



EXECUTIVE ORDER NO. 03-15

MENTAL HEALTH TASK FORCE

Pursuant to my authority as Governor of the State of Oregon, I find that:

The Oregon mental health system provides treatment and supports to over 120,000 persons with mental disorders each biennium. Disorders such as schizophrenia, depression, bipolar disorder, Alzheimer's disease, the mental and behavioral disorders suffered by children, and a range of other mental disorders affect nearly one in five Oregonians in any year.

In recent years, awareness and knowledge of effective and evidence-based treatments for these disorders has grown. Simultaneously, Oregon's mental health policy has moved away from reliance on institutions and toward integrated community-based care.

Oregon's recent economic distress is impacting the State's public mental health system at both the state and community level. Although individuals interested in this system have worked diligently in recent years to identify barriers and propose solutions to better meet the needs of people of all ages with severe emotional and psychiatric disorders, the State's recent struggle to preserve services and supports for those individuals necessitates that that discussion begin anew.

A focused and collaborative analysis will enable Oregon to establish priorities for financially challenging times, target public funds to those most in need, improve quality of care, achieve greater efficiency in administration and service delivery, and assure Oregonians that their mental health system is effective and accountable. A blueprint for action is needed to guide the system in accomplishing these goals.

NOW THEREFORE, IT IS HEREBY DIRECTED AND ORDERED:

1. The Governor's Mental Health Taskforce (the "Taskforce") is established. The Taskforce shall review, analyze, and recommend changes to the State of Oregon's public mental health system as may be needed to preserve and improve services and supports for people of all ages with severe emotional and psychiatric disorders.
2. The Taskforce shall consist of no more than twenty-one (21) members. All members of the Taskforce must have an interest and expertise in mental health services and financing. The persons responsible for appointing members of the Taskforce shall strive to ensure that the Taskforce's membership includes a diverse cultural and geographical cross-section of Oregonians. The members shall be selected as follows:
 - a. The Governor or his designee shall be a member;
 - b. The Director of the Department of Human Services or her designee shall be a member;



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- c. The President of the Senate shall appoint one member of the Senate who is a member of the Democratic Party and shall appoint one member of the Senate who is a member of the Republican Party, in consultation with that party's leadership;
 - d. The Speaker of the House of Representatives shall appoint one member of the House of Representatives who is a member of the Republican Party and shall appoint one member of the House of Representatives who is a member of the Democratic Party, in consultation with that party's leadership;
 - e. The Governor shall appoint one member from each of the following organizations:
 - i. The Association of Oregon Community Mental Health Program Directors,
 - ii. The Oregon Chapter of the National Alliance for the Mentally Ill,
 - iii. The Oregon Health and Science University's Center on Self-Determination,
 - iv. The Oregon Psychiatric Association,
 - v. The Oregon Association of Hospitals and Health Systems,
 - vi. The Oregon Sheriff's Association, and
 - vii. The Psychiatric Security Review Board
 - f. The Governor shall appoint up to eight additional members. These members shall have knowledge regarding the experience and treatment of severe emotional and psychiatric disorders and may include representatives of county mental health programs, persons in recovery from these disorders, family members of affected persons, legislators, advocates and/or service providers.
3. The Governor shall designate two members of the Taskforce as co-chairs.
 4. The co-chairs shall establish an agenda for the Taskforce, and generally provide leadership and direction for the Taskforce.
 5. A quorum for Taskforce meetings shall consist of a majority of the appointed members. The Taskforce shall strive to operate by consensus; however, the Taskforce may approve measures and make recommendations based on an affirmative vote of a majority of the quorum present.
 6. The Taskforce shall provide a final report to the Governor's Office and to the Emergency Board of the Legislative Assembly no later than January 1, 2005. The report shall include the findings and recommendations of the Taskforce and an action plan for the implementation of those recommendations. Without limitation, the report shall:



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- a. Describe the key problems of Oregon's public mental health system, including community mental health and state hospital services and funding mechanisms, using qualitative and quantitative data to inform and guide expectations.
 - b. Identify needed improvements in the linkages among corrections, law enforcement, state hospitals and community mental health programs.
 - c. Include realistic objectives and measurable goals by which progress toward resolving identified problems can be monitored.
 - d. Include achievable outcomes that can be expected within the capabilities and limitations of the public mental health system and the constraints of the state's funding. The estimation of future results should assume system-wide implementation of evidence-based practices for children, adults and older adults.
 - e. Discuss the Taskforce's review of regional administration of mental health services as one strategy for achieving efficiency and clinical effectiveness in the delivery of mental health services, and steps that may be taken to implement regional arrangements.
7. In addition, the Taskforce shall collaborate with the Department of Human Services' Mental Health Advisory Board and the Governor's Council on Alcohol and Drug Abuse Programs to recommend an action plan to inform and guide the development of the mental health plan required by ORS 430.640(1)(o).
8. The Taskforce shall be staffed by the Office of Mental Health and Addiction Services. In addition, the following state offices and agencies shall provide necessary support to the Taskforce:
- a. Office of Mental Health and Addiction Services
 - b. Office of Medical Assistance Programs
 - c. Office of Multicultural Health
 - d. Office of Seniors and People with Disabilities
 - e. Office for Oregon Health Policy and Research
 - f. Oregon Department of Corrections
 - g. Oregon Youth Authority
 - h. Oregon Housing and Community Services

The directors of these state agencies or the administrators of the offices shall cooperate by providing information as needed and available, and by meeting with and reporting to the Taskforce as requested.

9. The members of the Commission shall not be entitled to the reimbursement of expenses or to the per diem provided in ORS 292.495.



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10. This Order expires two years from the date of its issuance.

Done at Salem, Oregon, this 8th day of October, 2003.

A handwritten signature in black ink, appearing to read "Ted Kulongoski", written over a horizontal line.

GOVERNOR

ATTEST:

A handwritten signature in black ink, appearing to read "Paul H. Anderson", written over a horizontal line.

SECRETARY OF STATE