



HEALTH AND HUMAN SERVICES

Mental Health and Developmental Disabilities Advisory Committee (MHDDAC) Meeting Minutes for 5/20/25 from 12:15 pm to 2:00 pm

Present: *present

Committee Members:	Staff:	Guests/Presenters:
*Megan Ramos – Chair	*Mary Starrett	*Jeanne McCarty, Yamhill County Behavioral Health Director
Patrice Qualman – Vice Chair	*Jason Henness	
Tiffany King	*Stacey Toliver	
*Diana Fidler	*Traci Dawson	
*Chris Brame	*Charlotte Tong	
Pauline Metoxen	*Lisa Dillman	
Christopher Nickell	*Laura Park	
Ty Williams	Mathew Rutherford	
	*Robert Naylor	

Welcome, Attendance & Announcements (Megan Ramos)

Introductions and Announcements - Traci talked about current committee roles like the Chair and Vice-Chair, and how committee members have filled these for quite some time. Traci asked that anyone interested in one of these roles let her know either at the next meeting or by emailing her directly. Any recruitment activity will be noted on the next meeting agenda.

Traci announced that she is assigning Lisa Dillman to take the lead on the committee as facilitator; Traci will be stepping aside.

Traci also introduced today's guest, Jean McCarty, Director of Behavioral Health for YCCO.

- Minutes from 2/18/25 were approved.

Topic:

- **Audit summaries from YCHHS Developmental & Disability Program** (Stacey Toliver)

Stacey provided a comparison of the current 2025 program review outcomes with those of the 2023 outcomes. Stacey shared a PowerPoint with informational slides describing the findings. A summary of some of the review findings is included here.

Areas with no deficiencies:

- The *Service Planning* subsections showed a remarkable improvement from 2023, with no deficiencies in the 2025 review.
- The employment category showed no deficiencies in the *Employment First* objective for either 2023 or 2025. Jason asked about clients who are in Behavioral Health and Developmental Disabilities (DD) and how that is determined.
- The *Notice of Planned Action* represents requirements for advance notification of changes. There were no deficiencies in either 2023 or 2025.
- In the *Health and Welfare* section, there were no deficiencies.
- *Assessments* are also an area with no deficiencies.
- Individually based limitations require identifying a client's limitations and points of health and safety. There were no missing signed limitation documents.
 - Stacey shared that there have been cases where older adults were considered eligible for DD services, having the needed evidence of disability, and having had disability issues that started before they were 18 years old.
- Services provided through the *General Funds* were also reviewed. These are funds with no Federal match. The funds are from the state. These services are for individuals without Medicaid benefits who are receiving just a case manager. In 2025, there were no deficiencies.

Growth Areas:

- It was noted that a change occurred in 2024 with an enrollment form, "Freedom of Choice," and 5 of 25 files needed updated documentation.
- The *Monitoring Case Management Outreach* is about the requirement to capture quarterly contact with clients. Several files did not have these contacts completed every 3 months, which is required.
- The *Financial Review* is an audit of the funding received and utilized for the individual's services. The tracking for these funds is very intensive; all purchases are logged. Progress Notes need to capture what is required to meet billable services. In 2025, only six encounters failed and had to be reversed.
- In the 2025 review, findings were noted in regard to the staff *Training* documented in the personnel records. The auditors did not accept the documentation process for the mandatory abuse reporting training. The issue was the E-signature process.
- The *Complaints* section showed one deficiency related to the log, and not capturing categories that were implemented pre-audit period. This was corrected.

Post Audit Plan:

YCHHS DD program implemented a "back to basics" core competency training, updated file review checklists and quality assurance checklists, and implemented a quality assurance position that reviews plans before completion. The Corrective Action Plan was submitted to the Office of Developmental Disability Services and was accepted.

Discussion and Questions:

When the Wood Products program closed, did it have any effect on the ability to provide work experience for our clients? Stacey reported that the program was considered Sheltered Work versus Supported Employment. As it turned out, consumers were using this program more for socialization versus employment.

Review Critical Incidents/Complaints (Traci Dawson)

Traci explained the process for review of incidents and capturing any recommendations or suggested system changes this group may offer.

Critical incidents:

1. 12/2024 (Attempted Suicide):

Discussion: A question was asked about all the post-event activity and why that is not reported in the submitted incident reports. Traci explained that this would delay reports too much. The post-event activity is reviewed, however, by the Leadership team as necessary.

Recommendations: None.

2. 12/2024 (Attempted Suicide):

Discussion: Discussed the unverifiable nature of self-harm reports. A question was asked about Dialectical Behavior Therapy (DBT) therapy in relation to attempted suicide. Traci and Jason explained the intent behind this approach as a well-recognized type of therapy that helps individuals manage intense emotions and improve interpersonal skills.

Recommendations: None.

3. 1/2025 (Attempted Suicide):

Discussion: Traci shared recent training where she learned about assessing the lethality of suicidal actions and that medications are one of the most reversible acts, where guns and hanging are the most lethal. Jason also explained that the frequency of incidents appears to be higher with youth, but that it is because of the higher level of engagement with other providers and family in youth services than with adults.

Recommendations: None.

4. 1/2025 (Danger to Health & Safety):

Discussion: A question was asked about system changes that are captured on the reports we review in this committee. A question was asked about staff who are not on duty and checking voicemail messages. Jason explained that this is not an expectation of staff. The redirection is for clients to call the agency for an on-call worker instead. The on-call line and crisis response are well-noted, and information is clearly posted, but clients often prefer to use texting, and that means they contact their provider.

Recommendations: Jean McCarthy recommended a refrigerator magnet with the correct number & "Call 988."

5. 1/2025 (Client suicide):

Discussion: Traci explained that the system response was to ensure there is an extra layer of response in the process.

Recommendations: None.

Complaints:

1. 11/2024 (Interaction with Provider):

Discussion: Traci and Jason explained that this case was complicated because of the parents' perspectives and the youth's preferences, making it a more complex issue to sort through. In the end, no indiscretion by the

staff member was determined. It was found that the client's discretion was honored. Traci reviewed the expectations of confidentiality through the two primary confidentiality rules (HIPAA and 42 CFR Part 2).

Recommendations: None.

2. 11/2024 (Client Rights):

Discussion: Traci clarified how a discussion about symptoms was misinterpreted as over-disclosure.

Recommendations: None.

MHDDAC Survey (*Traci Dawson*)

Traci disseminated a survey for the committee to complete during today's meeting.

New Programs/Resources (*Megan Ramos, all*)

- Sat 17th, NAMI Walks NW happened in Portland. They solicited donations that can be submitted to the local office at PO Box 345, McMinnville. These funds provide support directly to clients. Some funds also provide resources for course materials and handouts.
- Jason reported that we have changed our Intake Process, allowing for more immediate access. He explained that the County is not allowed to waitlist, so we have created an intake process that facilitates same-day access.
- Traci shared that by the next meeting, we might not be in this building. She shared the plans to move various departments to the new building recently purchased by the County. Multiple county offices will also be in that building, which the County is calling Government Services Building. A question was asked about office space for rent in that building, but that seems doubtful given that so many offices and departments of the county are also moving there.
- Stacy reported a projected growth for her program. This is based on recent reports of projected increased needs for disability services in this area.
- A question was asked about why there is no developmental disabilities consumer representative on this committee. Stacey reported that they have been trying to get people engaged. A discussion was had about possibilities for recruiting a consumer for participation on the committee.

NEXT MEETING: September 16, 2025

Notes: CT and TD