



Doug Hunt County Commissioner

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May 25, 2018

An Open Letter to the Community:

We have been receiving input from our constituents regarding the county budget and funding for behavioral health services. I appreciate and understand everyone's concerns; mental health is a seriously critical need in our county, as well as throughout our state. It is a tragic situation and trying to address the needs of our citizens with very limited resources is sadly heartbreaking and highly frustrating. It is also important to note that services have not been cut; only staffing levels reduced.

We've heard from a lot of people who are baffled that we say the clinicians weren't seeing enough patients to make the program viable when it's clear the problems of addictions and mental illness are overwhelming our community. Putting a program in place is one thing; getting people through the door is another matter entirely.

We're still trying to sort out the answers, but several things are emerging. It's often difficult to persuade people with co-occurring disorders to seek treatment in the first place. This program may have to some degree duplicated services available from other providers in the community. It also appears that there was inadequate outreach and marketing, both before and after the program was launched.

In response to suggestions that we use \$1.7 million in capital projects to restore staffing in the behavioral health division of the county's Health and Human Services department, let's start at the origin of this current crisis.

When the current fiscal year's budget was developed by former department director Cheryl Connell over one year ago, she overestimated budgeted revenues for behavioral health. Recognizing the budget is only a plan, Ms. Connell failed to manage the budget during the current fiscal year to assure realized revenues were sufficient to support expenses, i.e., existing staffing levels. Ms. Connell's employment was terminated and a new director was selected.

As one would expect, the new director, Rebecca Austin, reviewed the department's budgets and realized expenses exceeded revenues in the behavioral health division and in particular in co-occurrence services. As a result, the division was facing a \$1.7 million deficit after only 10 months of operation, or on an annual basis the funding shortfall approximated some \$2.0 million. Had Ms. Connell been properly managing the budget she would have realized the behavioral health division was facing a serious financial funding shortage. Director Austin, faced with this serious financial crisis, had to move swiftly to stem the losses. To achieve a stable and sustainable program our choice was to reduce staffing levels to align with revenues

received from the state, based on clinicians' caseloads. The state provides funding based on caseloads (clients seen), and with sufficient caseloads adequate funds are provided to support staff. We are not the only county facing less revenue and increasing costs for services. Benton County cut services last year. Linn County laid off 14 behavioral health professionals and 4 other support staff at about the same time we instituted reductions.

To use the capital projects funds would potentially place the county in the same position as it is now. Capital funds are a one-time source of revenue, are not stable or sustainable, and after 10 more months of operation, or sometime shortly after the New Year, the county would again be facing a serious financial shortfall of some \$1.7 million and again would be faced with reducing staff to balance the budget. This approach would require county clinicians to immediately develop caseloads at full capacity to support staffing expense, a scenario that has not worked over the last two years, and has placed the county in our current dilemma. Frankly, we have tried this approach and it has failed, causing the painful reduction of staff, disrupting their lives, disrupting the lives of individuals receiving treatment and causing great concern among county staff.

In addition, using the capital funds would eliminate the possibility of building the new health and human services building which would consolidate the behavioral, public and primary care services in a single location. This project was a passion of Ms. Connell's and remains a long-term goal for the county. The project has not been shelved but is viewed as one that will improve the delivery of services to our citizens, will add efficiencies and will save taxpayer dollars as a result.

In summary, using capital funds is only a short-term solution, does not resolve the current budget deficit and also eliminates the potential to build a much needed health center building. It is for these reasons the decision was made to reduce staffing, but more importantly, not cut services, and develop the budget for fiscal year 2018/2019 with stable and sufficient revenues to support staffing and with the ability and flexibility to increase staffing as councilors see more clients and build their caseloads in the future.

A final thought. Some people are asking how these staffing reductions impact our Stepping Up initiative, which aims to reduce the number of people with mental illness in our jail. The lessons learned underscore the need for the new approach Stepping Up emphasizes: a cooperative, community based approach, with service providers working together cooperatively to fill in service gaps. We can't go it alone. We need law enforcement, our behavioral health program, Samaritan Health, social services agencies working together to fix what has been a broken system for a very long time. We encourage citizens who want to be part of the solution to join in this effort.



Doug Hunt, Chair Lincoln County Board of Commissioners