Program**

**IV-B five-year state child welfare plan (ICWA compliance):**

The State of Oregon and the Oregon Tribes recognize DHS is committed to collaborating and strengthening relationships. Tribal consultation is a federal requirement of the five-year state child welfare plan for ICWA compliance. The 2004-2009 five-year plan provides goals and objectives that will provide a process to comply and strengthen the Indian Child Welfare Act of 1978. DHS consultation encompassed four days by the Indian Child Welfare Manager and included the DHS Federal Compliance Manager with representatives from the Oregon Tribes' child welfare programs. The five-year plan includes strengths, barriers, quality assurance, policy and strategies to prevent and reduce Indian children in state custody. The plan also includes collaboration and cost-shared projects to ensure tribal child welfare programs are included in policy making and resources are available to the Tribes. Oregon Tribes have had a long history of positive partnerships and collaboration. These partnerships and collaboration are the unique aspect of Oregon that has promoted positive tribal-state working relationships. DHS' ICWA manager facilitates the Oregon DHS tribal-state advisory quarterly meetings, the DHS ICWA regional liaison quarterly meetings, and the ICWA annual conference.

**GAO ICWA Audit:**

At the request of Congress, the GAO is conducting a study of the Indian Child Welfare Act (ICWA). Oregon was identified to participate in the first site visit in January 2004. The weeklong individual site visits included two Oregon Tribes, state judges, assistant attorneys general, DHS administrators and the Metro-ICWA unit. The intent of the audit was described as “gathering information on (1) the factors that influence placement decisions for American Indian children subject to ICWA, particularly as they relate to the Adoption and Safe Families Act’s goals of safety, permanency, and well-being of children, (2) the extent to which delays have
occurred in the foster or adoptive placement of these children due to issues related to the implementation of ICWA and how they have affected children’s experiences in care, and (3) the federal government’s role in overseeing states’ implementation of ICWA and whether any additional actions are needed to improve the timeliness of foster and adoptive placements for American Indian children subject to ICWA."
In addition, extensive data were requested about children subject to ICWA compared to other children in foster care.

DHS submitted a letter of support for the ICWA audit and identified concerns about the GAO audit, based on the long-established relationship and collaboration with the Oregon Tribes.

**Tribal Agreements:**

The Confederated Tribes of Umatilla and DHS finalized the inter-governmental IV-E agreement in July 2004. The Klamath Tribes of Oregon inter-governmental IV-E agreement will be finalized and signed by the end of year. DHS is providing technical assistance to both tribes as they begin the start-up process. With the two additional inter-government IV-E agreements completed six of the nine Oregon Tribes are able to access federal entitlement resources for administration, training and foster care maintenance. Tribes do not have the ability to access directly through the federal government and must therefore enter into an inter-governmental agreement with the state.

**System of Care:**

The nine tribes of Oregon are included in the DHS Children, Adults and Families System of Care (SOC) resources; contracts with each of the tribes were finalized. The System of Care will provide tribal child welfare programs with the resources to assist families and children with direct services in the areas of housing and food; transportation; assessment and testing evaluation; therapeutic and rehabilitation services; skills training and support; support services for caregivers; and well-being and developmental needs. The appropriation is approximately $247,000 for the nine Oregon Tribes.

**2004 tribal/state ICWA conference:**

The tribal-state ICWA conference was held October 12-13, 2004, in Pendleton, with the Confederated Tribes of Umatilla Indian Reservation and DHS acting as co-hosts. The conference theme was “Protecting Our Children Preserving our Future.” The purpose of the conference was to address the principles of the Indian Child Welfare Act and to increase group awareness with a holistic approach through tribal-state collaboration.
Conference goals:

- To build upon and promote relationships between the nine Oregon tribes and the Oregon Department of Human Services;
- To facilitate roundtable discussions between the Oregon Tribes and DHS to identify challenges, strengths and solutions for ICWA compliance and collaboration;
- To educate state and tribal policy makers, administrators, and DHS liaisons about the Indian Child Welfare Act;
- To demonstrate successful collaboration of the Oregon Tribes and the State through the consultation process and development of the five-year IV-B statewide child welfare plan of which ICWA compliance is a component;
- To honor the historical experience of the tribes in their cultural teachings and traditions implemented in their child welfare programs; and
- To obtain participatory input toward common sense solutions for bridging the tribal and state systems and relationships.

Tribal Training Institute:

Through a Children’s Justice Act grant, a three-day tribal training Institute was held in May 2004 in Clackamas. The purpose of the Institute was safety, well-being and permanency in tribal communities. The Institute focused on child protection, court and legal issues and family-centered practice. The Institute was held in collaboration with the Oregon Department of Human Services and four of the national resource centers: Family Centered Practice (lead resource center), Foster Care Permanency Planning, Child Maltreatment, and Legal and Judicial Issues. Nationally recognized Native American experts and resource center consultants facilitated the workshops and keynote presentations. The Institute addressed the challenges of systems change through an approach of teamwork, training and strategic thinking.

Outcomes:

- Increasing definition and understanding of tribal council and program administrator roles and responsibilities in child protection;
- Developing community awareness and collaborations that support program goals for family-centered child welfare practice;
- Developing and implementing a quality assurance process in the foster care program;
• Developing and providing training across programs (child welfare, courts, tribal police, other services) to ensure child safety, well-being and permanency.
• Developing and implementing a strategic plan to accomplish these goals.

Principles & Expectations for Active Efforts:
DHS Children, Adults and Families, the Citizen Review Board and representatives from the Oregon Tribes completed statewide training on the Principles & Expectations for Active Effort. The document provides training and is a reference guide to meet the federal mandate of the Indian Child Welfare Act; it was a three-year process, so completion of the statewide training was considered a major milestone. This is the first document of its kind throughout the nation and other tribes, states and child welfare organizations are requesting copies as well as training at conferences.

Fetal Alcohol Syndrome:
The ICWA program continues to administer the Fetal Alcohol Syndrome/Effects (FAS/FAE) grant for education, training and systems development in the Oregon tribal child welfare and health care systems. DHS Children, Adults and Families cluster has implemented the project in collaboration with the DHS Health Services cluster. Phase III of the work was been implemented in the tribal communities.

Temporary Assistance for Needy Families (TANF)
The DHS Intergovernmental TANF Agreement has been a success in the relationship between DHS and the Tribes of Oregon.

DHS has negotiated and renewed agreements with the Klamath Tribe and the Confederated Tribes of Siletz.

The two Tribal TANF programs continue to operate smoothly with support from DHS Director's Office and the DHS local service delivery area offices also supporting tribal TANF.

Vocational Rehabilitation
Oregon Tribes and the Office of Vocational Rehabilitation Services have collaboratively engaged in developing Cooperative Agreements with the Confederated Tribes of Warm Springs and the Confederated Tribes of Grand Ronde to provide rehabilitation services to their tribal members. The DHS Office of Vocational Rehabilitation Services is actively committed to strengthening partnerships with our peers working in the tribal vocational rehabilitation programs.
IN CONCLUSION

While extensive, this 2004 annual report is intended to present only highlights of the full range of effort that we believe DHS has brought this year to our work with Oregon’s nine federally recognized Tribes. The culture of these Tribes reflects a central part of Oregon’s history and heritage as well as challenges in meeting contemporary needs. Therefore, DHS devotes significant resources and energy across the agency to maintaining and improving our collaborative partnership. Although we believe we are doing a creditable job, and we invite representatives of the Tribes and other stakeholders to advise us how we can be more effective.

Gary K. Weeks, Director