

December 15, 2003

Oregon Department of Human Services

2003 Government-to-Government Report

Introduction

We are pleased to submit this 2003 report on the Oregon Department of Human Services (DHS) collaboration with Oregon's nine federally recognized tribes. We prepare this report each year for the Governor's office and for the Legislative Commission on Indian Services, and also post the report on the DHS Web site for public use.

The message of this annual report is that DHS continues to work vigorously to strengthen our ties with Oregon's nine Tribes, with areas of mutual interest reflecting the array of issues that DHS addresses:

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

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

The importance of addressing a number of issues covered in this report was identified during Government-to-Government Health Services meetings, which are held quarterly as required by Senate Bill 770.

The Department

Oregon received national attention beginning in 2001 when the state Department of Human Services began a first-in-the-nation restructuring to serve clients and communities better. At the heart of the Remaking DHS effort was furthering the agency's decade-old integration effort, which sought to allow Oregonians to obtain a range of needed services without having to visit multiple offices.

Another important element of this effort was to eliminate the sometimes semi-autonomous divisions and structures and to centralize functions such as contracting, intended to have a positive impact on providers and other partners.

All of this work began under legislative authorization in House Bill 2294 (2001).

During 2003, DHS Director Jean I. Thorne initiated a review of the comprehensive restructuring and streamlining work. While making it clear that integrated services make sense for clients and communities, Thorne sought opinions about the restructuring from providers, partners, employees, managers and other stakeholders. Her questions boiled down to asking what was working, what wasn't, and what could work with some revisions.

As a result of this input, some changes are being made, such as melding the DHS field structure and the central Children, Adults and Families Group, and bringing the state-operated segment of the Seniors and People with Disabilities field structure under the central program and policy office. This is unifying DHS policy and DHS field practice.

DHS will continue to value the best thinking of Oregon's Tribes as it continues this comprehensive work on behalf of clients and communities.

Supporting government-to-government meetings

DHS is the lead agency for the Health Services cluster meetings that Senate Bill 770 (2001) requires. (The legislation put into law key elements of Executive Order 96-30, designed to ensure that state agencies work

positively with Tribes.) DHS organizes and provides logistical support for these quarterly meetings.

For each meeting, DHS reports on its work, listens to participating stakeholders, prepares the minutes and readies an action-item list. DHS tribal liaisons are responsible for completing or reporting progress on action items in their disciplines on or before the next scheduled meeting. This process continues to ensure steady progress on tribal issues.

Electronic communication and the Web

- DHS instituted electronic communication with the Tribes and Urban Indian programs. As a result, problem-solving response time has improved.
- The new DHS Web site [www.dhs.state.or.us/], launched in early 2003, includes a section for the department's tribal-relations work [www.dhs.state.or.us/aboutdhs/govrelations/tribes/]. This section delivers a history of interaction between the Tribes and DHS, the minutes of the Health Services cluster meetings, links to other sites, and these government-to-government reports.

Funding and contracting

- As a result of research by the DHS Director's Office, Tribes are now able to access Title XIX (Medicaid) administrative funds. DHS obtained federal approval to expand the State Plan amendment for targeted case management to include the Tribes. This will result in the Tribes being able to expand their social service programs.
- DHS administration has been working with the Tribes to establish a more streamlined contracting process between the Tribes and DHS. Contract language more respectful of Tribal sovereignty has been adopted. The DHS Office of Contracts and Procurement and the Tribes continue to discuss consolidating contracts between DHS and the Tribes to further simplify contracting procedures.

Health Services: Health care

Health care, besides being a continuing focus of national attention, is also an ongoing major agenda item for DHS and the Tribes. The DHS Office of

Medical Assistance Programs (OMAP), a part of the agency's Health Services group, continues its work with the Tribes in these areas:

- Assisting Tribal members in crafting SB 878, passed by the Legislature, seeking fully reimbursable Oregon Health Plan-Standard coverage for tribal members even if the Standard benefit package were otherwise curtailed. An initial CMS denial was based on possible discrimination against other OHP-Standard clients, and the issue was subsequently referred to the U.S. Office of Civil Rights.
- Requesting from the federal Centers for Medicare and Medicaid Services (CMS) an Operational Protocol Amendment allowing American Indian and Alaska Native clients who are eligible for the Oregon Health Plan-Standard benefit package to continue to receive retroactive enrollment. This is still awaiting approval from CMS, which has declined further comment until a decision is made on Senate Bill 878.
- Tribes reviewed and gave input on the Department's 2003-05 Waiver Amendment request to CMS.
- Tribes participated in the 2003-05 Oregon Health Plan benefit development.
- Tribes are participating in the 2003-05 OHP Dental Workgroup, charged with developing alternative dental packages.
- A Grand Ronde physician made a presentation to the Statewide Quality Improvement Work Group's Racial and Ethnic Health Disparities Conference.
- A dentist from the Warm Springs Tribe presented a caries-prevention study at the Oral Health Summit in mid-November.
- OMAP is working with DHS field staff to improve staff understanding of tribal members' exemptions to managed-care enrollment, OHP-Standard premiums, and co-pays.
- OMAP made a site visit to assist Warm Springs with understanding OMAP policy and reimbursement rules.
- OMAP's Federal Financial Participation unit developed and implemented an administrative match plan for the Tribes, resulting in their being able to claim federal matching funds for Oregon Health Plan outreach work.
- DHS offers tribal travel reimbursement for quarterly meetings.
- All OMAP units continue to work with Tribes on day-to-day operational issues such as managed care enrollment, billing and dis-enrollment.
- OMAP participates in the Tribal-DHS quarterly meetings and the monthly DHS Liaison meetings.

- OMAP is working with the DHS Children, Adults and Families and Seniors and People with Disabilities groups to ensure culturally appropriate language on Oregon Health Plan applications and to train DHS staff about American Indian-Alaska Native exceptions to OHP rules.

Health Services: Mental Health

The DHS Office of Mental Health and Addiction Services (OMHAS) continues to partner with the nine federally recognized Tribes on issues ranging from joint planning for and participation in conferences to continuing development of a plan for Tribes to become Local Mental Health Authorities.

Residential treatment for tribal youth has become a major project for DHS and the Tribes, who are discussing access to residential programs that provide mental health services for adolescents. A series of 2004 meetings is being designed to provide the Tribes with a roadmap for accessing residential services and to discuss funding sources for these programs.

In addition, DHS has:

- Continued dialogue with Tribes about tribal-specific children's residential mental health.
- Worked with the Warm Springs Tribe to develop contracts for children's mental health services.
- Developed and amended a children's residential contract with Eastern Oregon Adolescent Multi-Treatment Center to provide increased access for all of Oregon's federally recognized tribes.
- Convened a committee (OMHAS, in cooperation with the Oregon Indian Council on Addiction) to start discussions about SB 267, which addresses "Scientific Evidence Based Programs" in mental health and addiction services as they relate to Tribes and their contracts.
- Continued to consider (OMHAS staff in partnership with tribal representatives) racial and ethnic issues related to mental health and cultural-competence conference planning.

- Developed greater tribal coordination between mental health services and addiction services.
- Participated in work of the Indian Child Welfare Act (ICWA) advisory council.

Health Services: Alcohol and Drug Abuse

- The Tribes of Oregon, the Native American Rehabilitation Association, and the Chemawa Indian Center have formed Fetal Alcohol Syndrome teams. They completed the first phase consisting of heightening awareness of fetal alcohol syndrome, a training “booster session” to review what they learned, and to refine the work of their teams. This was accomplished using alcohol- and other drug-prevention dollars from state general funds. The next phase will begin soon with federal funds from the DHS Children, Adults and Families group.
- Alcohol- and drug-prevention coordinators for the Tribes and OMHAS staff meet regularly to discuss prevention best practices. The importance of best practices, long a priority, was elevated by 2003 legislative direction about validating outcomes. As a result, we have established a work group to identify best practices for tribal outcomes.
- Each of the nine tribes receives \$47,500 per year to address alcohol and other drug prevention. Seven of the Tribes have obtained letters of approval from DHS; letters of approval for the Coos and Coquille Tribes, which don’t provide treatment, are pending.

Health Services: Public Health

- Three top-level DHS public health managers now attend the SB 770 Health Services cluster meetings: Donalda Dodson, Office of Family Health; Gail Shibley, Office of Health Systems; and Mel Kohn, M.D., state epidemiologist.
- At the request of the Grand Ronde Tribe, the DHS Office of Public Health Systems made a presentation to a quarterly meeting about the proposed Columbia River dredging’s nutritional impact on fish. This presentation also opened up avenues for better sharing of state fish advisories with Tribes.

- The Siletz Tribe was one of six recipients of funding to develop a public-education campaign for safe fish consumption. Funding is from the Portland Harbor Super-fund Site through a grant from the Super-fund Health Investigation & Education (SHINE) Program.
- The DHS Office of Multicultural Health and the Native American Rehabilitation Association (NARA) are jointly developing a Strengths/Needs Assessment of the Urban Indian population in the Portland tri-county area. This partnership is now identifying and leveraging seed money.
- The DHS Office of Family Health and the Office of Mental Health and Addiction Services collaborated on a program to increase understanding and prevention of fetal alcohol syndrome among tribal members.
- The DHS Breast and Cervical Cancer Program continued funding for a half-time prevention coordinator at Indian Health Services. Funding is provided to Tribes for education and promotion. Funding is also provided to the Siletz for screening services. Technical assistance is provided to the Women's Health Promotion Coalition, comprising representatives from each of the Tribes, NARA, and the NW Area Indian Health Board.
- The Women, Infants and Children's (WIC) nutritional program works at the local level with the Confederated Tribes of the Warm Springs and the Confederated Tribes of the Umatilla, both of which manage their own WIC Programs. DHS provides funding to these programs. The programs operate under DHS assurances of compliance with federal rules, with DHS-provided training, staff development, consultation, and nutritional services.
- In November, the DHS Office of Multicultural Health delivered a five-part "Indian Heritage Month" awareness campaign that has already developed at least one potential community-based partnership of Native American programs and Tribes.
- As a result of budget reductions required to balance the state budget, this year also saw the unfortunate suspension of the DHS Tobacco Education and Prevention Program, which included funding for Tribes. Some Tribes have been able to keep programs going through other creative funding strategies.

Seniors and People with Disabilities (SPD)

- Increased outreach and service coordination between Area Agency on Aging (AAA) Title III programs and Native American Title VI programs under the Older Americans Act is a goal of Oregon's State Plan on Aging. DHS Seniors and People with Disabilities, as the State Unit on Aging, identified its expectation of AAAs to strengthen connections with local tribes, to improve access to services for Native American elders, and to collaborate on service delivery for congregate and home-delivered meals, caregiver support services, and elder-abuse prevention.

The new AAA area plan template was completed this year and requires each AAA to address tribal coordination and outreach. This includes outlining at least one goal, complete with objectives, activities, targeted dates and anticipated outcomes or accomplishments. These activities are considered part of the statement of work in AAA contracts with the State. The plan also requires the AAAs to describe methods used to reach Native American elders in their service areas. In October 2003, the AAAs submitted their 2003-2007 area plans for service delivery for review by the State Unit on Aging. That review is now in progress.

- Agency awareness of tribal issues has increased. In fact, 2003 saw an 800 percent increase in SPD field staff contacts with tribal representatives about tribal client issues and program policies. In 2002, such contacts averaged one a month and in 2003 contacts increased to at least twice weekly. Requested information indicates a heightened staff awareness of tribal-specific issues, as well.

We also recorded a 400 percent increase in calls from tribes about Seniors and People with Disabilities service-delivery and benefit issues, with most issues resolved satisfactorily.

- The Family Caregiver Support coordinator presented training at a January 2003 caregiving workshop sponsored by the Siletz social services office. Content included skills training, caregiver support needs, safety and health issues associated with caring for an older adult with heavy care needs, as well as cognitive and behavioral issues.

Following this, the Family Caregiver Support coordinator made several more visits to Siletz to provide technical assistance and support in the Title

VI program's development of a family caregiver support program. At the request of the Warm Springs Title VI program staff, the coordinator also served as a consultant to the Title VI director in evaluating Warm Springs' newly formed family caregiver support program and providing technical assistance.

- In the area of medical outreach, the DHS Abuse Prevention Unit obtained grant funds this year to do Medicare consumer-rights education, and to deliver Medicare-fraud information to the tribes. In October 2003, a session held in Warm Springs was attended by 70 tribal social service staff and tribal elders.

- An elder-abuse video, "Restoring the Sacred Circle," was produced in 2002 by the Abuse Prevention Unit in the DHS Seniors and People with Disabilities group. The video, focusing on elder abuse in Native American communities, won the Best Public Service Film award at the American Indian Film Institute's film festival in San Francisco. The Abuse Prevention Unit continues to make the video available to interested parties. In Oregon and across the country, the video received much attention and acclaim during 2003, including being used statewide in elder-abuse protective-service trainings.

In addition to delivering elder-abuse subject matter, "Restoring the Sacred Circle" provides historical information about American Indian tribes, including events that negatively affected Indian culture and led to critical social issues that tribes face today. The Seniors and People with Disabilities Case Management Basics training module now uses this video for both adult protective-services training and to promote understanding of tribal history and modern social issues. This is followed by discussion of the government-to-government relationship, Senate Bill 770, tribal sovereignty, and the uniqueness of Oregon's Tribes.

As a result of showing this video at trainings, there have been repeated requests from field staff to reserve the video for both in-office and public viewing. Many viewers have reported being moved by the video, and its historical component has been an eye-opener for many audiences.

- In the area of tribal elder abuse prevention, the Abuse Prevention Unit also worked with the Indian Country Coalition Against Domestic Violence & Sexual Assault to plan trainings for 2004 with the Klamath, Umatilla and

Coos Tribes. The trainings will focus on domestic violence and sexual abuse of tribal elders, including how to improve the criminal justice response to it.

While working with the Indian Country Coalition, the Abuse Prevention Unit delivered specialized training to coalition members and interested parties during four of their monthly all-day meetings this year (two training sessions in Bend, two in Umatilla).

Children, Adults and Families

Indian Child Welfare Act (ICWA) Program

DHS-Children, Adults and Families, the Citizen Review Board and representatives from the Oregon Tribes began statewide training on the “Active Effort Principals & Expectations.” The training document is a reference guide to meet the federal mandate of the Indian Child Welfare Act, which stipulates that active effort must be made to help reunite parent(s) and child(ren) in child-abuse or –neglect cases. A three-year process, the launch of this training is a major milestone statewide. This collaboration produced the nation’s first document of its kind, which has prompted interest from other tribes and states.

Tribal Agreements

The Confederated Tribes of Umatilla and the Klamath Tribes of Oregon have expressed interest in negotiating an inter-governmental IV-E (Foster Care) agreement. Technical assistance is being provided to both tribes as they begin the process.

The nine tribes of Oregon are included in the System of Care appropriations; contracts with each of the tribes are being finalized. The System of Care will provide tribal child-welfare programs with resources to assist families and children with direct services for housing and food; transportation; assessment and 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.

The Tlingit and Haida tribe of Alaska and DHS completed the final review of the ICWA agreement and it is near readiness for signature.

2003 tribal/state ICWA conference

The tribal-state Indian Child Welfare Act conference was held October 28-29, 2003, in Siletz and Lincoln City. The Confederated Tribes of Siletz co-hosted the conference with DHS. The conference theme: “Weaving our culture and communities together for a stronger future.” The conference’s purpose was to address the principles of the Indian Child Welfare Act and to increase group awareness with a holistic approach toward tribal-state collaboration.

Conference goals:

- To build upon and promote new relationships between the nine Oregon tribes and the Oregon Department of Human Services;
- To understand why inter-generational trauma affects Native American families involved in the state or tribal child welfare systems;
- To educate state and tribal policy makers, administrators, and DHS liaisons on the Indian Child Welfare Act;
- To demonstrate successful collaboration of the Oregon Tribes and the state through the “Active Efforts Principals & Expectations” guide;
- To honor the knowledge of the elders in their cultural teachings in hopes of not repeating history’s mistakes; and
- To obtain participation in crafting common-sense solutions for bridging tribal and state systems and relationships.

Through a Children’s Justice Act grant, training and other services are provided to the Oregon Tribes to strengthen their child-welfare systems. The focus has been on child-protective services. Through the ICWA advisory committee, the Tribes are reviewing and making recommendations for amendments to the work plan.

The ICWA program continues to administer the Fetal Alcohol Syndrome/Effects grant for education, training and systems development in the Oregon tribal child welfare and health care systems. The DHS Children, Adults and Families cluster has implemented this project in collaboration with the DHS Health Services cluster. Phase III of the scope of work will be applied in tribal communities, and will cover a continuum of services. As a result, DHS will participate in developing a system of identification and prevention of Fetal Alcohol Syndrome and Alcohol-Related Neurodevelopment Disorder, now commonly referred to as the Fetal Alcohol Spectrum (FAS) and found primarily in Native American populations in Oregon.

DHS intends to:

- Continue to develop and train community teams focusing on FAS-related services.
- Assist community teams in developing strategies, plans, and materials to facilitate prevention and early intervention of FAS in their communities.
- Assist participants in the identifying appropriate community provider sites, including, but not limited to: health clinics, early childhood centers, mental health and social service delivery sites, schools, and community resource settings.
- Develop appropriate referral procedures and policies. This may include development and negotiation of service agreements with service providers at individual and community-based sites.

Temporary Assistance for Needy Families (TANF)

- The DHS Intergovernmental TANF Agreement has been a success in strengthening 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 so that they may operate their own TANF programs.

Vocational Rehabilitation

Oregon Tribes and the DHS Office of Vocational Rehabilitation Services have collaboratively engaged in activities such as:

- Sharing financial resources to achieve successful employment outcomes;
- Eliminating barriers to employment through diabetes training and medical care;
- Developing increased on-the-job training and work experience sites on and near reservations; and
- Recruiting tribal members for internship opportunities with local state offices.

During FY 2003, joint sessions conducted at Warm Springs, Grand Ronde, and in Salem proved helpful in enhancing tribal-state vocational rehabilitation services. In addition, the Office of Vocational Rehabilitation Services served 381 Native Americans residing off reservation in the first 10

months of 2003. We are committed to strengthening partnerships with our peers working in the tribal vocational rehabilitation programs

In conclusion

This annual report, while extensive, is intended to present only highlights of the full range of effort that 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 its modern issues. Therefore, DHS devotes significant resources across the agency to integrating this important population into its statewide work. We believe we are doing a creditable job, and we invite representatives of the Tribes and other stakeholders to advise us how we might be more effective.

Jean I. Thorne, Director

Date