



AGENDA

Thursday, January 12, 2012 - 10:00 AM
Board of County Commissioners Business Meeting

Beginning Board Order No. 2012-01

I. PRESENTATION *(Following are items of interest to the citizens of the County)*

1. Proclaiming Clackamas County's Support for Jobs, Wages and Benefits (BCC)

II. DISCUSSION ITEM *(The following items will be individually presented by County staff or other appropriate individuals. Citizens who want to comment on a discussion item may do so when called on by the Chair.)*

Tourism & Cultural Affairs

1. Resolution No. _____ Supporting Efforts to Establish a Willamette Falls National Heritage Area and Urging Designation by Congress (Danielle Cowan)

III. CITIZEN COMMUNICATION *(The Chair of the Board will call for statements from citizens regarding issues relating to County government. It is the intention that this portion of the agenda shall be limited to items of County business which are properly the object of Board consideration and may not be of a personal nature. Persons wishing to speak shall be allowed to do so after registering on the blue card provided on the table outside of the hearing room prior to the beginning of the hearing. Testimony is limited to three (3) minutes. Comments shall be respectful and courteous to all.)*

IV. CONSENT AGENDA *(The following items are considered to be routine, and therefore will not be allotted individual discussion time on the agenda. Many of these items have been discussed by the Board in Study Session. The items on the Consent Agenda will be approved in one motion unless a Board member requests, before the vote on the motion, to have an item considered at its regular place on the agenda.)*

A. Health, Housing & Human Services

1. Board Order No. _____ Approval of the Mental Health Director's Designees to Authorize a Custody Hold Under ORS 426.233 - BH
2. Approval of a Behavioral Health Services Agreement with LifeWorks NW for Psychiatric Day Treatment Services to Oregon Health Plan Enrollees Under Age 18 – BH
3. Approval to Submit the 2012-2014 Triennial Plan for Public Health Services to the Oregon Health Authority, Public Health Division - CH

B. Department of Transportation & Development

1. Approval of an Intergovernmental Agreement between Clackamas County and Metro for Transportation Modeling/Forecasting Services – Metro Contract No. 930985

C. Elected Officials

1. Approval of Previous Business Meeting Minutes – bcc

D. Business & Community Services

1. Approval to Execute an Easement Agreement for the Boring Station Trailhead Park
2. Board Order No. _____ Authorizing the Director of Business and Community Services to Sign and Execute Documents to Complete the Exchange of the County's Hunchback Mountain Property
3. Board Order No. _____ Authorizing the Director of Business and Community Services to Execute the Thunder and Lightning Timber Sale

V. COMMISSIONERS COMMUNICATION

NOTE: Regularly scheduled Business Meetings are televised and broadcast on the Clackamas County Government Channel. These programs are also accessible through the County's Internet site. DVD copies of regularly scheduled BCC Thursday Business Meetings are available for checkout at the Clackamas County Library in Oak Grove by the following Saturday. You may also order copies from any library in Clackamas County or the Clackamas County Government Channel.

<http://www.clackamas.us/bcc/business/>

**PROCLAIMING CLACKAMAS COUNTY'S SUPPORT
FOR JOBS, WAGES, AND BENEFITS**

WHEREAS, the financial stability created by jobs is an indispensable part of a successful community;

WHEREAS, the jobs that most surely support financial stability are jobs with employers that pay living wages to skilled and educated workers with high productivity, provide health care benefits, promote the longevity of workers in their positions, encourage job safety, advance the certifications of workers, and provide the opportunity to make contributions towards a retirement plan;

WHEREAS, Clackamas County recognizes the power of focused investment to create jobs that provide the greatest degree of financial stability; and

WHEREAS, the Legislature, through the amendments made to ORS 279A.128 by Chapter 237 Oregon Laws 2011 and similar legislative changes has recognized the benefits of certain preferences in public contracting.

NOW, THEREFORE, WE DO HEREBY PROCLAIM that as part of its selection of appropriate economic development undertakings, personal and professional services contracts, and public construction projects that serve the needs of residents and businesses Clackamas County will place as a priority the selection of projects that result in jobs that pay living wages to skilled and educated workers with high productivity, provide health care benefits, encourage the longevity of workers in their positions, promote safety, advance the certifications of workers, and provide the opportunity for a pension; and

WE DO FURTHER PROCLAIM Clackamas County's intent to observe at all times the requirements for bidding on public improvement contracts and the prevailing wage law that provides a living wage for workers, all as set out in ORS Chapters 279A, 279B, and 279C and their accompanying regulations; and

WE DO FURTHER PROCLAIM that using local sources for workers, materials, and expertise is recognized as the method producing the most immediate economic benefit to the workers and businesses of Clackamas County; and

WE DO FURTHER PROCLAIM that Clackamas County will look for ways to encourage employers that establish state-registered apprenticeship programs and opportunities to advance emerging businesses owned or operated by women, minorities, or others not historically represented in the trade or industry.

DATED this 12th day of January, 2012.

CLACKAMAS COUNTY BOARD OF COMMISSIONERS

Chair

Recording Secretary



CLOSE TO PORTLAND...A WORLD AWAY™

January 12, 2012

Board of Commissioners
Clackamas County

Members of the Board:

**RESOLUTION SUPPORTING EFFORTS TO ESTABLISH A WILLAMETTE FALLS
NATIONAL HERITAGE AREA AND URGING DESIGNATION BY CONGRESS**

The Willamette Falls and surrounding vicinity is a place where natural, cultural, and historic resources coalesce to form an area of regional and national importance. It is the nexus of geologic formations created by the Missoula Floods, which contributed to the fertility of the Willamette Valley. It was a focal point of trade and fishing for native peoples. After discovery by white explorers, it became an area of significance for trapping and trading interests including the Hudson's Bay Company. These activities paved the way for settlement and the establishment of the first incorporated city and official seat of government in the American West. When word spread of the bounties and opportunities available in the Oregon Territory the Area became a major destination point for the Oregon Trail; one of the largest overland migrations in human history. The Falls and surrounding Area continued to influence the development of the region and the Nation. The Falls themselves became an important industrial resource by providing mechanical, and eventually hydroelectric power, to local woolen and paper mills. The Willamette Falls are also home to the oldest multi-lift navigational locks in the United States.

Beginning in 2006, a group of public, private, and nonprofit organizations came together under the common goal of preserving the Willamette Falls area's heritage and sharing it with visitors from near and far. After several years of exploring ideas, goals, and potential projects, the group arrived at a bold new strategy. In 2010, Congressman Kurt Schrader introduced House Resolution 4081 on behalf of the Falls coalition, which would have funded a feasibility study necessary for establishing a National Heritage Area around the Willamette Falls. To capitalize on the momentum of HR 4081, and to create a more formalized body to support the National Heritage Area goal, the group formed the Willamette Falls Heritage Area Coalition.

Participating partners in the Coalition currently include:

- City of West Linn
- City of Oregon City
- Clackamas County
- Clackamas County Tourism Development Council
- Confederated Tribes of the Grand Ronde

- Oregon State Historic Preservation Office
- Oregon Parks & Recreation Department
- Clackamas County Historical Society
- Clackamas County Arts Alliance
- Main Street Oregon City
- Main Street West Linn
- Ice Age Floods Institute
- Willamette Falls Heritage Foundation
- Portland General Electric
- West Linn Paper Company

While House Resolution 4081 did not pass into law, efforts by the coalition continued. With funding contributed by members, the Coalition hired a project manager to coordinate outreach, conduct research, secure community support, and draft a Feasibility Study to be submitted to the National Parks Service for evaluation. Approval by the National Parks Service is the first step for achieving National Heritage Area status, followed by Congressional authorization. If approved, the Willamette Falls Heritage Area would be the first national heritage area established on the West Coast.

The outreach, research, and drafting phases are near completion. In February 2012, the Coalition will begin sharing the draft study with the public and incorporating vetted changes into the final draft. When submitted, the Feasibility Study will include letters of support from individuals and organizations, as well as resolutions and proclamations from supportive jurisdictions. As a member of the Coalition, it is appropriate that Clackamas County contributes support for National Heritage Area status in the form of a letter and Resolution to be included in the final Feasibility Study submission.

Attached, for the Board's consideration, is a resolution of support from Clackamas County.

RECOMMENDATION

It is respectfully requested that the Board of County Commissioners articulate its support of efforts to establish a Willamette Falls National Heritage Area by approving the attached resolution.

Sincerely,


Danielle Cowan
Executive Director,
Clackamas County Tourism & Cultural Affairs

For information on this issue or copies of attachments,
please contact Jim Austin at 503-742-5901

**BEFORE THE BOARD OF COUNTY COMMISSIONERS
OF CLACKAMAS COUNTY, STATE OF OREGON**

A Resolution Supporting Efforts to
Establish a Willamette Falls National
Heritage Area and Urging Designation
by Congress



Resolution No.

Whereas, National Heritage Areas are designated by Congress as places where natural, cultural, and historic resources combine to form a cohesive, nationally important landscape; and

Whereas, the Willamette Falls Area is an important nexus of the geologic formations created by the Missoula Floods, including the Willamette Meteorite and the foundation of the unmatched fertility of the Willamette Valley; and

Whereas, the Falls Area was an important gathering place for fishing and trade amongst numerous tribes for centuries prior to white settlement; and

Whereas, the Falls Area has been and continues to be an important transportation hub for trade, commerce and recreation; and

Whereas, following discovery by white explorers in 1810, the Falls Area became a focal point for early trappers and traders, including the Hudson's Bay Company and Dr. John McLoughlin; and

Whereas, trading activities led to establishment of the first incorporated city and official seat of government in the American west; and

Whereas, the 2000-mile journey of the Oregon Trail ended at the Falls Area, making it a destination point for one of the largest overland migrations in human history; and

Whereas, the power of Willamette Falls has inspired human industry since its discovery, providing mechanical power for early saw mills and eventually hydroelectric power for local woolen and paper mills and is home to the oldest multi-lift navigation locks in the United States.

NOW, THEREFORE, IT IS HERBY RESOLVED that Clackamas County supports the efforts of the Willamette Falls Heritage Area Coalition to attain National Heritage Status for the Willamette Falls Area; urges the National Parks Service to find that such status is merited, and urges Congress to designate and create a Willamette Falls National Heritage Area.

DATED this 12th of January, 2012.

CLACKAMAS COUNTY BOARD OF COMMISSIONERS

Chair

Recording Secretary

January 12, 2012

Board of County Commissioners
Clackamas County

Members of the Board:

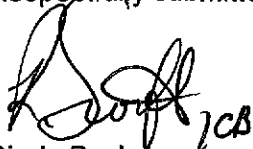
**Board Order # _____ Approval of Mental Health Director's
Designees to Authorize a Custody Hold Under ORS 426.233**

The Behavioral Health Division of the Health, Housing & Human Services Department requests the approval of the Designation of Egan Danehy, LPC; Dzenana Halstead, MS; Pete Patton, LCSW; Shira Avigal, MS; Heather Balducci, MSW; Richard Braucher, MSW and Scott Fitzwater, LPC by the Clackamas County Behavioral Health Director as additional designees authorized under ORS 426.233 (copy attached) to direct a peace officer to take a person into custody and remove the person to a hospital or non-hospital facility approved by the Oregon Mental Health and Developmental Disability Services Division.

Recommendation

Staff recommends the Board approve the attached Board Order of Egan Danehy, LPC; Dzenana Halstead, MS; Pete Patton, LCSW; Shira Avigal, MS; Heather Balducci, MSW; Richard Braucher, MSW and Scott Fitzwater, LPC as additional qualified mental health professionals authorized to direct a peace officer to take a person into custody under ORS 426.233.

Respectfully submitted,



Cindy Becker
Director

For more information on this issue or copies of attachments,
please contact Teri Beemer at 503 655-8356

Healthy Families. Strong Communities.

**BEFORE THE BOARD OF COUNTY COMMISSIONERS
OF CLACKAMAS COUNTY, STATE OF OREGON**

In the Matter of the Designation of Egan
Danehy, LPC; Dzenana Halstead, MS;
Pete Patton, LCSW; Shira Avigal, MS;
Heather Balducci, MSW; Richard
Braucher, MSW and Scott Fitzwater, LPC
as Mental Health Director Designees to
Direct Peace Officer Custody Holds



ORDER NO.

This matter coming on at this time to be heard, and it appearing to this Board that Cindy Becker, Director of Health, Housing & Human Services Department, has recommended to this Board the approval of Egan Danehy, LPC; Dzenana Halstead, MS; Pete Patton, LCSW; Shira Avigal, MS; Heather Balducci, MSW; Richard Braucher, MSW and Scott Fitzwater, LPC as additional designees of the Behavioral Health Division Director, authorized under ORS 426.233 to direct a peace officer to take a person into custody and remove the person to a hospital or non-hospital facility approved by the Oregon Mental Health and Developmental Disability Services Division, and

This Board finds that it would be in the best interest of Clackamas County to approve said designation,

IT IS THEREFORE HEREBY ORDERED that Clackamas County approve the designation of Egan Danehy, LPC; Dzenana Halstead, MS; Pete Patton, LCSW; Shira Avigal, MS; Heather Balducci, MSW; Richard Braucher, MSW and Scott Fitzwater, LPC as qualified mental health professionals authorized to direct a peace officer to take a person into custody under ORS 426.233.

ADOPTED this 12th day of January, 2012.

BOARD OF COUNTY COMMISSIONERS

Chair

Recording Secretary

426.233 Authority of community mental health program director and of other persons; costs of transportation. (1)(a) A community mental health program director operating under ORS 430.610 to 430.695 or a designee thereof, under authorization of a county governing body, may take one of the actions listed in paragraph (b) of this subsection when the community mental health program director or designee has probable cause to believe a person:

(A) Is dangerous to self or to any other person and is in need of immediate care, custody or treatment for mental illness; or

(B)(i) Is a mentally ill person placed on conditional release under ORS 426.125, outpatient commitment under ORS 426.127 or trial visit under ORS 426.273; and

(ii) Is dangerous to self or to any other person or is unable to provide for basic personal needs and is not receiving the care that is necessary for health and safety and is in need of immediate care, custody or treatment for mental illness.

(b) The community mental health program director or designee under the circumstances set out in paragraph (a) of this subsection may:

(A) Notify a peace officer to take the person into custody and direct the officer to remove the person to a hospital or nonhospital facility approved by the Oregon Health Authority;

(B) Authorize involuntary admission of, or, if already admitted, cause to be involuntarily retained in a nonhospital facility approved by the authority, a person approved for care or treatment at a nonhospital facility by a physician under ORS 426.232;

(C) Notify a person authorized under subsection (3) of this section to take the person into custody and direct the authorized person to remove the person in custody to a hospital or nonhospital facility approved by the authority;

(D) Direct a person authorized under subsection (3) of this section to transport a person in custody from a hospital or a nonhospital facility approved by the authority to another hospital or nonhospital facility approved by the authority as provided under ORS 426.235; or

(E) Direct a person authorized under subsection (3) of this section to transport a person in custody from a facility approved by the authority to another facility approved by the authority as provided under ORS 426.060.

(2) A designee under subsection (1) of this section must be recommended by the community mental health program director, meet the standards established by rule of the authority and be approved by the county governing body before assuming the authority permitted under subsection (1) of this section.

(3) The county governing body may, upon recommendation by the community mental health program director, authorize any person to provide custody and secure transportation services for a person in custody under ORS 426.228. In authorizing a person under this subsection, the county governing body shall grant the person the authority to do the following:

(a) Accept custody from a peace officer of a person in custody under ORS 426.228;

(b) Take custody of a person upon notification by the community mental health program director under the provisions of this section;

(c) Remove a person in custody to an approved hospital or nonhospital facility as directed by the community mental health program director;

(d) Transfer a person in custody to another person authorized under this subsection or a peace officer;

(e) Transfer a person in custody from a hospital or nonhospital facility to another hospital facility or nonhospital facility when directed to do so by the community mental health program director; and

(f) Retain a person in custody at the approved hospital or nonhospital facility until a physician makes a determination under ORS 426.232.

(4) A person authorized under subsection (3) of this section must be recommended by the community mental health program director, meet the standards established by rule of the authority and be approved by the governing body before assuming the authority granted under this section.

(5) The costs of transporting a person as authorized under ORS 426.060, 426.228 or 426.235 by a person authorized under subsection (3) of this section shall be the responsibility of the county whose peace officer or community mental health program director directs the authorized person to take custody of a person and to transport the person to a facility approved by the authority, but the county shall not be responsible for costs that exceed the amount provided by the state for that transportation. A person authorized to act under subsection (3) of this section shall charge the cost of emergency medical transportation to, and collect that cost from, the person, third party payers or otherwise legally responsible persons or agencies in the same manner that costs for the transportation of other persons are charged and collected. [1993 c.484 §5; 1997 c.531 §5; 2009 c.595 §405]

January 12, 2012

Board of Commissioners
Clackamas County

Members of the Board

**Approval of a Behavioral Health Services Agreement with LifeWorks NW for
Psychiatric day treatment services to Oregon Health Plan enrollees under age 18**

Clackamas County Behavioral Health Division (CCBHD) of the Health, Housing and Human Services Department (H3S) requests the approval of a Behavioral Health Services Agreement with LifeWorks NW for Psychiatric day treatment services for children under the age 18 to OHP members authorized by Clackamas Mental Health Organization (MHO).

Through this agreement, CCBHD subcontracts services for people who are Oregon Health Plan (OHP) members capitated to Clackamas County. The previous agreement was reviewed by the Board of County Commissioners and approved on December 18, 2008.

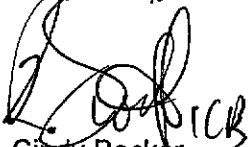
Payment is based on current Medicaid rates. The agreement does not contain an upper limit; expenditures are controlled by CCBHD, Clackamas MHO staff who pre-authorize and monitor services on an on-going basis.

This agreement will be funded with Oregon Health Authority funds. No County General Funds are involved. County Counsel has reviewed and approved this agreement as part of the H3S contract standardization project. It is effective January 1, 2012 and terminates on December 31, 2012.

Recommendation

We recommend approval of this agreement and that Cindy Becker be authorized to sign on behalf of the Board of County Commissioners.

Respectfully submitted


Cindy Becker
Director

For information on this issue or copies of attachments,
Please contact Emily M. Zwetzig/H3S Office of Business Services at (503)742-5318.

BEHAVIORAL HEALTH SERVICES AGREEMENT

This Behavioral Health Services agreement is between Clackamas County acting by and through its Health, Housing and Human Services Department, Behavioral Health Division, hereinafter called "COUNTY" and LIFEWORKS NW, hereinafter called "CONTRACTOR".

AGREEMENT

1.0 Engagement

COUNTY hereby engages CONTRACTOR to provide services as described in Exhibit C, Scope of Work, attached hereto and incorporated herein. This agreement sets forth the terms under which CONTRACTOR will contract with COUNTY to provide mental health services to Oregon Health Plan Medicaid recipients enrolled with COUNTY's Mental Health Organization and residents of Clackamas County who are eligible for services as uninsured, indigent individuals.

2.0 Term

Services provided under the terms of this agreement shall commence January 1, 2012. This agreement shall terminate December 31, 2012 unless terminated by one or both parties as provided for below. This agreement may be renewed annually and amended by mutual consent of both parties.

3.0 Compensation and Fiscal Records

3.1 Compensation. COUNTY shall compensate CONTRACTOR as specified in Exhibit B, Compensation and Payment, for satisfactorily performing contracted services. The payment shall be full compensation for work performed, for services rendered, and for all labor, materials, supplies, equipment, mileage, and incidentals necessary to perform the work and services.

3.2 Withholding of Contract Payments. Notwithstanding any other payment provision of this agreement, should CONTRACTOR fail to perform or document the performance of contracted services, COUNTY shall immediately withhold payments hereunder. Such withholding payment for cause may continue until CONTRACTOR performs required services or establishes to COUNTY'S satisfaction that such failure arose out of causes beyond the control, and without the fault or negligence, of CONTRACTOR.

3.3 Financial Records. CONTRACTOR and its subcontractors shall maintain complete and legible financial records pertinent to authorized Covered Services delivered and payments received. Such records shall be maintained in accordance with Generally Accepted Accounting Principles and/or other applicable accounting guidelines such as outlined in Office of Management and Budget circulars A-87, A-122 and A-133. Financial records and supporting documents shall be retained for at least five (5) years after final payment is made under this agreement or until all pending matters are resolved, whichever period is longer. If an audit of financial records discloses that payments to CONTRACTOR were in excess of the amount to which CONTRACTOR was entitled, CONTRACTOR shall repay the amount of the excess to COUNTY.

4.0 Manner of Performance

4.1 Compliance with Applicable Laws and Regulations, and Special Federal Requirements. CONTRACTOR shall comply with all Federal, State and local laws, rules and regulations applicable to work performed under this agreement, including, but not limited to, all applicable Federal and State civil rights and rehabilitation statutes, rules and regulations, and as listed in Exhibit F, Compliance with Applicable Law, attached hereto and incorporated herein. CONTRACTOR shall comply with OAR 410-120-1380, which establishes the requirements for compliance with Section 4751 of OBRA 1991 and ORS 127.649, Patient Self-Determination Act.

4.2 Subcontracts. CONTRACTOR shall not enter into any subcontracts for any of the work scheduled under this agreement without obtaining prior written approval from COUNTY. CONTRACTOR shall not be relieved of any of CONTRACTOR's obligations hereunder by virtue of any such subcontract, and shall remain directly responsible for compliance with all the terms of this agreement.

4.3 Independent Contractor. CONTRACTOR certifies that it is an independent contractor and not an employee or agent of County, State or Federal government. Responsibility for all taxes, assessments, and any other charges imposed upon employers shall be the solely the responsibility of CONTRACTOR.

4.4 Workers' Compensation. CONTRACTOR certifies that it is an insured employer for purposes of the Oregon Workers' Compensation law (ORS Chapter 656) and is solely liable for any Workers' Compensation coverage under this agreement.

5.0 General Conditions

5.1 Indemnification. CONTRACTOR agrees to indemnify, save, hold harmless, and defend COUNTY, its officers, commissioners and employees from and against all claims and actions, and all expenses incidental to the investigation and defense thereof, arising out of actions, suits, claims or demand attributable in whole or in part to the acts or omissions of CONTRACTOR, and CONTRACTOR's officers, agents, and employees, in performance of this agreement.

CONTRACTOR shall defend, save, hold harmless and indemnify the State of Oregon, AMH and their officers, agents and employees from and against all claims, suits, actions, damages, liabilities, costs and expenses of whatsoever nature resulting from, arising out of, or relating to the activities or omissions of CONTRACTOR, or its agents or employees under this agreement.

If CONTRACTOR is a public body, CONTRACTOR's liability under this agreement is subject to the limitations of the Oregon Tort Claims Act.

5.2 Insurance. During the term of this agreement, CONTRACTOR shall maintain in force at its own expense each insurance noted below:

5.2.1 Commercial General Liability

Required by COUNTY

Not required by COUNTY

CONTRACTOR shall obtain, at CONTRACTOR's expense, and keep in effect during the term of this agreement, Commercial General Liability Insurance covering bodily injury and property damage on an "occurrence" form in the amount of not less than \$1,000,000 per occurrence/ \$2,000,000 general aggregate for the protection of COUNTY, its officers, commissioners, and employees. This coverage shall include Contractual Liability insurance for the indemnity provided under this agreement. This policy(s) shall be primary insurance as respects to the COUNTY. Any insurance or self-insurance maintained by COUNTY shall be excess and shall not contribute it.

5.2.2 Commercial Automobile Liability

Required by COUNTY

Not required by COUNTY

CONTRACTOR shall also obtain at CONTRACTOR's expense, and keep in effect during the term of the agreement, "Symbol 1" Commercial Automobile Liability coverage including coverage for all owned, hired, and non-owned vehicles. The combined single limit per occurrence shall not be less than \$1,000,000.

5.2.3 Professional Liability

Required by COUNTY Not required by COUNTY

CONTRACTOR agrees to furnish COUNTY evidence of professional liability insurance in the amount of not less than \$1,000,000 combined single limit per occurrence/\$2,000,000 general annual aggregate for malpractice or errors and omissions coverage for the protection of COUNTY, its officers, commissioners and employees against liability for damages because of personal injury, bodily injury, death, or damage to property, including loss of use thereof, and damages because of negligent acts, errors and omissions in any way related to this agreement. COUNTY, at its option, may require a complete copy of the above policy.

5.2.4 Additional Insurance Provisions. All required insurance other than Professional Liability, Workers' Compensation, and Personal Automobile Liability insurance shall include "Clackamas County, its agents, officers, and employees" as an additional insured.

5.2.5 Notice of Cancellation. There shall be no cancellation, material change, exhaustion of aggregate limits or intent not to renew insurance coverage without 60 days written notice to the COUNTY. Any failure to comply with this provision will not affect the insurance coverage provided to COUNTY. The 60 days notice of cancellation provision shall be physically endorsed on to the policy.

5.2.6 Insurance Carrier Rating. Coverages provided by CONTRACTOR must be underwritten by an insurance company deemed acceptable by COUNTY. Insurance coverage shall be provided by companies admitted to do business in Oregon or, in the alternative, rated A- or better by Best's Insurance Rating. COUNTY reserves the right to reject all or any insurance carrier(s) with an unacceptable financial rating.

5.2.7 Certificates of Insurance. As evidence of the insurance coverage required by this agreement, CONTRACTOR shall furnish a Certificate of Insurance to COUNTY. No agreement shall be in effect until required certificates have been received, approved and accepted by COUNTY. The certificate will specify that all insurance-related provisions within the agreement have been complied with. A renewal certificate will be sent to COUNTY 10 days prior to coverage expiring.

5.2.8 Independent Contractor Status. The service or services to be rendered under this agreement are those of an independent contractor. CONTRACTOR is not an officer, employee or agent of COUNTY as those terms are used in ORS 30.265.

5.2.9 Primary Coverage Clarification. CONTRACTOR's coverage will be primary in the event of a loss.

5.2.10 Cross Liability Clause. A cross-liability clause or separation of insureds condition will be included in all general liability, professional liability, and errors and omissions policies required by the agreement.

5.3 Controlling State Law. This agreement shall be governed and construed in accordance with the laws of the State of Oregon. Any action or suit involving this agreement shall be filed and tried in Clackamas County, Oregon.

5.4 Amendments. The terms of this agreement shall not be waived, altered, modified, supplemented, or amended, in any manner whatsoever, except by written instrument signed by CONTRACTOR and COUNTY.

5.5 Severability. If any term or provision of this agreement is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms or provisions shall

not be affected, and the rights and obligations of the parties shall be construed and enforced as if the agreement did not contain the particular term or provision held to be invalid.

5.6 Waiver. The failure of either party to enforce any provision of this agreement shall not constitute a waiver of that or any other provision.

5.7 Future Support. COUNTY makes no commitment of future support and assumes no obligation for future support for the activity contracted herein except as set forth in this agreement.

5.8 Oregon Constitutional Limitations. This agreement is expressly subject to the debt limitation of Oregon counties set forth in Article XI, Section 10 of the Oregon Constitution, and is contingent upon funds being appropriated therefore. Any provisions herein, which would conflict with such law, are deemed inoperative to that extent.

5.9 Public Contracting Requirements. Pursuant to the requirements of ORS 279B-020 and ORS 279B.220 through 279B.335 and Article XI, Section 10, of the Oregon Constitution, the following terms and conditions are made a part of this agreement:

5.9.1 CONTRACTOR shall:

- a. Make payments promptly, as due, to all persons supplying to CONTRACTOR labor or materials for the performance of the work provided for in this agreement.
- b. Pay all contributions or amounts due the Industrial Accident Fund from such CONTRACTOR or subcontractor incurred in performance of this agreement.
- c. Not permit any lien or claim to be filed or prosecuted against Clackamas County on account of any labor or material furnished.
- d. Pay to the Department of Revenue all sums withheld from employees pursuant to ORS 316.167.

5.9.2 If CONTRACTOR fails, neglects, or refuses to make prompt payment of any claim for labor or services furnished to CONTRACTOR or a subcontractor by any person in connection with this agreement as such claim becomes due, the proper officer representing Clackamas County may pay such claim to the person furnishing the labor or services and charge the amount of the payment against funds due or to become due CONTRACTOR by reason of this agreement.

5.9.3 CONTRACTOR shall pay employees at least time and a half for all overtime work performed under this agreement in excess of 40 hours in any one week, except for individuals under personal services contracts who are excluded under ORS 653.010 to 653.261 and the Fair Labor Standards Act of 1938 (29 U.S.C. 201 to 209) from receiving overtime.

5.9.4 CONTRACTOR shall promptly, as due, make payment to any person or partnership, association, or corporation furnishing medical, surgical, and hospital care or other needed care and attention incident to sickness and injury, to the employees of CONTRACTOR, of all sums that CONTRACTOR agrees to pay for the services and all monies and sums that CONTRACTOR collected or deducted from the wages of its employees pursuant to any law, contract or agreement for the purpose of providing or paying for such services.

5.9.5 All employers working under this agreement are either subject employers that will comply with ORS 656.017 or employers that are exempt under ORS 656.126.

5.10 Integration. This agreement contains the entire agreement between COUNTY and CONTRACTOR and supersedes all prior written or oral discussions or agreements.

6.0 Termination

6.1 Termination Without Cause. This agreement may be terminated by mutual consent of both parties, or by either party upon ninety (90) business days notice, in writing and delivered by certified mail or in person.

6.2 Termination With Cause. COUNTY may terminate this agreement effective upon delivery of written notice to CONTRACTOR, or at such later date as may be established by COUNTY, under any of the following conditions:

6.2.1 The terms of the OHP Medicaid Demonstration Project are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this agreement or are no longer eligible for the funding authorized by this agreement.

6.2.2 The termination, suspension or expiration of the MHO Contract.

6.2.3 COUNTY funding from Federal, State, or other sources is not obtained and continued at levels sufficient to allow for purchase of the indicated quantity of services. Alternatively, the parties may agree to modify the agreement to accommodate a reduction in funding.

6.2.4 COUNTY has evidence that CONTRACTOR has endangered or is endangering the health or safety of Clients, staff or the public. CONTRACTOR shall ensure the orderly and reasonable transfer of care in progress with Clients and shall work with COUNTY staff to accomplish same.

6.2.5 The lapse, relinquishment, suspension, expiration, cancellation or termination of any required license, certification or qualification of CONTRACTOR, or the lapse, relinquishment, suspension, expiration, cancellation or termination of CONTRACTOR's insurance as required in this agreement.

6.2.6 CONTRACTOR's filing for protection under United States Bankruptcy Code, the appointment of a receiver to manage CONTRACTOR's affairs, or the judicial declaration that CONTRACTOR is insolvent.

6.2.7 If CONTRACTOR fails to perform any of the other provisions of this agreement, or fails to pursue the work of this agreement in accordance with its terms, and after receipt of written notice from COUNTY, fails to correct such failures within ten (10) business days or such longer period as COUNTY may authorize.

6.3 Notice of Default. COUNTY may also issue written notice of default (including breach of contract) to CONTRACTOR and terminate the whole or any part of this agreement if CONTRACTOR substantially fails to perform the following specific provisions: Exhibit D(2)(A) Licenses and, Certification; Exhibit D(2)(C) Quality Assurance and Utilization Review; and Exhibit D(3) Recordkeeping and Reporting. The rights and remedies of COUNTY related to defaults (including breach of contract) by CONTRACTOR shall not be exclusive and are in addition to any other rights and remedies provided by law or under this agreement.

6.4 Transition. Any such termination of this agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination. CONTRACTOR and COUNTY shall continue to perform all duties and obligations under this agreement with respect to Clients under care of CONTRACTOR to the date of termination.

7.0 Notices

Any notice under this agreement shall be deemed received the earlier of the time of delivery of two (2) business days after mailing certified and postage prepaid through the U.S. Postal Service addressed as follows:

If to CONTRACTOR:

LifeWorks NW
14600 NW Cornell Road
Portland, OR 97229

If to COUNTY:

Clackamas County Behavioral Health Division
2051 Kaen Road, # 367
Oregon City, OR 97045

This agreement consists of seven (7) sections plus the following attachments, which by this reference are incorporated herein:

- Exhibit A Definitions
- Exhibit B Compensation and Payment
- Exhibit C Scope of Work
- Exhibit D Performance Standards
- Exhibit E Fraud and Abuse
- Exhibit F Compliance with Applicable Law

LIFEWORKS NW

By: *Mary Monnat*
 Mary Monnat, CEO/President
 Date 12/29/11
 Street Address 14600 NW Cornell Road
Portland, Oregon 97229
 City/State/Zip
 Phone (503) 645-3581 / Fax (503) 690-9605

CLACKAMAS COUNTY

Commissioner: Charlotte Lehan, Chair
 Commissioner: Jim Bernard
 Commissioner: Jamie Damon
 Commissioner: Ann Linger
 Commissioner: Paul Savas

Signing on Behalf of the Board:

Cindy Becker, Director
 Health, Housing and Human Services Department

Agreement Effective Date: _____, 20____

S:\Admin\CONTRACTS\MHO\Expense\LifeWorks NW\2012-12-31MHOcontract.docx

January 12, 2012

Board of Commissioners
Clackamas County

Members of the Board:

**Approval to submit the 2012-2014 Triennial Plan for Public Health Services to
The Oregon Health Authority, Public Health Division**

The Clackamas County Community Health Division (CCCHD) of the Health, Housing & Human Services Department (H3S) requests approval to submit the 2012-2014 Triennial Plan for Public Health Services.

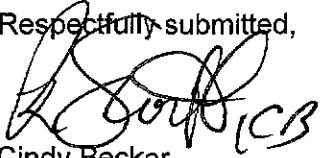
ORS 431.385 requires the Local Public Health Authority to submit an annual plan for their public health services. Every three years, counties submit a more comprehensive plan based on updated community health needs information. The plan submitted for your review and approval provides a review of accomplishments and an updated plan through 2014.

In addition to describing regular mandated services, this plan addresses some of the expected changes associated with health care transformation, the activities associated with our public health accreditation efforts, and our intention to assist in integrating health considerations into county and community development projects.

Recommendation

Staff recommends the approval of this Triennial Plan and ask that Chair sign on behalf of the Board of County Commissioners.

Respectfully submitted,


Cindy Becker
Director

For information on this issue or copies of attachments
Please contact Emily M. Zwetzig/Community Health Division at (503) 742-5318.

Healthy Families. Strong Communities.

2051 Kaen Road #239, Oregon City, OR 97045 • Phone: 503-650-5697 • Fax: 503-655-8677 • www.clackamas.us

**Clackamas County
Community Health
Division
Public Health Services
2012 - 2014
Triennial Plan**

**CLACKAMAS COUNTY COMMUNITY HEALTH DIVISION
PUBLIC HEALTH SERVICES
2012 – 2014 TRIENNIAL PLAN**

The local public health authority is submitting this 2012 – 2014 Triennial Plan pursuant to ORS 431.385, and assures that the activities defined in ORS 431.375-431.385 and ORS 431.416, are performed.

Charlotte Lehan, Chair
Board of County Commissioners
Local Public Health Authority

County

Date

Cindy Becker
Community Health Director

County

Date

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CLACKAMAS COUNTY COMMUNITY HEALTH DIVISION
PUBLIC HEALTH SERVICES
2012 – 2014 TRIENNIAL PLAN

I. Executive Summary

The Public Health (PH) services of Clackamas County Community Health Division have evolved into a thriving system focused on health protection and promotion and integrated with community planning processes and with our fellow county-based human service divisions. With enthusiastic support of our county administration, we were able to complete a community needs assessment and community engagement process, using the MAPP tool from NACCHO. That process resulted in a report, Roadmap to Healthy Communities, and an RFP to the community to support local projects focused on improving access to healthy foods and physical activity. Thirteen projects have been completed and we are in the second year and a new RFP for community-based projects. We now are engaged in new community partnerships with emphasis on population health.

We have added a staff person to support and oversee the community projects, as well as a policy analyst to monitor legislation and new initiatives. We added an epidemiologist to work on gathering community health data and interpreting it for community planning and internal public health purposes. Our new Public Health Nursing Supervisor oversees both the communicable disease team and the field team of home visiting nurses. A dental services coordinator has helped to find resources to fill some of the many holes in that safety net. A new administrative assistant helps us keep all the threads pulled together. With these positions, we are able to move beyond a focus on specific program services and into community engagement and planning. We are working much more closely with our internal county partner divisions and are now connected to sustainability, land use planning and transportation planning. We have begun to provide opportunities for student placements for nursing, PH undergrad, and MPH students, as well as ongoing opportunities in WIC for dietician interns.

Looking ahead, we need to continue to build upon the community and county-based planning and integration initiatives, while addressing Public Health accreditation and the role of Public Health in health care transformation. We have recognized that accreditation will help align our agency with national standards that have been developed over the last several years. Accreditation will be one means of assuring the public and our partners and funders that Clackamas County Public Health services are adequate and appropriate to address our community's needs. We are currently completing prerequisite activities and anticipate applying for accreditation next fall.

Oregon's health transformation work is fully under way and promises fundamental change in the way health care is funded and delivered in order to both improve efficiency and health outcomes. The Early Learning Council seeks to improve how we prepare children to enter school ready to learn. Public Health is at the planning tables of these processes and will be affected in ways that are not yet clear. We are part of planning for a four-county metro area needs assessment, including public health and hospital systems. We will continue to advocate for the importance of population services, while the health care system undergoes transformation. It is indeed an exciting time, full of opportunity for improved collaboration and outcomes.

II. Assessment

A comprehensive community needs assessment was completed in 2009-10, using the MAPP assessment tool. An update of the health data portion of that assessment has been completed and is attached to this document (**see Attachment A**). The attachment includes narrative analysis and suggested direction for further community health planning and partnership to improve the health of Clackamas County residents.

A. Issues and Needs Arising from Assessment Data

1. Some of the issues for further analysis, planning and strategy development include:
 - The health needs of aging residents, including arthritis and injuries due to falls
 - Unintended injuries as a cause of Years of Potential Life Lost
 - Tobacco use and obesity prevention
 - Suicide prevention
 - Immunizations through the life span
 - Improved health insurance coverage and access to quality physical, behavioral and oral health services

B. Adequacy of Local Public Health Services

PH services are adequate at this time. As documented within, the organization continues to identify areas for development and improvement. The facilitated internal assessment process under development should assist with aligning services and programs more closely with essential PH services.

C. Provision of Five Basic Services

1. Epidemiology and Control of Preventable Diseases and Disorders

- a. The Communicable Disease (CD) Team consists of 3 RN's, a Nursing Supervisor, and is supported as needed by a bi-lingual Community Health Worker for Directly Observed Therapy (DOT) and other duties. The Nursing Supervisor is newly hired and is also supervising the Home Visiting field team. A recently hired Epidemiologist, while serving a role in all county wide community assessments, data collection, and analysis; will also be available to consult with outbreak investigations and reporting.
The CD Team continues to work with cross training and cross collaboration for all roles within the team. Team members work closely with Public Health Officer, Environmental Health (EH) staff, and Emergency Preparedness staff. The CD team continues to work to increase efficiency in investigating and reporting to manage disease outbreaks.

- b. Beginning in the summer of 2010 Clackamas County contracted HIV Prevention and Promotion activities for Clackamas County to Cascade AIDS Project (CAP). In July 2011 we enhanced the efforts by establishing a working contract relationship with Washington County to contract both of the county service work to CAP. The effort takes us further down the road of efficiency and continuing to find ways to regionalize activities, not duplicate them. State programmatic support for HIV Disease Investigation Specialist work has been inconsistent and poorly communicated to the county, while both HIV Program technical assistance and leadership proved challenging to us. CDC has cut funding to states with low prevalence of disease which translates into a cut to funding of 30% as well as a reduction of support to all but 7 counties in Oregon. That trend of reduced funding continues for the next 5 years.

2. Parent and Child Health Services

a. Immunization

During 2011 Immunization Program staff served as liaisons to four satellite clinics and one delegate agency. In this role, staff provided vaccine management training, education and technical assistance. Vaccine transfers were conducted as needed and quarterly audits carried out to ensure compliance with state immunization practices.

Staff also worked with community partners throughout the year to plan and coordinate four immunization outreach events which provided vaccine to uninsured and underinsured populations. Participation in these events reduces the barrier to timely immunization, prevents the spread of communicable disease and strengthens community partnerships.

During the fall and winter months, staff focused on providing technical assistance and training to school and child care staff on school law as it relates to immunizations. The program applied the LEAN process improvement tool to the current school exclusion process and will test the future state model beginning January 2012.

b. Women, Infants and Children Nutrition

The WIC program has continued to maintain caseload this past year even when the state overall experienced a decrease in participation. This was accomplished by expanding the number of days available at the five clinic locations and continued high Portland Metro unemployment rates over 9%. The Oregon City WIC Program site moved in January of 2011 to a remodeled building with expanded space for counseling and classroom activities. Our Breastfeeding Peer Counselor Program has been in operation for over a year with an average caseload of 325 women. The program uses a prevention approach to avoid problems vs. a medical model approach of treating problems.

Our Nutrition Education focus this year has been to enhance our Participant Centered Skills with group education planning and activities. In-services and State sponsored training have been the vehicles for training staff. The WIC

program used LEAN process improvement techniques to address inventory and supplies control and the Lactina Breast Pump Loan program management this year. The WIC Program is managed by a Public Health Program Manager, daily operations by a Human Services Coordinator, staffed by 2 FTE Registered Dietitians, 6 Nutrition Assistants, 4 Health Assistants and 1 OS1. The staff has grown by two positions late this year.

c. **Family Planning:**
See Attachment C

b. **Maternal and Child Health Home Visiting**

The Community Health Nurse (CHN) Field Team consists of 4 RN's, a bilingual Community Health Worker, and a Nursing Supervisor (shared with CD team). The Community Health Nurses provide Maternity Case Management through home visits to pregnant women. The CHN also does home visits for children birth to age 5 through Babies First. Children with developmental delays and/or medically fragile are seen at home by CHN's through the CaCoon program (ages birth- 21).

Clackamas County Public Health, WIC, Primary Care Clinics (FQHC), and Healthy Start (Children, Youth, and Families) have recently worked with other home visiting programs to develop a service called BabyLink. BabyLink is an access program for pregnant women and families with young children to provide information and connection to all programs in Clackamas County that can meet their needs. Inquiries are received by, phone, text, and e-mail. Trained telephone screeners have ready access to referral resources for prompt replies. This has become an integration of both public and private resources available in Clackamas County. BabyLink can be used by individuals or providers seeking information.

3. **Collection and Reporting of Health Statistics**

Our system for collecting and reporting health statistics continues to run efficiently and effectively. The cross-trained office staff, who are all certified deputy registrars, work closely with the state staff, hospitals and funeral homes to assure services meet the needs of the public as well as our needs for accurate data management.

4. **Health Information and Referral Services**

The County's updated website has become one of our best resources for educating and updating residents regarding PH services, eligibility, and access information. Forms are available online, and restaurant workers may test and be licensed online, and health alerts and updates can be posted. Many inquiries are received by email or phone and receive prompt attention. The County's Social Services Division (SSD) provides access to updated lists of agencies and support services for the general public

5. **Environmental Health Services**

Environmental Health Services is staffed with six full-time Environmental Health Specialists, a half-time equivalent of part-time EH Specialists, an EH Manager and one support Office Specialist. Five full-time EH Specialists each cover a geographic area of the County. They conduct all of the delegated and required facility licensing and inspection services for foodservice facilities, swimming facilities, and tourist facilities. Contracted inspection services are provided for public schools, daycare facilities, and others. One FTE EH Specialist focuses on the public water system requirements for the State Drinking Water Program.

The EH Manager closely monitors the work of the team and provides backup and support, including responding to most public inquiries and environmental issues. Food Handler testing and certification is provided by trained support staff. EH and Communicable Disease staff work collaboratively to investigate disease outbreaks, complaints, and cases of food-borne illness. The Environmental Health staff participates in emergency preparedness exercises and provides support and expertise during natural disaster and pandemic response.

ACCOMPLISHMENTS

1. The EH Program is current with the IGA program standards for the State Drinking Water Program and the Food, Pool, Lodging, Health and Safety Program, Division 12.
2. All staff is current with the State Standardization Program requirements.
3. We continue to update the CCCHD EH website to provide relevant information and the ability to download rules and forms.
4. Completed work with communities to replace their wading pools and to meet the new state standards.
5. Continue to provide pool operator training classes in order to update the operators regarding new requirements.
6. Continuing to identify and assist the operators of unlicensed organization camps.
7. Continuing to provide a hand washing demonstration mobile unit at the county fair.

D. Adequacy of Other Services

1. Primary Care and Behavioral Health

The Primary Care (Federally Qualified Health Center, FQHC) and Behavioral Health (BH) divisions of our organization have spent time assessing their roles in the larger systems of care in which they operate. They recognized the need for significant integration of their services in order to address health issues of clients holistically and more effectively. Through consultation, training and ongoing coordination, their integration continues to evolve and improve. The Primary Care services added an FQHC Director and is now operating a clinic in Gladstone in conjunction with Care Oregon, as well as being the medical sponsor of two SBHC's. The FQHC continues to operate the clinic in Oregon City, which includes BH and dental services, and is developing a clinic on Sunnyside Rd, which will open in 2012. An electronic health record has been added to clinical services. Behavioral Health continues to operate clinical services in Oregon City and Sandy and is developing a new crisis services center on 82nd Ave., to open in 2012.

Both the FQHC and BH divisions are involved in health care transformation and CCO planning. They work with health systems and law enforcement to assure more appropriate referral to services and reduce unnecessary use of emergency rooms. Public Health works with both areas to assure integration with services such as immunization, school-based health centers, family planning, communicable disease and home visiting. We meet together regularly and continue to identify more areas in which our integration will result in improved linkage and outcomes for community residents.

2. Preparedness and Emergency Medical Services

The preparedness program is managed by the Emergency Medical Services Manager and has been in compliance with the requirements of Program Element (PE) 12 in yearly reviews.

Staff maintains a three year training and exercise calendar based upon the requirements of PE 12, the intergovernmental agreement for Cities Readiness Initiative and the improvement plans developed following real events and exercises.

All public health staff receives training and participates in exercises of various aspects of the County response plans. Clackamas County Emergency Management staff is integral to preparedness planning, training and exercise. A seven-member Incident Response Team provides 24 hour coverage for receiving reports of, and responding to, public health emergencies.

Recent exercises included a regional full-scale exercise of the push partners and a community flu clinic in Milwaukie with outreach to homeless persons in the county. These exercises are integrated with the County Department of Emergency Management and community partners

3. School-Based Health Centers

Accomplishments July 1, 2010 – December 31, 2011

Expanding services

- Nurse practitioners in Oregon City High School, Margaret Stochosky and Canby High School, Julie Passon started full time (September 2010)
- Anne Weaver started assessing the need for behavioral health services in Oregon City High School to determine if 10 hours of a Behavior Health Consultant is sufficient (September – present)
- Dr. Katherine Cook and Janelle McLeod are using a \$97,000 Safety Net Capacity Grant to screen and provide dental services to uninsured students in the Oregon City School District

New SBHCs

- A Steering Committee and Community Advisory Board in the Oregon Trail School District started planning a SBHC (September 2010)
- Milwaukie High School was awarded \$396,681 from HRSA to build a school-based health center (July 2011)
- Estacada High School was awarded \$392,104 from HRSA to build a school-based health center (December 2011)

Youth Advisory Boards

- Students from Oregon City, Canby and Milwaukie High Schools attended the annual SBHC conference (October 2010)
 - The conference inspired Canby High School to implement the “Talk About It” campaign which addressed teen depression and suicide (Nov 2010 – Jan 2011)
 - The conference motivated Oregon City High School to host an open house at their health center. Attendees included Commissioners Bernard and Savas, a City Councilman and a school board member (January 2011)
- Students from Oregon City, Canby and Milwaukie High Schools participated in Advocacy Day in Salem and spoke with Representatives about their respective SBHCs (February 2011)
- Milwaukie, Canby, Oregon City, Estacada and Sandy High Schools participated in a youth summit, funded by a CORE Grant that Milwaukie High School received from the Oregon School Based Health Care Network. Students strengthened their advocacy skills and sharpened their “elevator speech” about SBHCs. Students from Estacada and Sandy were introduced to SBHC and motivated by their peers. (April 2011)
 - The summit created an opportunity for students from Milwaukie to speak to the Board of County Commissioners about SBHCs during a business meeting (May 2011)
- Canby students made a presentation to the School Board about access to contraception in the SBHC (June 2011). The Board requested more information before they voted on the issue. Students went before the Board again in October at which point the Board voted against providing contraception in the SBHC.

Between June and October, the students and their advisor were featured in the local media multiple times.

- Canby, Milwaukie and Sandy High Schools attended the annual SBHC conference (Oct 2011)
- Clackamas County Community Health Division received a \$35,000 grant from the Northwest Health Foundation and \$10,000 grant from the Oregon School Based Health Care Network (OSBHCN) for a Clackamas Youth Voice project. Students from Canby, Milwaukie, and Sandy High Schools participated in a summit on November 1st where they learned about “Action Research”. Each group selected a topic to research in their school:
 - Canby is surveying all high school students about bullying
 - Milwaukie is surveying all high school students about stress
 - Sandy is conducting focus groups and surveying students in middle and high schools about influences.

Collaborations

- Clackamas County Community Health Division hosted county-wide meetings for schools (Canby, Estacada, Milwaukie, Oregon City and Sandy) and medical providers (Clackamas County Primary Care, Outside In, Legacy Health System) to address shared challenges and learn from each other (Nov 2010, March 2011, May 2011)
- Canby and Oregon City High Schools established a referral system with Healthy Kids application assisters so they can streamline students and families to sign up for health insurance.

Miscellaneous

- Canby and Oregon City started using EHR (September 2011). CCCHD is one of three health systems in the State to participate in the “OCHIN pilot” program to test templates specific for SBHCs.
- In preparation for Oregon City’s recertification site visit, all SBHC policies were reviewed, revised and loaded into Policy Tech (December 2011)
- Information about School Based Health Centers is posted on the County’s website, under the primary care page (October 2011)

4. Community Engagement to improve Health

Tobacco Prevention and Education and Healthy Communities

The Tobacco Prevention and Education Program (TPEP) has focused on the mandatory work areas of reducing or eliminating tobacco use on hospital campuses, community college campuses, and multi-unit housing. Achievements include:

- a. Approval by the Board of County Commissioners of a request from the Housing Authority of Clackamas County to convert all its multi-family properties to smoke-free policy.
- b. Adoption of a smoke-free policy for all events by the Clackamas County Events Center.