

## Department Overview

The Department of County Human Services mission: to enhance the quality of life for individuals and families.

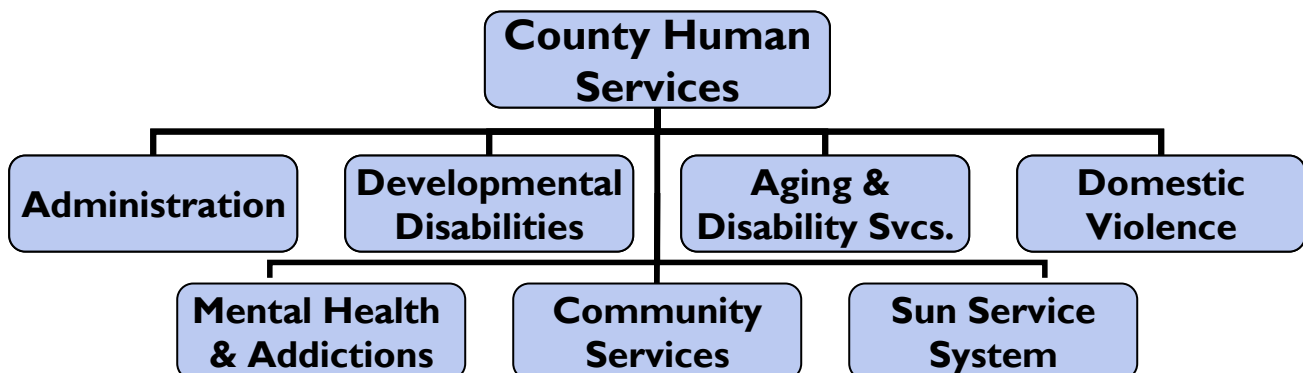
The Department of County Human Services vision: safe, healthy, caring and diverse communities where hope, independence, learning and opportunity prevail for all.

The department has a budget of over \$212 million and 700 employees. The department is the primary funder and provider of social services in Multnomah County for families in poverty, homeless families, homeless youth, survivors of domestic violence, low income seniors, people recovering from mental illness and addiction and people with disabilities.

The department has deep collaborations with many local non-governmental organizations, other local governments and community advocates. The department is the managing partner for the Schools Uniting Neighborhoods collaboration to provide wraparound services and enrichment for school age youth, many of whom live in poverty.

The department serves as the Area Agency on Aging, the Local Mental Health Authority, the Mental Health Organization under the Oregon Health Plan and the designated Community Action Agency for Multnomah County. The department is responsible for developing systems of care, leading services development, coordinating and linking services for the county's most vulnerable and poorest residents.

The department has seven divisions: Administration, Aging and Disabilities Services, Mental Health and Addiction Services, Developmental Disabilities Services, Schools Uniting Neighborhood Services System, Community Services Division and the Domestic Violence Coordinator's Office.



### Budget Overview

Department of County Human Services has a FY 2011 budget of \$212.9 million, an increase of 10.1% over the FY 2010 adopted budget of \$193.4 million. The General Fund portion of DCHS' budget increased from \$45.6 million in FY 2010 to \$47.7 million in FY 2011, a \$2.1 million increase. Other funds increased from \$147.8 million to \$165.2 million in FY 2011.

DCHS' increase in General Fund expenditures will fund several new programs and to support existing programs that have seen other funding streams expire:

- Programs 25040A-C – Domestic Violence: supports domestic violence coordination and victim services, including services that focus on high-risk cases and the children of domestic violence victims. These services were funded by federal grants that expire in FY 2011.
- Program 25056B – Crisis Assessment and Treatment Center Operations provides \$200,000 in General Fund to support the first 3 months of operations, beginning in the spring of 2011, at the new Crisis Assessment and Treatment Center, a short-term mental health facility established as an alternative to more costly hospitalization.
- Program 25120 – Homeless Family Shelter System will expand the current winter shelter system, in operation 5 or 6 months out of the year, to operate year-round.
- Program 25147 – Child and Family Hunger Relief gives SUN School sites with the infrastructure to provide hungry children and families with food on non-school days and year-round.

The \$17.3 million increase in other funds largely reflects the timing of the State budget process. The State proposed cuts to programs within DCHS for the FY 2010 and FY 2011 budget. These cuts were restored during the State budget process, but the timing was such that the cuts were still reflected in DCHS' FY 2010 adopted budget. DCHS' FY 2011 budget reflects the restored funding of services by the State. The programs affected by these restorations are primarily in the Mental Health and Addictions Services Division.

<b>Budget Trends</b>		<b>FY 2010</b>	<b>FY 2010</b>	<b>FY 2011</b>	
	<b>FY 2009</b>	<b>Current</b>	<b>Adopted</b>	<b>Adopted</b>	
	<b>Actual</b>	<b>Estimate</b>	<b>Budget</b>	<b>Budget</b>	<b>Difference</b>
Staffing FTE	694.05	697.72	697.72	709.15	11.43
Personal Services	\$56,049,786	\$56,609,720	\$59,958,471	\$63,463,513	\$3,505,042
Contractual Services	117,359,651	128,546,038	118,360,569	133,675,163	15,314,594
Materials & Supplies	13,534,294	14,273,164	15,005,600	15,726,903	721,303
Capital Outlay	350,028	130,392	80,000	40,000	(40,000)
<b>Total Costs</b>	<b>\$187,293,759</b>	<b>\$199,559,314</b>	<b>\$193,404,640</b>	<b>\$212,905,579</b>	<b>\$19,500,939</b>

### Successes and Challenges

The Department is making significant progress in many areas.

1. Pay for performance in our Mental Health Oregon Health Plan organization is increasing providers focus on treatment engagement with the most mentally ill individuals.
2. The long-awaited 16 bed Mental Health Crisis Assessment and Treatment Center is proposed for completion in spring 2011. Its completion will create an alternative to jail and hospitalization for individuals experiencing a mental health crisis.
3. Over 5,450 victims of domestic violence and their children received shelter, counseling and other services.
4. The SUN School system expanded this year to 58 sites serving an average daily attendance of 8,040 children. The SUN Coordinating Council agreed to system-wide long term vision of "Every School a SUN School" which will challenge all partners to help every child in Multnomah County succeed.
5. In January 2010, we housed 30 newly homeless families in 30 days with rental assistance and case management. Almost 1,180 families received short-term rent assistance, 93 percent were permanently housed six months after exit. More than 22,000 households received energy assistance.
6. Aging and Disability Services Long Term Care diverted 201 people from nursing facilities that cost \$6,563 a month to community care at \$1,490 a month. Veterans' Services recovered \$30 million in veterans benefits/pensions.

Caseloads and demand for services continue to increase.

### Budget by Division

Division Name	FY 2011 General Fund	Other Funds	Total Division Cost	Total FTE
Administration	\$3,198,407	\$2,972,561	\$6,170,968	42.00
Developmental Disabilities	2,146,589	22,344,985	24,491,574	129.40
Aging and Disability Services	7,701,691	35,117,985	42,819,676	315.56
Domestic Violence	2,158,374	1,312,415	3,470,789	6.42
Mental Health & Addiction Services	15,414,152	77,215,390	92,629,542	163.35
Community Services	<u>8,992,103</u>	<u>25,146,072</u>	<u>34,138,175</u>	36.00
Sun Service System	<u>8,106,678</u>	<u>1,078,177</u>	<u>9,184,855</u>	<u>16.42</u>
<b>Total County Human Services</b>	<b>\$47,717,994</b>	<b>\$165,187,585</b>	<b>\$212,905,579</b>	<b>709.15</b>

### Significant Changes

The following table describes the significant changes made in each division. Significant is defined as expenditures that have increased/decreased by more than 5% or where FTE have increased or decreased by 1.00 or more from the FY 2010 adopted budget. Additional information can be found in the division narrative and in individual program offers.

Prog. #	Program Name	FTE Changes (+/-) All Funds	Estimated \$ Change-GF	Estimated \$ Change-Other Funds
<b>Department Administration</b>				
25000	Director's Office	-	(46,742)	252,786
25001	Human Resources	-	51,152	-
25002	Business Services	(1.00)	-	1,303,737
25003	Contracts	-	56,225	-
<b>Development Disabilities Services Division</b>				
25010	DD Administration and Support	(7.80)	(43,480)	(1,057,230)
25012	DD Services for Adults	(7.00)	-	(767,276)
25013	DD Services for Children	-	(148,907)	701,015
25014	DD Abuse Investigations and Eligibility	-	97,152	58,145
<b>Aging and Disability Services Division</b>				
25020A	ADS Access and Early Intervention Services	5.47	-	1,599,409
25020B	Multnomah Project Independence - Reduced	-	176,642	-
25020C	Multnomah Project Independence	-	(76,374)	-
25022	ADS Adult Care Home Program	-	29,014	-
25023	ADS Long Term Care	9.20	-	-
25024	ADS Adult Protective Services	1.00	-	-
25027	ADS Administration	-	199,095	72,209
<b>Domestic Violence</b>				
25040A	Domestic Violence Victims Services and Coordination	-	193,845	(344,458)
25040B	Domestic Violence Enhanced Response Team	-	139,036	-
25040C	Domestic Violence Safe Start Collaboration	-	163,024	-
<b>Mental Health and Addiction Services Division</b>				
25050	MHASD Administration	2.00	(244,614)	325,407
25053	Mental Health Quality Management and Protective Services	-	(120,398)	129,255
25054	MHASD Business and Finance	1.00	147,865	198,936
25055	Behavioral Health Crisis Services	-	(105,110)	1,030,114
25056B	Crisis Assessment and Treatment Center - Operations	-	200,000	175,000
25057	Inpatient, Sub-acute & Residential Mental Health Services for Children	-	-	797,600
25058	Mental Health Commitment Services	-	(100,856)	737,027
25060	Mental Health Residential Services	1.50	188,620	4,927,975
25062	Mental Health Services for Adults	-	(84,104)	3,564,548

# County Human Services

fy2011 adopted budget

Prog. #	Program Name	FTE Changes (+/-) All Funds	Estimated \$ Change-GF	Estimated \$ Change-Other Funds
25063A	Mental Health Treatment & Medications for the Uninsured	-	(100,000)	-
25064	Early Assessment and Support Alliance	1.00	-	443,431
25065	Mental Health Peer Clubhouse	-	263,300	-
25066	Mental Health Organization Provider Tax	-	-	(1,760,723)
25067	Community Based Mental Health Services for Children and Families	-	-	1,191,486
25070	Bienestar Mental Health and Addiction Services	-	56,993	-
25075	School Based Mental Health Services	-	219,303	(268,082)
25080	Adult Addictions Treatment Continuum	-	193,266	3,235,392
25085	Addiction Services Gambling Treatment and Prevention	-	(12,615)	(64,612)
25086	Addiction Services Alcohol and Drug Prevention	-	-	(125,000)
25090A	Detoxification and Post-Detoxification Housing	-	354,790	-
25091B	Sobering Scale-up	-	150,000	-
25094A	Family and Youth Addictions Treatment Continuum	-	(130,119)	352,568
25096	Sexual Offense and Abuse Prevention	-	100,000	(250,000)
25098	Enhanced Family Involvement Team	-	-	762,257
<b>Community Services Division</b>				
25114B	Bridges to Housing - Scale	-	228,000	-
25118	Community Services Administration	-	121,487	(151,861)
25119	Energy Services	1.00	22,844	-
25120	Homeless Family Shelter System	-	295,000	-
25123A	Youth Gang Prevention	-	-	(12,077)
25124	East County Homeless Outreach	-	75,000	-
25127	Court Care	-	-	1,614
25133	Housing Stabilization for Vulnerable Populations	1.00	432,965	(35,495)
25139	Anti-Poverty Services	-	-	(955,331)
25140	Housing	-	27,435	(200,906)
<b>SUN Service System</b>				
25145	SUN Community Schools	-	-	73,518
25147	Child and Family Hunger Relief	-	186,043	-
25151	Parent Child Development Services	-	-	(12,737)
25156A	Bienestar Social Services	-	84,900	-

(this page intentionally left blank)

### Division Overview

The Department of County Human Services administration provides leadership, vision and policy direction to the service divisions. Other functions include: strategic direction of the department's mission; ensuring programs serve the county's vulnerable populations; supporting employees; fiscal oversight and accountability; and building partnerships that help improve service delivery in the human services system.

The Director's Office provides overall leadership for the department. The office meets regularly with service divisions, sets policy, addresses issues of cultural competency, communicates internally and externally about programs, researches and evaluates programs, takes the lead role in directing service delivery and serves as the mental health authority.

Human Resources (HR) supports more than 700 departmental employees. HR addresses recruiting, hiring and retention issues; workforce planning; training; management; job performance issues; and labor relations. The unit provides performance management coaching to ensure fair and equitable treatment of employees and makes sure the department adheres to the county personnel rules, policies and labor contracts.

Business Services provides the administrative, financial and business functions of the department. It handles development, management and oversight of the department's multi-million budget, including accounts receivable and payable; purchasing; facilities coordination; and grant management. It also makes sure the department is in compliance with all county, state and federal policies.

Contracts coordinates procurement and contracting functions for the department. The unit ensures implementation and compliance with all county contracting and procurement policies since the majority of funds administered within the department are contracted out to community partners.

#### Director's Office

• 25000 Director's Office

#### Human Resources

• 25001 Human Resources

#### Business Services

• 25002 Business Services

#### Contracts

• 25003 Contracts

### Significant Changes

The following describes the significant budget changes that impacted the division.

The administration routinely evaluates the department and assesses where changes need to take place.

For FY 2011, we moved a research and evaluation position from Business Services to the director's office to reflect actual reporting structure. A new 1.00 FTE research and evaluation position also is created to expand oversight of best practices while improving our capacity for performance measurement including the implementation of a department dashboard.

We reduced Business Services by 1.35 FTE - an Office Assistant 2 and a Program Development Specialist - in order to balance the County General Fund constraint. We moved the finance functions for the Mental Health and Addiction Services Division to the department's Business Services to improve department oversight of mental health funding.

The department also is poised to implement significant changes as part of the contract system redesign process that is going on across the county.

### Measuring Success

The administration has several ways to gauge its success. Given the expansive nature of the department's mission with six service divisions, the administration tallies the amount of formal communications with staff to make sure employees are informed about issues connected to the budget, Board of Commissioners and the Legislature. Also, we measure the level of communication with staff about general department information; contacts with stakeholders, providers and consumer groups; and outreach to civic, political and other leaders in Oregon.

The department also has set goals in improving the number of contract renewals executed before July 1. In FY 2009, about 51% of contracts for the department were renewed by July 1. In FY 2010, 70% of the contracts have been executed. The goal for FY 2011 is to have 80% executed by the same date.

Finally, in November 2009, Multnomah County conducted an "A-133" audit of federal grant dollars for FY 2009. DCHS had no audit findings or material weaknesses.



### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25000	Directors Office	\$561,834	\$608,485	\$1,170,319	5.00
25001	Human Resources	246,467	474,125	720,592	5.50
25002	Business Services	1,640,677	1,619,420	3,260,097	21.50
25003	Contracts	749,429	270,531	1,019,960	10.00
<b>Total</b>		<b>\$3,198,407</b>	<b>\$2,972,561</b>	<b>\$6,170,698</b>	<b>42.00</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Joanne Fuller

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Department of County Human Services (DCHS) Director's Office provides vision, leadership, and policy direction; facilitates the development of the Department's mission and strategic direction; functions as the County's Mental Health Authority; and sets Departmental priorities that support the overall County mission.

### Program Description

The DCHS Director's Office is responsible for ensuring that programs and activities are responsive and accountable, particularly in regard to legislative mandates. The DCHS Director's Office is responsible for communicating the Department's vision, mission, and priorities to decision makers, community partners, citizens and employees. The Director's Office takes the lead role in building partnerships that align service delivery in the most effective manner and in generating additional public/private resources in support of the human service system of care.

The DCHS Director's Office initiates and collaborates in planning with county elected officials, community leaders, other jurisdictions and leaders of other county departments; provides clear direction and decision making; defines the mission and vision for the department; continuously seeks improvements and new innovations; and communicates outcomes and evaluations.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of formal communications about department policy to employees <sup>1</sup>	45	45	45	45
Outcome	Advisors agree/strongly agree w/statement: Overall, D.O. does its job well <sup>2</sup>	0.0%	75.0%	92.0%	0.0%
Output	Legislative contacts <sup>3</sup>	10	20	30	30

### Performance Measure - Description

<sup>1</sup> Formal communications includes director's brown bag sessions, all-staff emails, and meetings with staff groups such as district offices or the department Employees of Color.

<sup>2</sup> This outcome is measured by a survey of advisory group members in alternating years. The next survey will be conducted Fall of 2011.

<sup>3</sup> Legislative contacts - This is a measure suggesting the degree of communication with legislative partners. Number will vary over time owing to biennial legislative session.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$276,705	\$301,537	\$265,091	\$372,307
Contracts	\$260,971	\$0	\$266,723	\$149,417
Materials & Supplies	\$18,564	\$19,680	\$2,771	\$40,847
Internal Services	\$52,336	\$34,482	\$27,249	\$45,914
Total GF/non-GF:	<b>\$608,576</b>	<b>\$355,699</b>	<b>\$561,834</b>	<b>\$608,485</b>
Program Total:	<b>\$964,275</b>		<b>\$1,170,319</b>	
Program FTE	2.04	2.31	2.28	2.72
<b>Program Revenues</b>				
Fees, Permits & Charges	\$732,262	\$0	\$561,834	\$0
Intergovernmental	\$0	\$355,699	\$0	\$608,485
<b>Total Revenue:</b>	<b>\$732,262</b>	<b>\$355,699</b>	<b>\$561,834</b>	<b>\$608,485</b>

**Explanation of Revenues**

\$148,731- OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09  
 \$333,620 - Title XIX: Based on FY09-11 projected State Biennial Budget  
 \$126,134 - Local Admin: Based on FY09-11 projected State Biennial Budget  
 \$561,834 - County General Fund Indirect

**Significant Program Changes**

**Last year this program was:** #25000, DCHS Director's Office

Staffing increase from FY10 in this program offer are due to the following factors:

Moved 1.0 FTE Research and Evaluation Analyst Senior position from DCHS Business Services (25002) to the Director's Office to reflect actual reporting structure;

Added, within current CGF constraint, 1.0 FTE Research and Evaluation Analyst 1 expanding departmental capacity to provide evaluation and research activities, conduct outcome evaluations and develop/monitor performance measures.

**Lead Agency:** County Human Services

**Program Contact:** Joanne Fuller

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

DCHS Human Resources support 700 regular and 33 temporary employees located throughout the County. HR services include recruiting, hiring and retaining staff; workforce and succession planning; new employee orientation and training; employee/labor relations; records management; management and employee training; employment law and labor contract compliance; and performance management consultation.

### Program Description

The Human Resources team provides services and consultation to managers and employees. Represented employees are covered by one of two labor contracts and some work multiple shifts/schedules that span 24 hour/daily operations. Principal functions and goals of the Human Resources group include: 1. organization consultation to ensure HR services and strategies support and add value to DCHS business strategies; 2. performance management coaching to ensure fair and equitable treatment for all employees and adherence to the County's personnel rules, policies and labor contracts; 3. integration of Departmental HR services with Central Human Resources and Labor Relations to develop and implement consistent and effective HR solutions and programs; 4. succession and workforce planning to ensure a diverse and talented pool of employees to fill future openings.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of recruitments conducted	101	50	100	105
Outcome	Increased management satisfaction with HR consultation and services	50.0%	70.0%	0.0%	70.0%

### Performance Measure - Description

The next HR satisfaction survey will be conducted in FY11.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$178,464	\$428,898	\$231,273	\$392,529
Contracts	\$3,774	\$0	\$3,831	\$1,000
Materials & Supplies	\$0	\$14,320	\$2,006	\$13,314
Internal Services	\$13,077	\$55,094	\$9,357	\$67,282
Total GF/non-GF:	<b>\$195,315</b>	<b>\$498,312</b>	<b>\$246,467</b>	<b>\$474,125</b>
Program Total:	<b>\$693,627</b>		<b>\$720,592</b>	
Program FTE	1.64	3.86	2.05	3.45
<b>Program Revenues</b>				
Intergovernmental	\$0	\$498,312	\$0	\$474,125
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$498,312</b>	<b>\$0</b>	<b>\$474,125</b>

**Explanation of Revenues**

\$157,748 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09  
 \$229,610 - Title XIX: Based on FY09-11 projected State Biennial Budget  
 \$86,767 - Local Admin: Based on FY09-11 projected State Biennial Budget  
 \$246,467 - County General Fund

**Significant Program Changes**

Last year this program was: #25001, DCHS Human Resources

**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Department of County Human Services (DCHS) Business Services provides administrative, financial and business support for the department. Services include development, management and administration of the department's multimillion dollar budget; grants management; accounts receivable; accounts payable; purchasing; facilities coordination; and customer service via the reception desk. Business Services staff serve as liaison between the department and internal service providers such as County Finance, Central Budget, Facilities and Property Management, Information Technology, and Fleet, Records, Electronics, Distribution and Stores(FREDS).

### Program Description

Business Services supports the work of the department by providing: budget development, management and reporting; accounts payable and receivable; grant accounting and reporting for approximately 150 funding sources; and implementation of, and compliance with, all county, state and federal fiscal policies and procedures related to the business of this department.

Business Services personnel provide administrative and support services for the department; work across the County with other Departments and Agencies in coordinating the provision of information technology, facilities management and FREDS; function as liaison to the DCHS Citizen Budget Advisory Committee; and represents the department on several Countywide workgroups and committees.

DCHS Business Services provides responsible leadership; sound budgetary and financial management; and delivers results that are consistent with the department's and county's priorities.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Percent of invoices paid in 30 days or less	78.0%	82.0%	80.0%	81.0%
Outcome	Percent of grant financial reports submitted to the grantor error free	98.0%	98.0%	98.0%	99.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$789,085	-\$56,785	\$860,816	\$1,018,968
Contracts	\$658,111	\$18,842	\$766,661	\$20,000
Materials & Supplies	\$28,095	\$26,173	\$2,200	\$44,334
Internal Services	\$214,622	\$327,453	\$11,000	\$536,118
Total GF/non-GF:	<b>\$1,689,913</b>	<b>\$315,683</b>	<b>\$1,640,677</b>	<b>\$1,619,420</b>
Program Total:	<b>\$2,005,596</b>		<b>\$3,260,097</b>	
Program FTE	10.27	12.23	10.05	11.45
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$0	\$203,753	\$0
Intergovernmental	\$0	\$1,382,706	\$0	\$1,619,420
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,382,706</b>	<b>\$203,753</b>	<b>\$1,619,420</b>

**Explanation of Revenues**

\$460,261 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09  
 \$915,130 - Title XIX: Based on FY09-11 projected State Biennial Budget  
 \$244,029 - Local Admin: Based on FY09-11 projected State Biennial Budget  
 \$748,283 - County General Fund  
 \$688,641 - County General Fund Match  
 \$203,753 - County General Fund Indirect

**Significant Program Changes**

**Last year this program was:** #25002, DCHS Business Services

Staffing changes from FY10 in this program offer are due to the following factors:

During FY10 transferred the supervision of three finance positions (1.0 FTE Finance Specialist 1, 1.0 FTE Finance Specialist 2, and 1.0 FTE Finance Specialist Senior) from MHASD Business and Finance (25054) to DCHS Business Services allowing for departmental oversight of MHASD finances.

Moved 1.0 FTE Research and Evaluation Analyst Senior position to DCHS Director's Office (25000) to reflect actual reporting structure;

Eliminated a .35 FTE Program Development Specialist which was to be focused on research and evaluation; and

Eliminated 1.0 FTE Office Assistant 2 which will require redistribution of these job duties to other clerical staff and/or the reception desk.



**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

DCHS Contracts Unit coordinates and provides all procurement and contracting functions for the department. The unit serves as liaison between the department and county Central Procurement and Contract Administration. Nearly 65% of the total funds in the department are contracted to community based providers for services to the vulnerable populations served by DCHS. The unit ensures implementation of and compliance with county contracting and procurement policies and procedures.

### Program Description

DCHS Contracts Unit provides procurement and contracting support for more than 600 contracts and amendments for Aging and Disability Services, Developmental Disabilities Services, Mental Health and Addiction Services, the Domestic Violence Coordinator's Office, the SUN Service System and Community Services. It is projected that in FY11 the unit will process contracts and amendments that exceed the more typical annual count of 400 due to anticipated new grant awards, increased volume of scheduled procurements, changed policies and regulations.

In FY11, the Contracts Unit will take a lead role in the implementation of the January 2009 Contract Action Team Report recommendations through the Contract System Redesign process.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of executed contracts and amendments	400	400	600	600
Outcome	Percent of annual contract renewals executed prior to July 1st.	51.0%	70.0%	70.0%	80.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$629,569	\$232,120	\$667,147	\$234,403
Contracts	\$3,700	\$1,300	\$5,056	\$500
Materials & Supplies	\$6,564	\$7,982	\$10,202	\$6,941
Internal Services	\$53,371	\$23,405	\$67,024	\$28,687
Total GF/non-GF:	<b>\$693,204</b>	<b>\$264,807</b>	<b>\$749,429</b>	<b>\$270,531</b>
Program Total:	<b>\$958,011</b>		<b>\$1,019,960</b>	
Program FTE	7.41	2.59	7.35	2.65
<b>Program Revenues</b>				
Intergovernmental	\$0	\$264,807	\$0	\$270,531
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$264,807</b>	<b>\$0</b>	<b>\$270,531</b>

**Explanation of Revenues**

\$147,844 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$122,687 - Local Admin: Based on FY09-11 projected State Biennial Budget

\$749,429 - County General Fund

**Significant Program Changes**

Last year this program was: #25003, DCHS Contracts

### Division Overview

Developmental Disabilities Services Division (DDSD) serves over 4,200 people that experience both intellectual and physical disabilities diagnosed prior to the age of twenty two. DDSD provides case management linking families and clients to family support resources, residential, employment and community inclusion as well as brokerage services in order to provide personal choice, independence, and community integration. DDSD also oversees Region One, a five-county consortium for people with developmental disabilities who meet certain crisis criteria. Partner counties include Clackamas, Clatsop, Columbia and Washington.

DDSD contracts with eighteen nonprofit, and seven for-profit providers for residential group home and supported living services. Over two hundred adult foster care homes also provide services to adults with developmental disabilities and many provide crisis residential services as well.

There has been significant research, one of which is the National Association of Social Workers (NASW), that demonstrates the impact of marginalization on both the family and the individual with developmental disabilities. Families and individuals with developmental disabilities remain among the most marginalized of our society. According to the NASW, case management can be the instrument that provides significant change for the better once the family has requested services. In order to reach the most under served and under represented population DDSD has significantly increased outreach in the last five years. Intake of individuals and families for whom English is their second language has increased by fifty percent. Increased outreach continues in FY 2011 with emphasis on family forums that provide specific populations with training and support to operate independently as advisory groups for their community.

#### Administration

- 25010 Administration & Support

#### Case Management

- 25012 Services for Adults
- 25013 Services for Children

#### Abuse Investigations and Eligibility

- 25014 Abuse Investigations & Eligibility

#### Monitoring & Crisis Services

- 25015 Coordinating, Monitoring & Crisis Unit

### Significant Changes

The following describes the significant budget changes that impacted the division. More information can be found in the program offers.

Region One, a five-county crisis diversion program that places people with developmental disabilities into residential services when they meet certain state and federal guidelines was moved from administration to the coordination and monitoring unit (25010) for clarity within the program.

Due to changes in the billing services for targeted case management and changes in the standards for Federal matching funds, and limitations in county funding, a reduction in force for FY 2011 includes five vacant case management positions (25012 and 25013) and eight administrative positions (25010 and 25015).

In order to assure the audit-worthy status of Developmental Disabilities a Quality Assurance Plan was developed that addresses the six primary Federal Medicaid Assurances (PO 25010). Three categories, level of care, service plans, and health and welfare, secure the health and safety of people with developmental disabilities. The remaining three, financial accountability, qualified providers, and administrative authority certify the agencies that provide client services.

### Measuring Success

Measuring success in the Developmental Disabilities Division is a challenging prospect when compared to programs and Divisions with client services that provide for either significant improvement or recovery. Developmental Disabilities are a life-long experience.

DD tracks the number of monitoring visits to residential sites annually to assure that every site has ten visits per year. We track the number of abuse investigations opened and the requirement to complete them within the 45-day state mandated time line.

Due to a transition from a museum quality Paradox software program to a Crystal reports software program, we discovered that most, if not all, of the information that had been diligently gathered over the last few years was corrupted and invalid. This year we will have our entire system on Crystal reports and expect accurate information for the next budget year.

### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25010	DD Administration and Support	\$566,574	\$1,468,836	\$2,035,410	13.59
25012	DD Services for Adults	0	2,738,149	2,738,149	27.41
25013	DD Services for Children	53,804	3,793,968	3,847,772	38.60
25014	DD Abuse Investigations and Eligibility	984,761	925,499	1,910,260	19.00
25015	DD Coordination, Monitoring and Crisis Services Unit	541,450	13,418,533	13,959,983	30.80
<b>Total</b>		<b>\$2,146,589</b>	<b>\$22,344,985</b>	<b>\$24,491,574</b>	<b>129.40</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Administration provides oversight and Medicaid audit-worthy status of the Developmental Disabilities Services Division. This unit ensures more than 4,100 people are provided quality case management, and many are provided vocational supports in the community, as well residential services. Administration monitors quality assurance through records management and monthly quality assurance activities that include file reviews, staff training and site visits.

### Program Description

Developmental Disabilities administration oversees all programs and partners, and seeks resolution on complaints and grievances. The program influences state policy. It maximizes resources by leveraging local funds and collaborating with other counties; develops the workforce; and seeks to continuously improve service delivery. Administration supports the accountability key factors of leadership, resource management and results. Outreach is extended to diverse under-represented populations. The division leverages federal match for administrative services using county funds in order to provide more fully all the administrative tracking and oversight required by the state.

In an effort to move towards industry "Best Practices" there have been some significant changes to the methodology used for Quality Assurance in the Developmental Disabilities Services Division. This new methodology moves Developmental Disabilities to review client records using a stratified sampling method with a more focused review that is statistically valid, is in compliance with Federal and State requirements and the most recent Oregon Administrative Rule changes. Along with these changes, Developmental Disabilities has also improved the outcome measure as the result of consultation with the Federal Centers for Medicaid Services Technical Assistance.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of clients records audited annually for compliance <sup>1</sup>	5,063	3,700	5,000	4,240
Outcome	% of total audited records reviewed and corrected <sup>2</sup>	80.0%	88.0%	0.0%	0.0%
Outcome	% of client records audited that are Medicaid Compliant <sup>3</sup>	0.0%	0.0%	65.0%	65.0%

### Performance Measure - Description

<sup>1</sup> Original output measure did not include Serious Event Review Team (SERT) audits done by SERT committee. The addition of this category increased total. Number based on Average of 200 SERT audits done monthly and projected stratified sample size based on Raosoft calculator.

<sup>2</sup> Upon review, this outcome measure has been dropped per guidance received by Federal Technical Assistance Senior Advisor.

<sup>3</sup> Per guidance of Federal Technical Assistance Senior Advisor this outcome measure has been adopted.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$19,544	\$2,146,628	\$0	\$1,257,416
Contracts	\$573,584	\$55,001	\$540,998	\$55,000
Materials & Supplies	\$2,172	\$46,285	\$25,576	\$23,965
Internal Services	\$14,754	\$278,152	\$0	\$132,455
Total GF/non-GF:	<b>\$610,054</b>	<b>\$2,526,066</b>	<b>\$566,574</b>	<b>\$1,468,836</b>
Program Total:	<b>\$3,136,120</b>		<b>\$2,035,410</b>	
Program FTE	0.19	21.20	0.00	13.59
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$1	\$0	\$0
Intergovernmental	\$0	\$2,420,357	\$0	\$1,468,836
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,420,358</b>	<b>\$0</b>	<b>\$1,468,836</b>

**Explanation of Revenues**

\$677,174 - State Mental Health Grant Local Admin: Based on FY09-11 projected State Biennial Budget  
 \$791,662 - State Mental Health Grant Case Management: Based on FY09-11 projected State Biennial Budget  
 \$25,576 - County General Fund  
 \$540,998 - County General Fund Match

**Significant Program Changes**

**Last year this program was:** #25010, Developmental Disabilities Administration & Support  
 FY10 to FY 11 change reflects loss of Local Admin funding through the State Mental Health Grant resulting in the reduction of 7.0 vacant FTE. To meet CGF constraint eliminated .80 FTE Office Assistant Sr. position in this program offer. Moving Region 1 Crisis Services to 25015 - Coordinating, Monitoring & Crisis Services Unit. All contracts and funds for the region will be directed operationally through program offer 25015.



**Program # 25012 - DD Services for Adults**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Jeanne Wheaton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program serves approximately 2,300 Medicaid recipients who have been determined by the Developmental Disabilities Services Division to have a developmental disability. Of these consumers, approximately 1,140 are actively enrolled in a program under contract with DDSD under the Home and Community Based Waiver. The primary responsibility is to monitor 317 residential, adult foster care and supported living sites to assure that providers are in compliance with the Oregon Administrative Rules and also to assure the health and safety of the residents.

**Program Description**

Services for adults with developmental disabilities are person centered and link clients with services and resources in their neighborhoods, and assist clients in applying for financial and housing benefits. Monitoring customer health and safety is our primary responsibility. The program assists customers by involving family, friends and community partners in their lives and promotes an enriched quality of life. It also develops skills, confidence, self-worth and independence. Services for adults exist to help adults with developmental disabilities in the areas of self-care, behavior and resource coordination to places and people in the community. The program partners with state and local organizations that have mutual interest in any of our clients, such as community justice, mental health and the Department of Vocational Rehabilitation. Program interventions avert crises, monitor customers and provider health and safety concerns, and assist the customer to live more independently. Through monitoring of program services, instances of abuse are more likely to be detected and investigated.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total Number of adults served	2,300	2,300	2,300	2,300
Outcome	Total monitoring visits for residential sites <sup>1</sup>	7,552	9,600	7,980	7,980

**Performance Measure - Description**

<sup>1</sup> The performance measures were originally developed utilizing a program with Paradox. DDSD has converted to using a new reporting system with Crystal Reports. Unfortunately, moving to this new reporting system has made it apparent that information coming out of Paradox was not correct. Therefore, although the program measures have been diligently entered and maintained, the higher estimates were not achievable.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$2,972,924	\$0	\$2,251,786
Materials & Supplies	\$0	\$79,314	\$0	\$48,035
Internal Services	\$0	\$453,187	\$0	\$438,328
Total GF/non-GF:	<b>\$0</b>	<b>\$3,505,425</b>	<b>\$0</b>	<b>\$2,738,149</b>
Program Total:	<b>\$3,505,425</b>		<b>\$2,738,149</b>	
Program FTE	0.00	34.41	0.00	27.41
<b>Program Revenues</b>				
Intergovernmental	\$0	\$3,505,425	\$0	\$2,738,149
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$3,505,425</b>	<b>\$0</b>	<b>\$2,738,149</b>

**Explanation of Revenues**

\$2,501,565 - State Mental Health Grant Case Management: Based on FY09-11 projected State Biennial Budget  
\$236,584 - State Mental Health Grant Quality Assurance: Based on FY09-11 projected State Biennial Budget

**Significant Program Changes**

**Last year this program was:** #25012, Developmental Disability Services for Adults

Loss of Case Management funding through the State Mental Health Grant. Eliminated 6.0 Local 88 FTE vacant positions, 1.0 FTE vacant Program Coordinator position, and moved selected filled positions to DD Services for Children (25013) in response to increased case load demand in that program. Caseloads on adult teams will increase from average of 50 to 65.

**Lead Agency:** County Human Services

**Program Contact:** Jeanne Wheaton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program serves more than 1,800 children (birth to 21) with developmental disabilities. On July 1, 2009 the Oregon Administrative Rule changed requiring all children ages birth to 17 who are not receiving comprehensive services to be enrolled in the Family Support Program. Approximately 830 children are now eligible for Family Support Services. This program supports the integration and inclusion of these children into all aspects of community life. Family support services include referrals to community resources, family to family support groups, and training opportunities. It also provides funding for respite care, adaptive equipment, and medical supplies. These services allow children with serious disabilities to remain in their family homes and stay out of foster care and residential sites.

### Program Description

Services for children is child-centered and family focused, providing assistance required to maintain in-home placement. Funding for services to children is only 2% of all service funds, including those managed here and paid through the state. Child-centered planning and above listed supports help to identify the customer's interests, focuses on strengths, promotes independence and self-worth, and maps out family, friends and community members as potential resource people. As a child approaches 18(or 21 if the child is still in school), planning is done to transition the customer to adult services. Children represent 68% of the customers deemed eligible for DD services in the past fiscal year.

Growth in services to children reflects the increased number of developmentally disabled children served throughout Oregon. The program partners with state and local organizations that have mutual interest in any of our clients. This partnership strengthens families and helps to reduce the higher costs of out-of-home crisis placements. These services allow seriously disabled children to stay out of institutions and to remain in their family homes.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of children served.	1,800	1,825	1,900	1,900
Outcome	# of resource referrals to families <sup>1</sup>	2,930	5,500	3,500	0
Outcome	Total children enrolled in and accessing family support services <sup>2</sup>	0	764	764	850

### Performance Measure - Description

<sup>1</sup> There are two significant changes to this program. First, the performance measures were originally developed utilizing a program with Paradox. DDSD has converted to a new reporting system with Crystal Reports. Unfortunately, moving to this new reporting system has made it apparent that information coming out of Paradox was not correct. Therefore, although the program measures have been diligently entered and maintained, the higher estimates were not achievable and this outcome has been dropped.

<sup>2</sup> The change in the OAR requires assurance that all children not in comprehensive services to be enrolled in Family Support.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$141,131	\$2,656,864	\$27,830	\$3,137,664
Contracts	\$34,140	\$0	\$24,140	\$0
Materials & Supplies	\$4,346	\$68,451	\$178	\$68,530
Internal Services	\$23,094	\$367,638	\$1,656	\$587,774
Total GF/non-GF:	<b>\$202,711</b>	<b>\$3,092,953</b>	<b>\$53,804</b>	<b>\$3,793,968</b>
Program Total:	<b>\$3,295,664</b>		<b>\$3,847,772</b>	
Program FTE	2.10	36.50	0.10	38.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,946,711	\$0	\$3,793,968
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,946,711</b>	<b>\$0</b>	<b>\$3,793,968</b>

**Explanation of Revenues**

\$3,793,968 - State Mental Health Grant Case Management: Based on FY09-11 projected State Biennial Budget  
 \$53,804 - County General Fund

**Significant Program Changes****Last year this program was:**

Loss of Case Management funding through the State Mental Health Grant. Eliminated vacant positions and transferred other positions from Adult Services to this program offer due to increased caseload demand. Net FTE effect of zero. Caseloads on children's teams will still increase from average of 45 to 50.

**Lead Agency:** County Human Services

**Program Contact:** Leslie Goodlow Baldwin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Abuse Investigation Team reviews and screens all serious incident reports submitted to the county. They determine which reports meet Oregon's definition of abuse/neglect and investigate those incidents. Abuse investigators screen an average of 3,600 serious event reports per year and conduct an average of 260 investigations annually. The team maintains ongoing relationships with local, state and federal law enforcement; the Psychiatric Security Review Board; and participates on the District Attorney's Multi-Disciplinary Team as legislated in House Bill 2442.

Eligibility is the entryway to Developmental Disabilities services and introduces potential clients to county services. There is an average of 72 intake referrals per month, with a total of approximately 860 per year.

### Program Description

The Abuse Investigation Team screened 3,688 serious incident reports in Fiscal Year 08-09 and is projected to screen nearly 4,000 in Fiscal Year 09-10. These screenings determine whether county action is needed to protect a client's health and safety. The primary responsibility of the investigation unit is to ensure appropriate safety plans are in place and to conduct thorough, unbiased investigations. This unit investigates allegations of abuse, neglect or exploitation of adults now or previously enrolled in Multnomah County Developmental Disabilities. This includes clients served by the brokerages who don't receive Developmental Disabilities case management. Brokerages are a secondary case management system to which clients may be referred. The county Developmental Disabilities program retains Medicaid responsibilities for these clients. As of this year, the abuse investigators have jurisdiction and responsibility to investigate care providers and non-care providers when a trusted relationship exists under expanded definitions of abuse.

The Intake and Eligibility unit ensures that eligible clients gain access to services. Once eligible, Intake moves the client into the appropriate Developmental Disabilities case management unit for immediate access to program services. Per state rule, eligibility must be re-determined for children at ages 7, 18, and for consumers who have Developmental Disabilities other than mental retardation by age 22. The unit averages 30 re-determinations per month. Eligibility/Intake is the single point of access to services for persons with developmental disabilities.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of abuse investigations <sup>1</sup>	252	330	290	300
Outcome	% of abuse investigations completed within 45 day timeline <sup>2</sup>	84.5%	85.0%	85.0%	85.0%
Output	# of Intake eligibility referrals	701	625	864	950

### Performance Measure - Description

<sup>1</sup> Number of abuse investigations refers to the number of investigations opened and closed during the fiscal year.

<sup>2</sup> Oregon Administrative Rule requires investigations and reports to be concluded within 45 days. This is not always possible due to extenuating circumstances such as difficulty obtaining documentation or interviewing witnesses. The projected completion rate includes those investigations with approved extensions from the Office of Investigations and Training.

## Legal/Contractual Obligation

Multnomah County serves as the designee for services to people with disabilities in performing the functions described in this offer. Funds are designated to the CDDP to pay for abuse investigations and eligibility determinations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$732,668	\$743,752	\$792,756	\$826,601
Contracts	\$20,000	\$0	\$30,000	\$0
Materials & Supplies	\$19,992	\$19,557	\$15,806	\$16,111
Internal Services	\$114,949	\$104,045	\$146,199	\$82,787
Total GF/non-GF:	<b>\$887,609</b>	<b>\$867,354</b>	<b>\$984,761</b>	<b>\$925,499</b>
Program Total:	<b>\$1,754,963</b>		<b>\$1,910,260</b>	
Program FTE	8.98	9.22	9.16	9.84
<b>Program Revenues</b>				
Intergovernmental	\$0	\$867,354	\$0	\$925,499
Total Revenue:	<b>\$0</b>	<b>\$867,354</b>	<b>\$0</b>	<b>\$925,499</b>

## Explanation of Revenues

\$546,498 - State Mental Health Grant Local Admin: Based on FY09-11 projected State Biennial Budget

\$379,001 - State Mental Health Grant Other: Based on FY09-11 projected State Biennial Budget

\$984,761 - County General Fund

## Significant Program Changes

### Last year this program was:

Increased personnel costs as a result of classification change from Case Manager Senior to Human Services Investigators; eliminated .20 FTE Office Assistant Senior to meet CGF constraint; added 1.0 FTE Social Worker position funded with in-target CGF and anticipated match funding.

**Lead Agency:** County Human Services

**Program Contact:** Leslie Goodlow Baldwin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Developmental Disabilities Coordinating, Monitoring and Crisis Services unit provides comprehensive and support services and crisis services to more than 1,400 adults and children with developmental disabilities. These services range from short-term crisis support or crisis placement, to in-home supports and/or long-term residential placements. The unit is responsible for arranging placements and managing facility support services, monitoring services provided by contracted agencies and/or families, and accessing and tracking funding associated with the services and supports. These supports are accessed through crisis services when the client is at risk for civil commitment, out of home placement, and/or when health and safety is at risk. In addition, the unit maintains and manages the division's personnel and operation budget. This includes tracking and verification of revenue that is received for several different funding streams, ensuring that the funds are applied to the appropriate cost center and overseeing expenses incurred.

### Program Description

To access comprehensive and support services the individual must meet the criteria for crisis services as defined above. These services can be short or long term in nature. Short-term supports include accessing a crisis bed, behavior consultation, nursing support, respite, and other supports needed to stabilize the client. Long-term supports can include residential placement, supported living, in-home supports, and employment/alternative to employment.

The unit is responsible for making appropriate placements, coordinating services, accessing funding, and monitoring services provided as required by the Oregon Administrative Rules. There are currently approximately 650 adults and children in foster care, 600 adults in 24 hour group homes, 174 adults in supported living, 1,300 adults in vocational services, 47 adults with in-home services. There are 80 children with in home services and an estimated 500 families will be able to access a small amount of funding for Family Support this year.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of programmatic monitoring visits performed by unit	369	400	375	400
Outcome	% of group homes that pass licensing on their first visit <sup>1</sup>	0.0%	0.0%	15.0%	25.0%
Outcome	% of sites monitored that met program standards on their first visit <sup>2</sup>	68.0%	73.0%	0.0%	0.0%

### Performance Measure - Description

<sup>1</sup> This is a new outcome measure that more accurately reflects the work done by the monitoring unit to provide technical assistance and training to providers in attaining licensure.

<sup>2</sup> This outcome measure is being discontinued as the unit does not have access to information to determine the rate at which homes pass licensing.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$85,647	\$2,613,279	\$90,914	\$2,700,938
Contracts	\$413,008	\$433,904	\$420,189	\$419,606
Materials & Supplies	\$35,173	\$9,737,859	\$13,790	\$9,803,127
Internal Services	\$11,524	\$445,000	\$16,557	\$494,862
Total GF/non-GF:	<b>\$545,352</b>	<b>\$13,230,042</b>	<b>\$541,450</b>	<b>\$13,418,533</b>
Program Total:	<b>\$13,775,394</b>		<b>\$13,959,983</b>	
Program FTE	1.00	29.75	1.00	29.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$37,315	\$0	\$48,567	\$0
Fees, Permits & Charges	\$0	\$7,000	\$0	\$9,000
Intergovernmental	\$0	\$12,943,042	\$0	\$13,409,533
Other / Miscellaneous	\$0	\$280,000	\$0	\$0
<b>Total Revenue:</b>	<b>\$37,315</b>	<b>\$13,230,042</b>	<b>\$48,567</b>	<b>\$13,418,533</b>

**Explanation of Revenues**

\$13,375,976 - State Mental Health Grant: Based on FY09-11 projected State Biennial Budget  
 \$27,053 - Housing Authority of Portland, ARRA: Based on FY10 budgeted numbers  
 \$6,504 - Housing Authority of Portland: Based on FY10 budgeted numbers  
 \$9,000 - Fees: Based on historical average  
 \$149,914 - County General Fund  
 \$391,536 - County General Fund Match

**Significant Program Changes**

**Last year this program was:** #25015, Coordinating, Monitoring & Business Unit Program  
 Moving Region 1 Crisis services to this program offer from 25010 administration, all contracts and funds for the region are directed operationally through this program offer.



### Division Overview

Aging and Disability Services Division (ADS), the county's Area Agency on Aging and Disability, helps the county's 200,000 older adults, people with disabilities and veterans, live as independently as possible by linking them to a range of quality services that meet their diverse needs and preferences. In addition, ADS assists an increasing number of veterans with disabilities and family caregivers to obtain the resources they need.

The division is preparing for the county's growing aging population. The most significant concern is the rapidly expanding over-85 population, that will require services as individuals age in place. Planning for these changes has been guided by the 2008 Community Needs Survey, conducted by ADS and Portland State University's Institute on Aging. A key goal is to reach adults with disabilities and seniors early with the services they need to maintain independence. ADS will soon transform the division's main entry point, the Helpline, into an Aging and Disability Resource Center (ADRC) model, a national best practice. As the public uses the Internet more, it is becoming a valuable resource to transmit and seek information for clients and their families. The Adult Care Home Find-a-Home website was added recently as a new feature. In response to increasing financial abuse, Adult Protective Services has added forensic specialist capacity to investigations. ADS has received 3 new grant awards to pursue innovations and promising practices, such as interventions for caregivers of people with Alzheimer's Disease. ADS's work to reach people early in nursing homes promotes their return to community living. ADS is working with ethnic communities and other partners to implement practices that will improve health outcomes for ethnic, racial and cultural minorities.

Harvard's George Valliant in his recent book, "Aging Well," cites research that seniors who perform service have more positive lives than those who do not. Part of healthy aging is volunteering, and we intend to motivate the retirees of today to become the volunteers of tomorrow.

#### Administration

- 25027 Administration

#### Access and Early Intervention

- 25020A Access & Early Intervention
- 25020B-C Multnomah Project Independence
- 25022 Adult Care Home Program

#### Advocacy and Volunteerism

- 25030 Elders in Action

#### Protection

- 25024 Adult Protective Services
- 25026 Public Guardian/ Conservator

#### Access to Public Benefits & Care Coordination

- 25023 ADS Long Term Care

### Significant Changes

The following describes the significant budget changes that impacted the division. More information can be found in the program offers.

The two most significant factors driving ADS budget and programmatic changes are both demographic. The division is seeing a growing number of over-85 clients present with increasingly complex challenges to living safely in the community. This impacts Long Term Care (25023) and Adult Protective Service (25024) programs. Second, the division is gearing up for the coming “Age Wave,” or the increasing number of aging Baby Boomers. The effect of these factors is found throughout ADS’s program offers.

ADS has received new grant funding to help address these changes and utilize best practices aimed at extending the time clients remain at home, in the community and independent. These grants focus on increasing positive outcomes in health and wellness, safety and volunteerism. These efforts affect the Access and Early Intervention (25020) budget.

The division’s emphasis on implementing the national best practice Aging and Disability Resource Center (ADRC) model means reallocating resources among programs, and involves Long Term Care (25023) and Access and Early Intervention (25020). In addition, Long Term Care (25023) is reallocating resources to an effort to transition nursing home residents back into the community or divert them from nursing facilities in the first place.

### Measuring Success

The division closely follows two measures of client independence and safety, and one annual overall measure of excellence.

The primary metric to track independence is the proportion of nursing facility-eligible clients diverted to or maintained in a community-based residence. Presently, 80 out of 100 Medicaid recipients who might have filled a nursing home bed are instead living in the community. That’s a total of 5,200 Multnomah County residents. Oregon remains a national leader in this effort.

A measure of safety is the re-abuse rate of vulnerable people in our Adult Protective Services system. The state benchmark for re-abuse of this population is five percent; our program has consistently maintained a four percent re-abuse rate, exceeding the state benchmark by 20%.

Finally, each year we survey members of our three advisory committees, Elders in Action, Disability Services Advisory Council, and the Multi-Ethnic Action Committee, we ask for their assessment of ADS’s work. The division consistently scores at or above 80% agreement with the statement: Overall, ADS does its job well.

### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25020A	ADS Access and Early Intervention Services	\$2,924,590	\$6,395,345	\$9,319,935	24.37
25020B	Multnomah Project Independence - Reduced	246,642	0	246,642	0.00
25020C	Multnomah Project Independence	215,771	0	215,771	0.00
25022	ADS Adult Care Home Program	94,133	1,629,587	1,723,720	13.00
25023	ADS Long Term Care	1,712,471	21,985,627	23,698,098	222.80
25024	ADS Adult Protective Services	892,793	4,082,415	4,975,208	38.60
25026	ADS Public Guardian/Conservator	1,114,639	0	1,114,639	10.00
25027	ADS Administration	339,492	1,025,011	1,364,503	6.79
25030	ADS Elders in Action Commission and Personal Advocacy	161,160	0	161,160	0.00
<b>Total</b>		<b>\$7,701,691</b>	<b>\$35,117,985</b>	<b>\$42,819,676</b>	<b>315.56</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging and Disability Services Access and Early Intervention Services are the first point of contact for the county's 200,000 elderly, people with disabilities and veterans. Annually, more than 75,900 callers receive information and assistance and more than 10,200 people receive a variety of in-home, community and emergency services that support independence and prevent institutionalization and homelessness. These services are provided through the 24/7 Helpline and nine District Senior Centers (neighborhood-based non-profit agencies).

### Program Description

Aging and Disability Services Division (ADS) is the Area Agency on Aging and Disability for Multnomah County and as such is mandated to provide a comprehensive, coordinated service delivery system for the elderly and people with disabilities, emphasizing low-income, limited English-speaking, ethnic minorities and frail persons. The Area Agency's goal is to help people stay active, independent and healthy, preventing or delaying nursing home admission, and employing evidence-based practices to ensure effective outcomes.

Helpline and District Senior Center employees and volunteers counsel the elderly, people with disabilities and their families about county and community resources, public benefits, long-term care services and emergency services. Last year the Agency's nine District Senior Centers provided information and assistance to more than 43,700 individuals and the ADS Helpline assisted more than 32,200 callers. District Seniors Centers provide case management funded through federal, state and local sources to more than 2,700 individuals and authorize in-home and caregiver supports to more than 1,500 individuals and families.

Transportation is provided to approximately 950 individuals so they could access medical, nutrition and social supports. Centers provide 2,670 health, wellness and recreation activities to over 24,700 seniors.

More than 709,000 congregate and home delivered meals are provided. Ethnic-specific community organizations provide targeted outreach and nutrition services to almost 700 ethnic and racial minority elders.

Veterans Services Officers counsel 1,100 individuals and file claims for over 450 veterans, helping them to access over \$30 million annually in benefits and pensions.

Emergency Services help vulnerable elderly and people with disabilities avoid homelessness and acute health emergencies by providing emergency housing assistance to 550 individuals, emergency prescription assistance to 150 individuals and special medical assistance to 150 individuals.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Helpline and District Senior Center Assistance calls	75,953	76,000	76,000	76,000
Outcome	Callers rated Helpline good, very good or excellent <sup>1</sup>	87.0%	0.0%	0.0%	87.0%
Outcome	Clients stable/reduced nutritional risk after six months of intervention	82.0%	81.0%	81.0%	81.0%
Outcome	Housing retention rate at six months after service <sup>2</sup>	87.0%	83.0%	88.0%	87.0%

### Performance Measure - Description

<sup>1</sup>Survey conducted every two years.

<sup>2</sup>550 clients receive housing assistance.

## Legal/Contractual Obligation

ADS, as the state designated Area Agency on Aging and Disability for Multnomah County, is mandated under the most recent revision of the Older Americans Act, PL 109-365 amending Sec. 306 42USC 3026, and by Oregon Revised Statute 410.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$522,321	\$1,030,853	\$550,444	\$1,525,530
Contracts	\$1,238,499	\$3,006,543	\$1,218,871	\$4,054,179
Materials & Supplies	\$712,540	\$264,747	\$675,624	\$299,667
Internal Services	\$446,507	\$493,793	\$479,651	\$515,969
Total GF/non-GF:	<b>\$2,919,867</b>	<b>\$4,795,936</b>	<b>\$2,924,590</b>	<b>\$6,395,345</b>
Program Total:	<b>\$7,715,803</b>		<b>\$9,319,935</b>	
Program FTE	6.35	12.05	6.31	18.06
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$23,069	\$0
Fees, Permits & Charges	\$0	\$182,369	\$0	\$183,945
Intergovernmental	\$0	\$4,613,567	\$0	\$5,980,300
Other / Miscellaneous	\$0	\$0	\$0	\$231,100
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$4,795,936</b>	<b>\$23,069</b>	<b>\$6,395,345</b>

## Explanation of Revenues

\$2,785,579 - Older Americans Act federal funds; \$606,415 - Oregon Project Independence; \$180,595 - Oregon Department of Veterans Affairs; \$928,204 - Title XIX; and \$635,824 Various Smaller Federal/State grants: All Based on FY09-11 projected State Biennial Budget

\$595,959 - Cities of Portland; \$3,000 - Fairview, and \$1,850 - Troutdale: All Based on FY10 grant award expected to be renewed

\$184,045 - Fees & Donations: Based on FY10 projected Revenue Y-T-D

\$231,000 - Beginning Working Capital Carryover: Based on Estimated FY10 Y-T-D spending

\$242,874 - Coporation of National & Community Foster Grandparent Program

\$45,658 - County General Fund Match; \$2,878,932 - County General Fund

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25020A, ADS Access & Early Intervention Services

Combining program offers #25020, ADS Access & Early Intervention Services and #25021, ADS Emergency Basic Needs for Vulnerable Adults in FY11 to reflect the organization of these services within ADS. Emergency prescription assistance, special medical needs and portions of transportation and meal services from #25021 have been included in this offer. The remainder of #25021 for case management, in-home services, meal and transportation services for Multnomah Project Independence will be included in out-of-target program offers #25020B and #25020C.

ADS pursued and was awarded three new grants to explore best practices in caregiving, volunteering, and nursing facility diversion for pre-Medicaid; these new grants increase revenue and FTE in FY11 and provide resources to help prepare the County for the growing senior population.

This program offer includes a 2% inflationary increase of \$ 14,230 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Multnomah Project Independence provides services to people with disabilities between the ages of 19 and 59 who require in-home and other support services to remain independent in their homes but who are not eligible for other public supports such as Medicaid or Oregon Project Independence. This reduced offer would serve approximately 135 people.

### Program Description

Through the Multnomah Project Independence program, Aging and Disability Services Division (ADS) provides in-home services and supports for low income younger disabled adults who are at risk for nursing facility placement, homelessness, or abuse and who do not qualify for other public services. The program includes case management and supports for both short term and ongoing interventions to access resources and stabilize individuals. Other funded services include: in-home services, home delivered meals and transportation.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Clients receiving MPI case management and in-home services	0	0	135	135
Outcome	Clients with improved risk assessment scores after six months of intervention	0.0%	0.0%	0.0%	85.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$0	\$0	\$0
Contracts	\$70,000	\$0	\$219,374	\$0
Materials & Supplies	\$0	\$0	\$27,268	\$0
Total GF/non-GF:	<b>\$70,000</b>	<b>\$0</b>	<b>\$246,642</b>	<b>\$0</b>
Program Total:	<b>\$70,000</b>		<b>\$246,642</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

Funded with \$246,642 of one-time-only general funds.

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25021, ADS Emergency Basic Needs for Vulnerable Adults  
 #25021, ADS Emergency Basic Needs for Vulnerable Adults, which has been combined this year in offer #25020, ADS Access & Early Intervention Services.



**Program # 25020C - Multnomah Project Independence**

**Version 6/16/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Multnomah Project Independence provides services to people with disabilities between the ages of 19 and 59 who require in-home and other support services to remain independent in their homes but who are not eligible for other public supports such as Medicaid or Oregon Project Independence. This program would serve approximately 100 additional people.

**Program Description**

Through the Multnomah Project Independence (MPI) program Aging and Disability Services Division (ADS) provides in-home services and supports for low income younger disabled adults who are at risk for nursing facility placement or homelessness and who do not qualify for other public services. The program includes case management and supports for both short term and ongoing interventions to access resources and stabilize individuals. Other funded services include: in-home services, home delivered meals and transportation. This offer provides the full funding for MPI with case management and other support service provided by contracted agencies.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Clients receiving MPI case management and in-home services	0	0	0	100
Outcome	Clients with improved risk assessment scores after six months of intervention	0.0%	0.0%	0.0%	85.0%

**Performance Measure - Description**

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$292,145	\$0	\$215,771	\$0
Total GF/non-GF:	<b>\$292,145</b>	<b>\$0</b>	<b>\$215,771</b>	<b>\$0</b>
Program Total:	<b>\$292,145</b>		<b>\$215,771</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

Funded with \$215,771 of one-time-only general funds.

**Significant Program Changes** **Significantly Changed****Last year this program was:**

#25021, ADS Emergency Basic Needs for Vulnerable Adults, which has been combined this year in offer #25020, ADS Access & Early Intervention Services. This offer requests County General Fund to restore a program that has been included in county budget constraint reductions.

**Lead Agency:** County Human Services

**Program Contact:** Bob Palmer

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Last year, the Adult Care Home Program licensed 596 Adult Care Homes in Multnomah County. These homes offer affordable, quality care in a homelike, culturally appropriate setting. The homes are licensed under state law and provide 24-hour care and supervision. They serve approximately 2,621 frail elderly individuals and offer a choice over the more expensive institutional nursing home setting.

### Program Description

The Adult Care Home Program (ACHP) is charged with ensuring that 2,621 vulnerable residents are cared for in a homelike environment that is friendly, safe and secure. All Adult Care Home operators are trained and required to follow the Multnomah County Administrative Rules. Each individual living in an Adult Care Home is to be treated respectfully and receive quality care. The program staff monitors and inspects each home at least once a year to ensure that residents receive necessary care, including personal care, nutrition, physical safety, nursing care and medication management. Program monitors also observe interactions in the home and check to ensure residents are provided with social and recreational activities. When monitors find problems, the program takes corrective action. Regular monitoring reduces the risk of abuse and neglect in adult care homes. Program staff provides technical assistance to Adult Care Home operators and enforces verbal/written sanctions or fines when there are serious deficits. All homes are licensed annually.

This program offer links directly to Basic Living Needs Priority strategies by ensuring care for seniors and people with disabilities and offering a care alternative that is affordable and prevents impoverishment.

Adult Care Homes provide quality long-term care options for frail elderly and people with disabilities desiring to live in the community. Without this option, many frail, elderly individuals would rely on more costly and restrictive alternatives. The average nursing home cost, \$6,168/month, is more than three times that of an Adult Care Home rate. By contrast, the average statewide monthly Medicaid cost in an adult care home is \$1,773, saving taxpayers thousands of dollars every year. Finally, without these homes the quality of life would be diminished for both Medicaid and private pay residents.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of Adult Care Homes licensed and inspected yearly	565	585	596	596
Outcome	Adult Care Homes found in compliance <sup>1</sup>	90.0%	92.0%	78.1%	90.0%
Quality	Adult Care Home/Nursing Home cost efficiency ratio <sup>2</sup>	24.1%	24.1%	28.7%	32.2%

### Performance Measure - Description

<sup>1</sup>The ACHP Assigned one licenser to monitor the 157 Developmentally Disabled Homes in Multnomah County. As a result, many compliance issues were found and corrected. It is expected that the coming fiscal year will see a return to a more normal compliance rate.

<sup>2</sup>Ratio = Adult Care Home cost as a % of Nursing Home cost. Lower % indicates better performance.

## Legal/Contractual Obligation

Multnomah County has a contract with the State of Oregon to administer the licensing and training functions of Adult Care Homes. The Board of County Commissioners passed Multnomah County Resolution § 23.600 - § 23.999 establishing the Adult Care Home Program.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$20,411	\$1,049,521	\$22,435	\$1,099,348
Contracts	\$40,714	\$346,612	\$67,945	\$323,830
Materials & Supplies	\$715	\$35,623	\$644	\$31,681
Internal Services	\$3,279	\$195,849	\$3,109	\$174,728
Total GF/non-GF:	<b>\$65,119</b>	<b>\$1,627,605</b>	<b>\$94,133</b>	<b>\$1,629,587</b>
Program Total:	<b>\$1,692,724</b>		<b>\$1,723,720</b>	
Program FTE	0.25	12.75	0.26	12.74
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$296,000	\$0	\$291,000
Intergovernmental	\$0	\$1,331,605	\$0	\$1,338,587
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,627,605</b>	<b>\$0</b>	<b>\$1,629,587</b>

## Explanation of Revenues

\$1,338,587 - Title XIX: Based on FY09-11 projected State Biennial Budget  
\$291,000 - Fees: Based on FY10 projected Revenue Y-T-D  
\$37,275 - County General Fund Match  
\$56,858 - County General Fund

## Significant Program Changes

**Last year this program was:**  
25022 ADS Adult Care Home Program

**Lead Agency:** County Human Services

**Program Contact:** Cathy Clay-Eckton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging and Disability Services Long Term Care program determines eligibility for financial, nutritional, medical and case management services for 34,000 low-income seniors and persons with disabilities. Intensive Case Management is provided to about 6,300 clients each month who meet state criteria for nursing home care due to the need for help with daily self-care tasks such as mobility, eating and toileting. Long Term Care serves about 5,000 clients in community-based settings and 1,300 clients in nursing facilities. This program offer brings more than \$25 million into the local economy through food stamp, medical and long-term care benefits received by ADS program clients.

### Program Description

Under contract with the state, the Long Term Care program determines eligibility and enrolls seniors and people with disabilities in programs that meet basic health, financial and nutritional needs through the Oregon Health Plan, Medicaid and SNAP (Food Stamp) programs. Clients receive counseling to help them choose the most appropriate managed care and Medicare Part D plans. The program provides referrals to community resources to address other critical unmet needs. These vulnerable adults typically have incomes below the poverty level and include individuals with a mental illness or a developmental disability.

Case managers assess clients' needs, create service plans, and authorize, coordinate and monitor services that address health and welfare risks in the least restrictive environment. They ensure early intervention and effective management of the complex and fluctuating care needs of this high-risk population. Nurses provide consultation to case managers to ensure appropriate care planning for medically complicated and unstable cases. Additionally, they support caregivers and provide wellness counseling/education and disease management for clients to optimize health. Collaboration with other professionals, divisions and community agencies to address the needs of a diverse client population is an essential aspect of this program.

A primary goal of case management is to help promote and support independent living in the community, preventing or minimizing more costly nursing home care wherever possible. Case managers provide services for 6,300 nursing home-eligible clients; About 5,000 clients (or about 80%) receive community based services that promote or support their independence outside of a nursing home, while an additional 1,300 are served in a nursing home setting. While the proportion of nursing home eligible clients residing in community-based settings in Multnomah County far exceeds the national average, it is a major program priority to improve on this percentage. The future will bring even greater challenges as the over 85 population – the demographic most likely to utilize nursing facility care – grows in number and proportion of the total population. In the face of this demographic challenge the program is dedicated to innovative efforts that will keep even more citizens in their own communities.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Avg monthly # of nursing home eligible clients receiving long term care asst <sup>1</sup>	6,304	4,623	6,475	6,590
Outcome	Ratio of nursing home eligible clients served in the community vs. nursing home <sup>2</sup>	80.0%	81.0%	79.1%	80.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup>The actual Current Year Purchased (FY09-10) number from last year's PO assumed program reductions in the Governor's Recommended Budget which did not materialize.

<sup>2</sup>A higher ratio indicates a better outcome.

## Legal/Contractual Obligation

Section 1903(a) of the Social Security Act, 42 CFR-Medicaid Administration; 7 CFR-Food Stamps; Sections 1915c and 1115 of Title XIX of the Social Security Act. All Oregon Administrative rules related to and governing programs administered by Aging and Disability Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$17,024,373	\$0	\$17,830,339
Contracts	\$1,754,524	\$128,244	\$1,712,471	\$130,968
Materials & Supplies	\$0	\$312,512	\$0	\$314,481
Internal Services	\$0	\$3,929,612	\$0	\$3,709,839
Total GF/non-GF:	<b>\$1,754,524</b>	<b>\$21,394,741</b>	<b>\$1,712,471</b>	<b>\$21,985,627</b>
Program Total:	<b>\$23,149,265</b>		<b>\$23,698,098</b>	
Program FTE	0.00	213.60	0.00	222.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$2,642	\$0	\$6,354	\$0
Fees, Permits & Charges	\$0	\$19,743	\$0	\$146,692
Intergovernmental	\$0	\$20,711,284	\$0	\$21,736,939
Other / Miscellaneous	\$0	\$97,525	\$0	\$101,996
<b>Total Revenue:</b>	<b>\$2,642</b>	<b>\$20,828,552</b>	<b>\$6,354</b>	<b>\$21,985,627</b>

## Explanation of Revenues

\$21,494,065 - Title XIX: Based on FY09-11 projected State Biennial Budget  
\$242,874 - Additional Title XIX for Foster Grandparent Program staffing  
\$121,196 - Providence Medical Center: Based on FY10 grant award  
\$101,996 - OHSU: Based on FY10 grant award  
\$25,496 - Fees: Based on FY10 projected Revenue Y-T-D  
\$1,712,471 - County General Fund Match

## Significant Program Changes

✓ Significantly Changed

**Last year this program was:** #25023A, ADS Long Term Care

Utilized Medicaid savings from COLA/Merit freeze to add several new positions in FY10; increased capacity where clients access program to meet growing demand for services. Resources have also been reallocated within LTC to enhance Transition/Diversion efforts to locate clients in the community.

**Lead Agency:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Adult Protective Services (APS) is responsible for protecting 165,000 seniors and people with disabilities from abuse, financial exploitation, neglect and self-neglect. Protective Services workers prevent further harm and link victims of abuse to vital health, legal and human services. This program conducts abuse investigations, provides risk management, Multi-Disciplinary Team (MDT) services, and educates the community about abuse. Eighty-nine percent of MDT participants showed improvement shortly after MDT intervention.

### Program Description

The primary goal of this program is to protect vulnerable elderly and persons with disabilities from abuse, neglect, self-neglect, and financial exploitation. Protective Services workers investigate abuse and rule violations in 135 care facilities and 596 adult care homes. The program responded to 8,231 abuse calls in FY09. Protective Services workers link vulnerable adults to needed healthcare, housing, social services, legal and client advocacy agencies.

APS coordinates with law enforcement and the District Attorney's Office to prosecute offenders. APS serves clients with complex psychosocial and medical needs in five branch offices located throughout the county via Multi-Disciplinary Teams (MDT). These teams are an evidence-based practice, and provided 2,214 clinical consults, served 563 clients with Mental Health needs, and provided 1,125 hours of nursing clinical supports to 743 clients. The core team membership consists of a Protective Services investigator, social worker, community health nurse, case manager, mental health specialist, and public guardian. The District Attorney's office and law enforcement participate on a monthly basis or as needed. Other professionals, clients, caregivers and family members are invited to participate as needed. This service is designed for clients who are unable to meet their basic needs and at times unwilling to accept medical, mental health or legal types of intervention. Eighty-nine percent of MDT participants showed improvement after MDT intervention. Without MDT intervention these clients are at risk of hospitalization, eviction, or jail. MDT clients are offered risk management which provides intensive oversight for up to 12 months to stabilize their situation or to link them to appropriate agencies and ongoing services.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Protective Services investigations completed <sup>1</sup>	2,811	3,200	2,706	3,000
Outcome	Re-abuse rate for elderly and people with disabilities	4.0%	4.0%	3.0%	4.0%
Outcome	Clients with improved living situation after 90 days of MDT intervention	89.0%	95.0%	85.0%	85.0%

### Performance Measure - Description

<sup>1</sup>Number of investigations impacted by gaining efficiency in creating the financial abuse specialist team (FAST) and by improving screening to focus investigations on cases that meet abuse criteria. There is also a notable surge in utilization of Multi-Disciplinary Teams to staff complex cases.

### Legal/Contractual Obligation

The State of Oregon delegates responsibility for APS to ADS as the Area Agency on Aging and Disability to run this program. ORS 410.020 (3)(d) and 410.040(9) and OAR 411-020-000 through 411-020-0130.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$309,632	\$3,215,372	\$325,160	\$3,407,802
Contracts	\$534,802	\$127,451	\$525,691	\$168,166
Materials & Supplies	\$5,040	\$50,032	\$5,355	\$56,733
Internal Services	\$38,986	\$499,189	\$36,587	\$449,714
Total GF/non-GF:	<b>\$888,460</b>	<b>\$3,892,044</b>	<b>\$892,793</b>	<b>\$4,082,415</b>
Program Total:	<b>\$4,780,504</b>		<b>\$4,975,208</b>	
Program FTE	3.12	34.48	2.99	35.61
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$515	\$0
Intergovernmental	\$0	\$3,892,044	\$0	\$4,082,415
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$3,892,044</b>	<b>\$515</b>	<b>\$4,082,415</b>

### Explanation of Revenues

\$3,915,440 - Title XIX; and \$18,078 - Various Smaller Federal/State grants: Based on FY09-11 projected State Biennial Budget

\$148,896- State Mental Health Grant Older/Disabled MH Svc: Based on FY09-11 projected State Biennial Budget

\$338,515 - County General Fund Match

\$554,278 - County General Fund

### Significant Program Changes

✓ Significantly Changed

**Last year this program was:** #25024, ADS Adult Protective Services

In FY10 the program received new DOJ funds via the District Attorney's Office for forensic expert consultation, evaluation, and testimony related to financial abuse cases to enhance probability of prosecution.

Decreased CGF match and increased base Medicaid for program; FY10 Adopted Budget restored an APS position and added the position to LTC in error; FY10 Budget Modification corrected LTC position.

Total CGF funding of \$554,278 in this program offer includes a \$187,176 from Mental Health and Addiction Services Division.



**Lead Agency:** County Human Services

**Program Contact:** Mark Sanford

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Public Guardian/Conservator program, under court authority, makes vital decisions for 160 mentally incapacitated and impoverished adults who are current or recent victims of physical abuse, neglect and financial exploitation. Legal authority delegated to deputies by the court enables intervention when no other approach resolves abuse and neglect. In addition, the program provides community education and consultation on matters involving vulnerable adults with diminished mental abilities. If unable to assist directly, staff divert approximately 200 clients into less costly services, or family and private guardianships/conservatorships.

### Program Description

The Public Guardian/Conservator program is an essential part of the county response system for abuse and neglect when legal authority is required to provide for the safety and well-being of incapable adults. Program staff work with adult protective services and law enforcement to educate community partners and families, and to intervene early to resolve fraud, abuse and neglect of extremely vulnerable adults. This includes participation on Department of County Human Services multidisciplinary teams and critical case review committees to assure that alternatives are considered, focusing public funds on at-risk citizens without other resources. Public Guardians are available 24 hours a day, seven days a week, to make medical, psychiatric, financial and life decisions for program clients.

The program serves as the court-appointed guardian and/or conservator for mentally incapable adults, who are characterized by two or more of the following conditions: treatment-resistant mental illness, IQ below 70, Alzheimer's/other dementia, brain injury, complex medical and behavioral issues, no access to medical care, inadequate care and housing, financial exploitation. Program clients are also functionally incapacitated, requiring intensive supports and specialized housing arrangements to balance the need for protection with the right to autonomy.

Guardianship and conservatorship ensure a maximum of about 160 county residents (based on program funding constraints) access to safe and appropriate housing, medical care, psychiatric treatment, long term care, income and benefits. Without this option, clients experience continuing victimization, frequent emergency room and hospital psychiatric admissions, homelessness, unnecessary protective services and law enforcement intervention, involuntary commitments, and increased risk of premature death.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Referrals appropriately diverted to less costly resources <sup>1</sup>	182	200	190	200
Outcome	Urgent client needs addressed within five days after court appointment <sup>2</sup>	94.0%	90.0%	88.0%	90.0%

### Performance Measure - Description

<sup>1</sup>When direct service is not an option, successful diversions can be a cost-effective alternative to insure client safety.

<sup>2</sup>Urgent safety issues are addressed immediately upon court appointment. Ongoing stabilization requires subsequent intense management over months or years.

### Legal/Contractual Obligation

The decision to provide the service is in County Ordinance, Ch. 23.501. Under ORS Ch. 125, if the county chooses to reduce the service, it remains obligated to current clients, but can halt further intake if the Board of County Commissioners makes a finding that the program is no longer needed.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$892,999	\$0	\$925,439	\$0
Contracts	\$87,000	\$0	\$50,000	\$0
Materials & Supplies	\$16,706	\$0	\$19,117	\$0
Internal Services	\$125,714	\$0	\$120,083	\$0
Total GF/non-GF:	<b>\$1,122,419</b>	<b>\$0</b>	<b>\$1,114,639</b>	<b>\$0</b>
Program Total:	<b>\$1,122,419</b>		<b>\$1,114,639</b>	
Program FTE	9.90	0.00	10.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$130,000	\$0	\$90,000	\$0
Total Revenue:	<b>\$130,000</b>	<b>\$0</b>	<b>\$90,000</b>	<b>\$0</b>

### Explanation of Revenues

\$90,000 - Fees: Based on FY10 projected Revenue Y-T-D  
\$1,024,639 - County General Fund

### Significant Program Changes

Last year this program was: #25026, ADS Public Guardian/Conservator

**Lead Agency:** County Human Services

**Program Contact:** Mary Shortall

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging and Disability Services Division (ADS) is responsible for assuring the County's 200,000 seniors, persons with disabilities and veterans have access to a comprehensive and coordinated service delivery system so that they remain independent and out of institutions. Administration provides leadership, assures that results are achieved, ensures regulatory compliance, supports collaborative service delivery and use of best practices, and promotes the efficient and effective use of resources.

### Program Description

Aging and Disability Services Division (ADS) Administration provides leadership at the state and federal policy levels. It influences rules, priorities and funding formulas to promote effective services for Multnomah County seniors and people with disabilities. It is responsible for policy, planning, advocacy and staff development for the Division, which serves more than 42,000 people and employs 303 staff.

Administration is responsible for educating and informing the public about ADS services and performance, and involving advisors in program planning and decision making. It is responsible for providing leadership that strengthens workforce competencies, advances quality improvement and evidence-based practices, and ensures culturally responsive services.

Administration manages the division budget and programs to maximize revenue, hold down costs and deliver services more effectively. It provides fiscal oversight for the Division and is responsible for managing a complex budget with multiple funding sources and requirements, and maximizes resources by matching federal Medicaid funds and leveraging additional resources from the community through its partnerships. Administration coordinates efforts within the county and with other levels of government agencies to remove barriers and assure easy access to a seamless service system.

Satisfaction surveys and customer input are used to continually improve ADS services. The Division has three Advisory Councils (Elders in Action, Disability Services Advisory Council and Multi-Ethnic Action Committee) that provide specific input on how to provide the best services to seniors, persons with disabilities and ethnic minorities or persons for whom English is not their first language. ADS Administration employs innovative, evidence-based approaches to service delivery, and uses data, best practice reviews, staff experience, support from partners and other resources to serve clients effectively within available resources.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	ADS sponsored opportunities for consumer education and/or input <sup>1</sup>	82	82	92	69
Outcome	Advisors agree/strongly agree w/the statement: Overall, ADS does its job well <sup>2</sup>	82.0%	80.0%	89.0%	90.0%

### Performance Measure - Description

<sup>1</sup>Estimate for FY11 represents a minimum expectation based on standing advisory committee meetings and planned events during a non-state budget legislative year.

<sup>2</sup>Based on an annual survey of advisory group members.

**Legal/Contractual Obligation**

45 CFR Part 92; 2 CFR Part 225 OMB Circulars A-87 Federal Awards; 42 CFR 433.51 Part 4302(2) of State Medicaid manual re policy, leadership state coordination, state policy, contract compliance; ORS 410.410-410.480 re Older Americans Act (OAA) Services; OAR 411-0320-0000 to 411-032-0044 Older Americans Act specific authorizing statutes; 45 CFR 1321.1; 35CFR 1321.83.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$56,695	\$604,118	\$67,534	\$682,847
Contracts	\$62,998	\$113,915	\$252,428	\$124,869
Materials & Supplies	\$12,106	\$124,791	\$12,771	\$132,890
Internal Services	\$8,598	\$109,978	\$6,759	\$84,405
Total GF/non-GF:	<b>\$140,397</b>	<b>\$952,802</b>	<b>\$339,492</b>	<b>\$1,025,011</b>
Program Total:	<b>\$1,093,199</b>		<b>\$1,364,503</b>	
Program FTE	0.52	6.28	0.61	6.18
<b>Program Revenues</b>				
Intergovernmental	\$0	\$949,802	\$0	\$1,021,211
Other / Miscellaneous	\$0	\$3,000	\$0	\$3,800
Total Revenue:	<b>\$0</b>	<b>\$952,802</b>	<b>\$0</b>	<b>\$1,025,011</b>

**Explanation of Revenues**

\$61,045 - Older Americans Act; \$960,166 - Title XIX: All Based on FY09-11 projected State Biennial Budget  
 \$800 - Donations: Based on FY10 projected Revenue Y-T-D  
 \$3,000 - Beginning Working Capital Carryover: Based on FY10 projected carryover  
 \$184,084 - County General Fund  
 \$155,408 - County General Fund Match

**Significant Program Changes**
 **Significantly Changed**

**Last year this program was:** #25027, ADS Administration

CGF subsidy increased. FY10 Adopted Budget restored an Admin position that was added to LTC program in error; Position has been budgeted in the Admin program offer in FY11 to correct this error. Additional revenue also provides for professional services for organizational development, cultural training and ADRC development.

In FY 11 the CGF match in the program offer increased to fully utilize Medicaid matching option.

This program offer includes a 2% inflationary increase of \$ 135 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Dana Lloyd

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Elders in Action Commission serves as the federally mandated advisory council to Aging and Disability Services (ADS). Elders in Action personal advocate volunteers provide individualized help to seniors who have complex problems in their lives. These challenges include crime victimization, housing problems and other life circumstances that would be difficult or impossible for a frail person to deal with alone. Members of the Elders in Action speakers bureau present information to community groups on a variety of topics affecting seniors, ranging from health care to protecting oneself from fraud and identity theft. Elders in Action supports a network of 149 volunteers and serves 3,561 seniors through its Personal Advocate program.

### Program Description

Elders in Action (EIA) advises local government on issues, programs, and policy that impact seniors in Multnomah County. EIA Commission members provide input and advocacy to ADS, Multnomah County Board of County Commissioners, the Portland City Council, and others on a wide range of issues that impact seniors, including housing, transportation, elder abuse and crime, healthcare and other important services. Commission members advocate at the state level for senior programs. Trained senior volunteers evaluate county-operated facilities to make sure they are accessible for seniors and persons with disabilities. They also evaluate the customer service provided by county staff and lend technical assistance to county managers on how to make their programs accessible and friendly to seniors. Using service results of local and national studies and the tools of the nationally recognized Elder Friendly® Certification program, EIA ensures that services and businesses in Multnomah County are appropriate and assessable to serve the rapidly increasing population of seniors.

EIA Personal Advocate Volunteers work one-on-one to solve problems and support seniors who are facing difficult circumstances, including crime victimization, housing problems and other life challenges. They operate a peer support program where volunteers provide assistance with problem-solving that would be especially difficult for a senior to face alone.

Members of the EIA Speakers Bureau present information to community groups on a variety of topics affecting seniors, ranging from health care to protection from fraud and identity theft.

EIA advocates on behalf of 92,000 local seniors including the 85+ age group, which is the fastest growing segment of Multnomah County's population. Last year, about 150 EIA volunteers provided more than 9,000 service hours as advisors to local government, personal advocates for at-risk seniors and as community educators.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Hours of service provided by volunteers	9,341	10,500	9,800	9,800
Outcome	Value of volunteer hours (\$)¹	167,203	181,965	175,420	175,420

### Performance Measure - Description

¹ The hourly rate calculation is drawn from Independent Sector, a national organization for volunteerism; the \$17.90 hourly rate used here is tailored specifically for the state of Oregon for 2008 (the most recent available rate).

### Legal/Contractual Obligation

Multnomah County/City of Portland Inter Governmental Agreement and Multnomah County Ordinance 171424 designating Elders in Action as the official advisory agency on aging issues for Multnomah County and the City of Portland and outlines ongoing financial commitment to support a county/city Commission on Aging.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$158,000	\$0	\$161,160	\$0
Total GF/non-GF:	<b>\$158,000</b>	<b>\$0</b>	<b>\$161,160</b>	<b>\$0</b>
Program Total:	<b>\$158,000</b>		<b>\$161,160</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

### Explanation of Revenues

\$161,160 - County General Fund

### Significant Program Changes

**Last year this program was:** #25030, Elders in Action Personal Advocacy and Commission Activities

This program offer includes a 2% inflationary increase of \$ 3,160 over FY10 for the County General Fund portion of contracted client services.

### Division Overview

The Multnomah County Domestic Violence Coordinator's Office provides leadership, consultation and technical assistance in the development of effective, state-of-the-art responses to domestic violence in Multnomah County. The office administers county, state and federal funds for domestic violence victim services, facilitates the development and implementation of collaborative projects and assists in the procurement of resources for those projects.

Domestic violence remains a significant problem in Multnomah County: 1/4-1/3 of homicides and 40-50% of reported violent crimes are due to domestic violence. It impacts the clients and users of all county services and its employees. Prevention and intervention of domestic violence requires a multi-faceted, multi-disciplinary and multi-jurisdiction approach.

Victim services funded by the County assisted over 5,000 victims in person and another 30,000 by phone. In addition, the Office provided training and/or consultation to over 2,000 individuals on a range of topics related to domestic violence: lethality/danger assessment, strangulation, traumatic brain injury, cultural competency and anti-oppression responses, motivational interviewing, housing, trauma, stalking and other topics.

The Office coordinated or facilitated several multi-agency, collaborative projects: Domestic Violence Enhanced Response Team (DVERT), Safe Start Child Welfare-Victim Advocacy partnership, SHARE project evaluation of a housing first model for domestic violence victims, Family Strengths financial assistance grant, and other projects.

#### **Domestic Violence Victims Services and Coordination**

- 25040A Victims Services & Coordination
- 25040B Enhanced Response Team
- 25040C Safe Start Collaboration

### Significant Changes

The following describes the significant budget changes that impacted the division. More information can be found in the program offers.

Three of the County's federal grants for domestic violence services are scheduled to end in FY 2011. General Fund dollars will replace these federal grants to support services found in Program Offers 25040A, 25040B and 25040C. These expiring grants funded services to coordinate prosecutions of perpetrators of domestic violence and to protect the children of domestic violence victims, as well as administrative and coordinating staff in the Domestic Violence Division.

### Measuring Success

The Office measures success of the contracted services to victims and their children based on the number as well as the increased safety and living stability of the families served.

1. The Office supported community partners in providing a range of emergency and housing services to victims and their children. Crisis response received more than 24,600 calls. Safe emergency shelter and motel vouchers were provided to more than 650 women and children. Culturally specific services were provided to 800 women and children. In all, more than 5,000 victims and their children received in person victim advocacy services.

2. Community based services supported by the Office resulted in increased safety and stability for women and their children. Domestic Violence Enhanced Response Team reduced recidivism of high risk offenders by 30% and increased victims' safety. Sixty-eight percent of victims provided with transitional housing or rent assistance were in stable housing six months after the end of services.

In addition, every two years, the office together with the Family Violence Coordinating Council assesses the accomplishments of the Council and its member agencies in developing collaborative, coordinated or successful interventions.



### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog. #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25040A	DV Services. & Coordination	\$1,856,314	\$1,312,415	\$3,168,729	5.92
25040B	DV Enhanced Response Team	139,036	0	139,036	0.50
25040C	DV Safe Start Collaboration	163,024	0	163,024	0.00
<b>Total</b>		<b>\$2,158,374</b>	<b>\$1,312,415</b>	<b>\$3,470,789</b>	<b>6.42</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Backfill State/Federal/Grant

### Executive Summary

Domestic Violence (DV) Victim Services & Coordination provides in-person services for 5,100 victims and children, management of grant-funded projects and coordination of multi-jurisdiction government and community responses. Research shows that these services reduce re-assault of victims, reduce the number of reported violent crimes and improve outcomes for victims and children.

### Program Description

The county expends at least \$10 million in criminal justice costs (jail, prosecution and probation supervision) annually, and DV costs the community another \$10 million in lost wages, health care and other costs. Research shows that these services increase employment, income, quality of life, decreases the level of danger and of assault, PTSD, depression, alcohol & drug abuse and improves the health of victims and their children.

Services funded in this offer include: Centralized access and crisis response; safe emergency shelter and supportive services (195 victims and 200 children + 400 victims and 300 children through short term rent assistance and vouchers); civil legal advocacy insuring safety after separation (2,730 victims); mobile advocacy and rent assistance with supportive services (305 victims and 135 children); and culturally specific services for Latinas, Russians, African Americans, Native Americans, immigrants/refugees and sexual minorities (350 victims and 435 children). Evidence-based practices include emergency shelters, shown to reduce the incidence of re-assault by 50%, and civil legal services, shown to reduce homicides.

This offer provides professional staffing for coordination efforts, such as the Family Violence Coordinating Council to provide a forum for collaborative efforts including training, policy and program development and implementation, and system-wide problem solving. The 40 organizations that are members represent the criminal justice system, victim services, health care, batterers intervention and others. In addition, staff provide training for and/or coordinate multiple multi-disciplinary efforts, including Domestic Violence Enhanced Response Team (DVERT) and Safe Start and participate in the county DV Fatality Review Process meetings and provide a minimal and insufficient level of staffing for that team.

This program offer is based on four major agreements, policies or plans: 1) 1997 Portland-Multnomah county agreement that the County would take over full responsibility for "for planning, funding, and tracking performance of shelter and services for victims of domestic violence;" 2) 2000 LPSCC evaluation of the criminal justice system which recommended development of a more intensive response to high risk DV cases; 3) Victim services system plan, adopted by the Board in 2002; and 4) county Resolution 00-149 (Domestic Violence Policy), which directs the County to "develop effective and integrated responses to domestic violence."

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of clients and their children served in person <sup>1</sup>	5,450	5,100	5,050	5,100
Outcome	% in stable housing six months after close of services <sup>2</sup>	83.0%	70.0%	75.0%	70.0%

### Performance Measure - Description

<sup>1</sup> Number of clients includes only those receiving face-to-face services (not crisis line services)

<sup>2</sup> % in stable housing includes only those clients in the transitional housing or rent assistance programs.

Note: These numbers are estimates, we are currently making a major restructuring of our HMIS database and only have capacity to assign .5 FTE to all data functions in our division.

## Legal/Contractual Obligation

CGF primarily funds Multnomah County RPF #P06-8706 Domestic Violence Programmatic Services. Grant funded services must meet all government-required goals, outcomes, and reporting requirements. These include the federally funded projects of DVERT, Safe Start, transitional housing/economic empowerment, and HUD Horizon. HUD funding requires a \$51,240 cash match and specific database specifications, included in this offer.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$209,461	\$411,172	\$402,214	\$180,088
Contracts	\$1,195,837	\$806,128	\$1,232,583	\$630,861
Materials & Supplies	\$140,787	\$375,647	\$141,891	\$470,827
Internal Services	\$116,384	\$63,926	\$79,626	\$30,639
Total GF/non-GF:	<b>\$1,662,469</b>	<b>\$1,656,873</b>	<b>\$1,856,314</b>	<b>\$1,312,415</b>
Program Total:	<b>\$3,319,342</b>		<b>\$3,168,729</b>	
Program FTE	2.24	5.03	4.12	1.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$22,593	\$0	\$16,401	\$0
Fees, Permits & Charges	\$0	\$1,000	\$0	\$1,140
Intergovernmental	\$0	\$1,639,428	\$0	\$1,310,400
Other / Miscellaneous	\$0	\$16,445	\$0	\$875
<b>Total Revenue:</b>	<b>\$22,593</b>	<b>\$1,656,873</b>	<b>\$16,401</b>	<b>\$1,312,415</b>

## Explanation of Revenues

\$462,083 - HUD Horizons Grant: Based on continuation of FY10 funding level  
 \$226,355 - Oregon Housing and Community Services SHAP Grant: Based on continuation of FY10 funding  
 \$50,000 - City of Portland GF – Based on continuation of FY10 funding  
 \$875 - United Way – Based on continuation of FY 10 funding  
 \$51,979 - Department of Justice Safe Start; \$162,690 - OVW-DVERT; \$89,890 - OVW Transitional Housing; \$239,207 - OVW-ARRA; All based on estimated FY10 carryover funds.  
 \$28,196 - Housing Battered Women: Based on estimated carryover funds  
 \$1,140 – Domestic Partnership Fees: Based on FY10 current registration level  
 \$51,480 - County General Fund Match and \$1,804,834 – County General Fund

## Significant Program Changes

**Last year this program was:** #25040, Domestic Violence Victims Services and Coordination  
 Loss of Grant funding reduced 0.5 FTE for DVERT Coordinator funding and 0.8 FTE Research Analyst 2 impacting the program's capacity to provide coordinated victim advocacy/criminal justice services to approximately 50 DV victims and will decrease capacity to analyze and report information based on 4 years of collected data. Due to the expiration of additional grants, other staffing was able to be retained by allocating additional CGF within the department's constraint to this program offer.

This offer also includes funding for a DV Training Specialist for DCHS that was originally funded in 2008 with state funds in program offer 25010 (DD Administration and Support)

This program offer includes a 2% inflationary increase of \$ 22,128 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:** 60076A, 25040A

**Program Characteristics:** Backfill State/Federal/Grant

### Executive Summary

This offer provides funding for half year of program costs for a coordinator and victim advocates for the Domestic Violence Enhanced Response Team (DVERT). Federal grant funding for the project ends 12/31/10. DVERT provides a multi-disciplinary, intensive, collaborative response to cases with a high risk of on-going abuse, stalking or of potentially lethal outcome. DVERT has been shown to prevent recidivism and it reduces likelihood of homicide.

### Program Description

This offer provides backfill for DVERT project. The current federal grant ends 12/31/10, and this offer provides coordination and three contracted victim advocates.

DVERT services have saved lives and are even more needed: since January 1, 2010, five women have been killed and one man has committed suicide in DV-related incidents.

The DVERT model incorporates identification of high risk/high lethality domestic violence and stalking cases using standardized evidence-based screening tools (Danger Assessment and recidivism), with subsequent intensive, multi-disciplinary response by DVERT partners. DVERT partners meet bi-weekly to review new potential DVERT cases and the status of on-going cases. DVERT partners coordinate their responses to assure that the needs of the victims are met, the offenders don't "fall through the cracks," and that specific assigned tasks are accomplished. At each meeting, DVERT partners are informed of the status of elements of the case (investigation, prosecution, etc.), and an "action plan" is developed with expectations of each DVERT partner clearly defined.

The DVERT partners include: Multnomah County Domestic Violence Coordinator's Office (DVCO) and Sheriff's Office, the Portland Police Bureau (PPB), and the community-based victim advocacy agencies, Raphael House and Volunteers of America. In addition, Child Welfare, Self-Sufficiency (public assistance), District Attorney, and Community Justice (probation/parole) will continue to provide staff to DVERT who are not funded by the federal grant.

Research by Portland State University has found that offenders who are part of the DVERT project are 1/3 less likely to recidivate for any crime and for DV crimes. In addition, routine victim/client feedback has found that 87% of victims report DVERT was helpful in increasing their personal safety and the safety of their children/families.

DVERT addresses recommendations in a 2000 LPSCC evaluation of the criminal justice system which recommended development of a more intensive response to high risk DV cases; in the 2002 victim services system plan, adopted by the Board, which recommends co-location of advocacy services in agencies utilized by victims (police); and 4) County Resolution 00-149 (Domestic Violence Policy), which directs the county to "develop effective and integrated responses to domestic violence."

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of high risk/high lethality cases DVERT	0	0	0	85
Outcome	% of victims that report increased safety due to DVERT	0.0%	0.0%	0.0%	87.0%

### Performance Measure - Description

We expect an increase in victims served in FY11, as we will be changing the model slightly to allow victim advocates to provide more services to victims who do not choose to engage in a coordinated victim services/criminal justice response.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Personnel	\$0	\$0	\$49,471	\$0
Contracts	\$0	\$0	\$82,215	\$0
Materials & Supplies	\$0	\$0	\$7,350	\$0
Total GF/non-GF:	\$0	\$0	\$139,036	\$0
Program Total:	\$0		\$139,036	
Program FTE	0.00	0.50	0.50	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$139,036 - County General Fund Subsidy

Significant Program Changes

Last year this program was: #25040, Domestic Violence Victims Services and Coordination

**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:** 25040A

**Program Characteristics:** Backfill State/Federal/Grant

### Executive Summary

This program offer will fund continuation of the Safe Start Program, which provides collaborative domestic violence (DV) victim services to families involved with Child Welfare. Two contracted victim advocates and one contracted parent-child specialist provide ongoing consultation to Gresham Child Welfare staff and direct services to 100 families each year. The program reduces foster care placement.

### Program Description

The Safe Start Project's goal is to address the co-occurrence of domestic violence and child maltreatment, and reduce the harmful effects of domestic violence on children. Research has shown there is a significant overlap between domestic violence and child maltreatment, with 40-60% of families experiencing domestic violence also experiencing child maltreatment. In Oregon, domestic violence is the second most common reason for referral to Child Welfare and a known risk factor in 1/3 of founded child maltreatment cases. For children, the combined impact of child maltreatment and exposure to domestic violence is greater than the impact of either one alone. These impacts include direct and indirect injuries, as well as physical, mental health, cognitive, developmental, behavioral and academic problems caused by trauma and exposure to violence.

- 15% of all Oregon children lived in homes where DV occurred in the previous year;
- children witness 1/3 of Oregon homicides and were killed in 8% of these incidents.
- Half of all domestic violence victims with children will have contact with child protective services during the abusive relationship.

The Safe Start Program addresses this high-risk population by providing collaborative domestic violence services in the Gresham Child Welfare (CW) Office. Two DV victim advocates (including a bilingual, bi-cultural advocate) and a masters-level parent-child specialist provide direct services to victims as well as provide general and case-specific consultation on domestic violence to Child Welfare staff. Advocates' services include crisis intervention, safety planning and ongoing assistance with basic needs, restraining orders and criminal justice interventions, support groups and other services. This grant will end 9/30/10.

Child welfare staff in Gresham report that fewer children are placed in foster homes, that they are able to close cases involving DV more quickly, and that they have greater competence and skills in working with victims of DV. In addition, in 2009, the Gresham office had the lowest percentage of children in foster care of any of the Multnomah County child welfare branches.

This offer responds to the 2000 LPSCC evaluation of the criminal justice system which recommended development of a more intensive response to high risk DV cases; the victim services system plan, adopted by the Board; and County Resolution 00-149 DV), which directs the county to "develop effective and integrated responses to domestic violence."

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total families served <sup>1</sup>	0	0	0	100
Outcome	Victims will report increased safety <sup>2</sup>	0.0%	0.0%	0.0%	75.0%

### Performance Measure - Description

<sup>1</sup> Families will receive ongoing advocacy or parent-child services.

<sup>2</sup> Victims receiving direct services will report increased safety (or feeling that the services helped them, or feeling that services helped with their child welfare case)

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$0	\$0	\$149,524	\$0
Materials & Supplies	\$0	\$0	\$13,500	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$163,024</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$163,024</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

Funded with \$163,024 of one-time-only general funds.

**Significant Program Changes**

**Last year this program was:** #25040, Domestic Violence Victims Services and Coordination

The current Department of Justice Safe Start grant included in base program offer 25040A – Domestic Violence Victims Services & Coordination expires in September 2010 and is not renewable.



### Division Overview

It is the mission of the Mental Health and Addiction Services Division (MHASD) to maintain high quality, accessible and culturally competent systems of care for children, youth and adults in Multnomah County with a mental illness or addiction.

#### Strategic Goals:

1. Increase opportunities for consumer and family involvement in treatment planning and delivery.
2. Make system improvements to meet the clinical needs of consumers and families with effective and evidence-based treatment.
3. Increase the availability of behavioral health care that is integrated with physical health in the provider network.
4. Maintain a financially stable system that includes checks and balances to ensure stewardship and accountability.

MHASD has built a behavioral health system of care that all of our citizens can access whether they are uninsured or are one more than 74,000 people enrolled in Verity, the county's mental health organization for Oregon Health Plan members. Our crisis services are available to any community member in need of assistance. The mental health call center receives more than 50,000 calls a year.

#### Successes:

- Adults in Bridgeview transitional housing program moved into the newly constructed James Hawthorne Apartments in March 2010.
- MHASD co-sponsored a conference on problem gambling in the Asian community. More than 500 problem gamblers from all backgrounds get treatment services annually through county providers.
- MHASD implemented 2 improvement projects: the pilot of a web-based tool that measures client treatment outcomes and a 'pay for performance' program to reward providers that achieve client care goals.

#### Mental Health Administration

- 25050 Administration
- 25066 Organization Provider Tax (Verity)

#### Mental Health Support

- 25052 Medical Records
- 25053 Quality Mgmt & Protective Svcs
- 25054 Business Operations

#### Crisis Services

- 25055 Behavioral Health Crisis Services

#### Addictions

- 25080 Adult Addictions Treatment Continuum
- 25085 Gambling Prevention and Treatment
- 25086 Alcohol and Drug Prevention
- 25090A Detox/Post-Detox Supportive Housing
- 25091A Sobering
- 25091B Sobering - Scale Up
- 25094A Family & Youth Addictions Treatment
- 25098 Family Involvement Team

#### Mental Health Safety Net

- 25058 Commitment Services
- 25060 Residential Services
- 25088 Diversion for Persons with Mental Illness

#### Mental Health Adult System of Care

- 25062 Mental Health Services Adults
- 25063A Treatment/Medication for Uninsured Indigent Adults
- 25064 Early Assessment and Support Alliance
- 25078 Culturally Specific Mental Health
- 25056B Crisis Assessment and Treatment Center - Operation

#### Mental Health System of Care for Children and Families

- 25057 Inpatient, Sub-acute & Residential Svcs for Children
- 25067 Community Based Services for Children & Families
- 25068 Family Care Coordination Team
- 25070 Bienestar Mental Health
- 25075 School Based Mental Health
- 25096 Sexual Offense and Abuse Prevention

### Significant Changes

The following describes the significant budget changes that impacted the division. More information can be found in the program offers.

MHASD has been making system changes to respond to state initiatives that impact the delivery of care to county residents. Wraparound Oregon, Healthy Kids and Standard OHP enrollment, State Hospital changes and health care integration have all had an influence on how we provide services.

The state's Healthy Kids Initiative is providing Oregon Health Plan coverage to an increasing number of children. As a result, addiction prevention and treatment is now paid for by the child's physical health plan, and county and state general fund previously used to pay for these services can be redirected to other needs.

Multnomah Treatment Fund (MTF), the County's General Fund program for uninsured people who are severely ill, has been reduced due to general fund constraint (25063A-B). The Benefits Recovery Project (25115) will help many of these adults access federal benefits. Until they do so, MTF allows them to remain in treatment and out of crisis services.

### Measuring Success

MHASD offers a wide scope and variety of services, and the performance measures also vary. The overall success of the entire system of care is measured by whether our services meet the prevention, treatment and recovery needs of our community. We use individual program outcomes to measure overall success.

For mandated services such as Quality Management (25053) or Commitment Services (25058) we measure our compliance with the Oregon Revised Statute. For Crisis Services (25055), we measure how well the programs keep the person safe, in the community and out of the hospital. In FY 2009, 97% of individuals seen at our Urgent Walk-in Clinic did not need to be seen at the emergency room. Our coordinated jail diversion programs (25088) measure success by the number of individuals in the program diverted from jail to treatment; in FY 2009 it was 56.8%. Keeping children engaged in school is an important measure of success for our mental health and addiction prevention programs. In FY 2009, 81% of children served in mental health programs (25067) and 95% of children in addiction prevention (25086) activities remained in school.

Through these and other measures MHASD ensures we are meeting the behavioral health needs of our community.

# County Human Services

## Mental Health and Addiction Services

fy2011 adopted budget

### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25050	MHASD Admin	\$166,263	\$806,983	\$973,246	7.50
25052	Medical Records for MHASD	695,616	0	695,616	8.00
25053	Mental Health Quality Management and Protective Services	522,875	1,170,049	1,692,924	14.00
25054	Business & Finance	369,848	1,184,753	1,554,601	7.00
25055	Behavioral Health Crisis Services	1,073,345	5,824,526	6,897,871	23.56
25056B	Crisis Assessment and Treatment Center - Operations	200,000	175,000	375,000	0.00
25057	Inpatient, Sub-acute and Residential Mental Health Services for Children	0	2,847,600	2,847,600	0.00
25058	Mental Health Commitment Services	1,098,489	4,577,090	5,675,579	29.30
25060	Mental Health Residential Services	1,113,979	7,837,487	8,951,466	8.00
25062	Mental Health Services for Adults	0	21,526,586	21,526,586	2.00
25063A	Mental Health Treatment and Medications for the Uninsured	1,177,976	260,000	1,437,976	0.00
25064	Early Assessment and Support Alliance	0	1,048,280	1,048,280	7.20
25066	Mental Health Org. Provider Tax	0	428,121	428,121	0.00
25067	Community Based MH Services for Children and Families	1,456,486	12,877,348	14,333,834	18.25
25068	Family Care Coordinators	0	1,067,423	1,067,423	8.50
25070	Bienestar Mental Health and Addiction Services	319,547	0	319,547	2.80

# County Human Services

## Mental Health and Addiction Services

fy2011 adopted budget

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25075	School Based Mental Health Services	531,914	983,440	1,515,354	13.24
25078	Culturally Specific Mental Health Services	1,292,239	0	1,292,239	0.00
25080	Adult Addictions Treatment Continuum	3,026,170	8,469,346	11,495,516	6.70
25085	Addiction Services Gambling Treatment and Prevention	0	816,001	816,001	0.30
25086	Addiction Services Alcohol and Drug Prevention	0	194,259	194,259	0.00
25088	Coordinated Diversion for Persons with Mental Illness	231,576	655,016	886,592	7.00
25090A	Detoxification and Post-Detoxification Housing	1,037,166	1,878,359	2,915,525	0.00
25091A	Sobering	477,722	0	477,722	0.00
25091B	Sobering Scale-up	150,000	0	150,000	0.00
25094A	Family and Youth Addictions Treatment Continuum	272,941	863,552	1,136,493	0.00
25096	Sexual Offense and Abuse Prevention	200,000	0	200,000	0.00
25098	Enhanced Family Involvement Team	0	1,724,171	1,724,171	0.00
<b>Total</b>		<b>\$15,414,152</b>	<b>\$77,215,390</b>	<b>\$92,629,542</b>	<b>163.35</b>

**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Administration

**Related Programs:** 25052, 25053, 25054

**Program Characteristics:**

**Executive Summary**

The Mental Health and Addiction Services Division (MHASD) Administration is responsible for bringing the community together to build and maintain the public behavioral health system in Multnomah County. MHASD manages the mental health and addictions systems of care, and is accountable for the services it provides directly, as well as those delivered through its provider network. In total, these programs serve more than 28,000 children, families and adults annually.

**Program Description**

MHASD Administration provides oversight and management of all behavioral health programs in the Mental Health and Addiction Services Division, whether provided directly or through contracted agencies.

MHASD is composed of two service systems:

1) Verity, the Mental Health Organization (MHO) a federally funded insurance program for children, youth and adults enrolled in Oregon Health Plan.

2) The Community Mental Health Program (CMHP) provides services that include involuntary commitment and addiction treatment.

MHASD includes mental health and addiction systems of care for children and adults. The administration continuously assesses its continuum of services to respond to the changing needs and demographics of Multnomah County. Administration ensures that consumers, advocates, providers and stakeholders have a voice in implementing necessary changes and system enhancements. MHASD does this through frequent provider and advisory meetings. This offer includes a consumer advocate staff position to increase consumer perspective in decision making.

MHASD administration manages its resources in a cost-effective manner. Business and clinical decisions ensure that finite resources are targeted to serve the most vulnerable populations. MHASD administration is responsible for planning at the state level to influence policy decisions affecting the long-term sustainability of its services. MHASD administration ensures that its staff has the tools necessary to provide high quality, culturally competent services.

Administration ensures that contracted providers implement effective evidence-based practices. MHASD continually examines its provider system to identify gaps or barriers to service. MHASD administration is also responsible for monitoring contracts and adjusting the behavioral health system to accommodate changes in funding or regulatory requirements.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total Adult/Child MHASD Advisory Meetings	20	20	20	20
Outcome	Advisors agree with the statement: Overall, MHASD does its job well <sup>1</sup>	0.0%	0.0%	82.0%	0.0%

**Performance Measure - Description**

<sup>1</sup> This survey will be conducted every 2 years and will be repeated in FY2013.

**Legal/Contractual Obligation**

Oregon Administrative Rule, Standards for Management of Community Mental Health and Developmental Disability Programs, 309-014-0020, 309-014-0035, 309-14-0040.

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$523,187	\$277,641	\$166,263	\$666,823
Contracts	\$0	\$17,407	\$0	\$52,550
Materials & Supplies	-\$9,766	\$35,222	\$0	\$16,097
Internal Services	-\$102,544	\$151,306	\$0	\$71,513
Total GF/non-GF:	<b>\$410,877</b>	<b>\$481,576</b>	<b>\$166,263</b>	<b>\$806,983</b>
Program Total:	<b>\$892,453</b>		<b>\$973,246</b>	
Program FTE	1.38	3.12	0.75	6.75
<b>Program Revenues</b>				
Intergovernmental	\$0	\$386,187	\$0	\$806,983
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$386,187</b>	<b>\$0</b>	<b>\$806,983</b>

**Explanation of Revenues**

\$577,700 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$229,283 - State Mental Health Grant Local Admin: Based on FY09-11 projected State Biennial Budget

\$166,263 - County General Fund

**Significant Program Changes**

✓ **Significantly Changed**

**Last year this program was:** #25050A, MHASD Administration

Staffing changes between FY10 and FY11:

1.0 FTE new Consumer Advocate position funded to act as an impartial, confidential advocate to listen and act upon concerns from individuals receiving treatment from Multnomah County contracted providers. The Consumer Advocate will provide informal assistance and facilitate dispute resolution for consumers. Serving as a neutral party, the person in this position will ensure fairness in the administration of MHASD policies and procedures and assist in incorporating consumer perspective into the continuum of care. 1.0 FTE new Admin Analyst funded to provide administrative support.

Although the FTE history for FY10 above has been adjusted for this change, in FY11 this program offer reflects the transfer of 14 positions previously budgeted as division administration into specific program offers for which they are directly responsible. By making this change, the MHASD program offers more accurately reflect overall Division management costs and specific program costs. The change also allowed the Division to fund some of these positions with more appropriate program funds, allowing for \$400,000 of County General Fund to be reallocated to new programs that support and enhance the overall mental health system.

**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Medical Records Program is responsible for the internal management of all of the Mental Health and Addiction Services Division's clinical records, including more than 62,000 adult and children's mental health and alcohol and drug client records, and Verity MHO records required by Oregon Administrative Rules.

### Program Description

Mental Health and Addiction Services Division (MHASD) Medical Records ensures that mental health, alcohol and drug, and Verity managed care records are maintained in accordance with federal and state laws and regulations, and county and departmental rules, policies, and procedures.

Program staff provide multiple client records services including: access, inventory, retrieval, billing and administrative rule compliance auditing, archiving, forms design and management, authorization/release of records, legal requests for records, data analysis, and technical assistance to community agencies and county staff. In FY11, anticipated volume is more than 11,700 records requests, archiving 13,000 records and more than 500 records requests from providers for treatment purposes.

As the Local Mental Health Authority, MHASD is responsible for programs such as involuntary commitment, commitment monitors, trial visits and residential services. In FY11, these programs will require the creation of approximately 5,000 individual records. The MHASD programs where services are provided by county staff are expected to serve more than 900 individuals, each requiring a medical record. The medical records unit is responsible for these.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Count of clinical and managed care record items processed annually <sup>1</sup>	29,400	30,550	26,552	27,175
Outcome	Total MHASD medical records reviewed for completeness <sup>2</sup>	7,066	7,200	5,243	5,563

### Performance Measure - Description

<sup>1</sup> Count of elements of client records processed in following programs: Involuntary Commitment Investigators, Commitment Monitors and Trial Visit, School-based and Early Childhood/Cares, Family Care Coordinators, Early Assessment and Support Alliance, 370 Project, Intensive Transition Project, Verity Authorizations and Residential Records. Minimum of two elements each record plus all in house Verity authorizations.

<sup>2</sup> Count of number of new client records opened annually and reviewed by records staff for completeness. Includes new records in the following programs: Involuntary Commitment Investigators, Commitment Monitors and Trial Visit, School based and Early Childhood/Cares, Family Care Coordinators, Alcohol and Drug, and Residential Records. The Next Year Offer is reduced because the DUII program has closed and so no new records will be created, analyzed or monitored for completeness.

## Legal/Contractual Obligation

The following guidelines are utilized in monitoring MHASD compliance to Federal, State and County rules and audits regarding client confidentiality of clinical records, the release of any confidential client information, the retention of client confidential information, responding to subpoenas and court orders for confidential client records and standards for clinical documentation:

State of Oregon Mental Health & Developmental Disability Services Division "Handbook of Confidentiality", HIPAA, DSM IV "Diagnostics & Statistical Manual of Mental Disorders", Children's & Adult State of Oregon Administrative Rules, Oregon Revised Statutes related to medical records & client confidentiality, State Archiving rules, Code of Federal Regulations Title 42 Public Health, Chapter 1 Part 2, Public Law 94-142, Public Law 99-57, State of Oregon Mandatory Child Abuse Reporting Laws, Oregon Health Plan, Mental Health Organization Contract, Verity Policies & Procedures, Practice Guidelines for the Oregon Health Information Management Association and the American Health Information Management Association, and the American Health Information Management Association, and Centers for Medicare and Medicaid billing regulations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$522,373	\$0	\$578,544	\$0
Materials & Supplies	\$20,737	\$0	\$15,128	\$0
Internal Services	\$129,826	\$0	\$101,944	\$0
Total GF/non-GF:	<b>\$672,936</b>	<b>\$0</b>	<b>\$695,616</b>	<b>\$0</b>
Program Total:	<b>\$672,936</b>		<b>\$695,616</b>	
Program FTE	8.00	0.00	8.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

\$695,616 - County General Fund

## Significant Program Changes

✓ Significantly Changed

**Last year this program was:** #25052, Medical Records for Mental Health & Addiction Services

The DUII program closed in December 2008 (Fiscal Year 2009). As a result, during the first six months of 2009, nearly 10,000 records were analyzed for compliance with court requirements (Diversion or Conviction), coordinated for release to new agency, and/or archived.



**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Support

**Related Programs:** 25050, 25052

**Program Characteristics:**

### Executive Summary

Quality Management works to assure quality of contracted providers through mental health agency audits and monitoring mental health contract performance. Program serves 74,000 Verity Oregon Health Plan (OHP) members, 52 mental health agencies and 61 residential/foster facilities. Quality Management educates OHP members about available mental health services and ensures effectiveness of services by measuring treatment outcomes, client satisfaction and hospital use.

### Program Description

Quality Management protects and supports mentally ill adults and children in Multnomah County by providing specific services including: coordinating compliance with Health Insurance Portability and Accountability Act (HIPAA) rules and Verity contracts, building client outcome measurements, supervising certification process for community mental health agencies, auditing and providing technical support to 52 mental health agencies, coordinating residential quality and tracking approximately 4000 reportable residential adverse events annually, assisting with licensing visits and Oregon Administrative Rules (OARs) compliance for 56 State-funded residential treatment homes and facilities, investigating complaints about residential care, monitoring progress of providers found out of compliance with OARs, and investigating abuse allegations and providing protective services to approximately 200 adult mental health clients annually. These investigations serve to protect some of the most vulnerable individuals in our mental health system.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total clinical reviews/protective service invest./incident reports reviewed <sup>1</sup>	0	0	6,578	6,600
Outcome	Percent of certification reviews conducted within 3 year maximum OAR mandate.	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> Total clinical reviews including residential critical incidents + total protective service investigations + total treatment records reviewed for mental health agency certification or Verity MHO compliance. This is a combination of 2 FY08-09 purchased outputs (there was not a current year purchased for this output).

## Legal/Contractual Obligation

Oregon Administrative Rules (OARS) including but not limited to:

Chapter 415 Department of Human Services Addiction services; and Chapter 309 Department of Human Services Mental Health Developmental Disabilities Services, Federal & State Medicaid requirements and Oregon Health Plan Mental Health Organization Agreement. ORS 430.735-765 Abuse Reporting and Investigation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$450,510	\$914,745	\$491,401	\$900,326
Contracts	\$0	\$75,000	\$0	\$75,000
Materials & Supplies	\$11,007	\$11,843	\$31,474	\$0
Internal Services	\$181,756	\$39,206	\$0	\$194,723
Total GF/non-GF:	<b>\$643,273</b>	<b>\$1,040,794</b>	<b>\$522,875</b>	<b>\$1,170,049</b>
Program Total:	<b>\$1,684,067</b>		<b>\$1,692,924</b>	
Program FTE	4.69	9.31	5.20	8.80
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,040,794	\$0	\$1,170,049
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,040,794</b>	<b>\$0</b>	<b>\$1,170,049</b>

## Explanation of Revenues

\$859,599 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$101,922 - State Mental Health Grant Local Admin; \$208,528 - State Mental Health Grant Non Residential Adult: All Based on FY09-11 projected State Biennial Budget

\$522,875 - County General Fund

## Significant Program Changes

Last year this program was: #25053A, MH Quality Management & Protective Services

**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Business and Finance manages revenue and expenses for the Mental Health and Addiction Service Division's (MHASD) \$95 million budget. It controls the county's financial risk for over \$40 million in Medicaid funds through rate setting, claims adjudication and supervision of a third party administrator (TPA). Business and Finance supports MHASD in serving approximately 28,000 unduplicated individuals annually. It analyzes claim, authorization and enrollment data to forecast future claims expenses.

### Program Description

MHASD's Business and Finance supports the systems of care for some of Multnomah County's most vulnerable populations, including those who are indigent and in need of mental health and addiction treatment. Staff support both the child and adult systems of care. Business and Finance manages the complex financial transactions required to deliver services in the county's Mental Health Organization (MHO), Verity. Verity is a federal insurance program funded by Medicaid and is a risk bearing entity. If expenditures exceed revenue, the county must make up the difference. It is the job of Business and Finance to ensure this does not happen.

Business and Finance produces financial and service utilization reports, interfaces with a third party administrator (TPA) to process Medicaid claims, and tracks funding from the state. It develops new procedures to respond to changes in federal and state funding. Business and Finance staff respond to financial inquiries from agencies, hospitals, elected officials, and the public. Business and Finance provides decision support and day to day information to the MHASD director and management team through timely financial projections to accompany pending business and fiscal decisions. MHASD Business and Finance staff work closely with DCHS Business Services and Central County Finance in all aspects of budget and finance.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Keep MHASD programs within authorized appropriations <sup>1</sup>	100.0%	100.0%	100.0%	100.0%
Outcome	Exceptions noted by independent auditor annually <sup>1</sup>	0	0	0	0
Output	Number of technical assistance contacts provided annually to providers	0	0	5,250	5,250
Outcome	Number of meetings held to consult with provider claim processing staff	0	0	12	12

### Performance Measure - Description

<sup>1</sup> These measures are being discontinued because they give little real information about the performance of the unit.

## Legal/Contractual Obligation

Oregon Administrative Rule, Community Mental Health Program General Administrative Standards, 309-014-0000 to 309-014-0040; Oregon Health Plan Oregon Administrative Rule 410-141-0000 to 410-141-0860.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$205,679	\$316,115	\$226,036	\$369,290
Contracts	\$16,331	\$600,000	\$60,600	\$768,507
Materials & Supplies	\$9,514	\$2,549	\$0	\$15,128
Internal Services	-\$9,541	\$67,153	\$83,212	\$31,828
Total GF/non-GF:	<b>\$221,983</b>	<b>\$985,817</b>	<b>\$369,848</b>	<b>\$1,184,753</b>
Program Total:	<b>\$1,207,800</b>		<b>\$1,554,601</b>	
Program FTE	1.93	4.07	3.00	4.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$985,817	\$0	\$1,184,753
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$985,817</b>	<b>\$0</b>	<b>\$1,184,753</b>

## Explanation of Revenues

\$1,184,753 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$369,848 - County General Fund

## Significant Program Changes

**Last year this program was:** #25054, MHASD Business and Finance  
FY11 increase 1.0 FTE Data Technician to provide program support.

FY10 added 1.0 FTE Data Analyst position via a budget modification. Transferred the supervision of three finance positions (1.0 FTE Finance Specialist 1, 1.0 FTE Finance Specialist 2, and 1.0 FTE Finance Specialist Senior) from MHASD Business and Finance (25054) to DCHS Business Services (25002) allowing for departmental oversight of MHASD finances including accounts payable, accounts receivable, and budget development and monitoring.

**Lead Agency:** County Human Services

**Program Contact:** Ron Lagergren

**Program Offer Type:** Existing Operating

**Related Programs:** 25056A, 25056B

**Program Characteristics:**

**Executive Summary**

Multnomah County Mental Health and Addiction Services Division operates a 24-hour, 365-day-a-year behavioral health emergency crisis response system. Services include a crisis hotline, mobile crisis outreach and an urgent walk-in clinic. Included in the management of the crisis system is the authorization of services for Verity enrolled members as well as indigent services. The total number of people served in this program offer is 61,586 per year.

**Program Description**

The behavioral health crisis system in Multnomah County is comprised of several distinct, yet interconnected services:

**Multnomah County Call Center** – This service is operated by Multnomah County 24/7, 365 days/year. The call center coordinates emergency mental health services for all county residents regardless of insurance status. It also provides the following services: deploys 911 and mobile crisis resources as needed, provides information and referral, linkage to behavioral health services, community education on suicide prevention, after-hours hospitalization authorizations for Verity members, and authorizations for indigent medications and transportation. The total number of calls managed is 53,120 for a year.

**Project Respond** – This is the mobile outreach service that is contracted with a community based organization and is available 24/7, 365 days/year. Project Respond is deployed by the Call Center or Portland Police to provide face-to-face crisis evaluation and triage services to those in crisis regardless of insurance status. The total number of clients served was 1,322 for a year.

**Urgent Walk-In Clinic** – This is a clinic based service contracted with a community based organization, available from 7 a.m. to 10:30 p.m., 365 days/year, that provides crisis evaluation, triage, and stabilization on a walk-in basis. The Urgent Walk-In Clinic is the only service available to indigent clients in crisis in Multnomah County with immediate access to a psychiatrist or psychiatric mental health nurse practitioner for medication evaluation and treatment. The clients primarily seen at the walk-in clinic are indigent. The total number of clients served was 5,000 for a year.

**Utilization Review** – This function, operated in the Call Center, provides authorization oversight of Verity funds and indigent treatment funds for those experiencing mental health emergencies and crises. This clinical function ensures that expenditures stay within budget. The total number of clients managed was 2,586 for a year.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total Crisis System Contacts <sup>1</sup>	0	0	62,028	62,000
Outcome	% of adults whose respite stay resulted in a reduction in hospital use <sup>2</sup>	95.0%	0.0%	95.0%	95.0%
Outcome	% of clients seen by the UWIC that did not need to be referred on to an ER <sup>3</sup>	97.5%	97.0%	97.0%	97.0%

**Performance Measure - Description**

<sup>1</sup>This is a new measure - there is not an output purchased for this FY. Total crisis system contacts = call center contacts (est. FY09-10: 53,120), project respond contacts (est. FY09-10: 1,322) walk-in clinics (est. FY09-10: 5,000) and utilization review (est. FY09-10: 2,586).

<sup>2</sup>The first outcome measure shows the percent of adult respite admissions that used respite as a hospital diversion or as a step-down from a hospitalization reducing the hospital length of stay. Both of these directly reduce the number of inpatient bed days used for both insured and uninsured residents.

<sup>3</sup>The second outcome measure shows the percent of clients evaluated and stabilized by the Urgent Walk-In Clinic (UWIC) that did not need to be sent to an ER for potential hospitalization.

## Legal/Contractual Obligation

State of Oregon Mental Health Organization contract, Oregon Administrative Rules 410-141-0120 and 410-141-140, and Oregon Revised Statute 430.630. Local Mental Health Authority/Community Mental Health Program responsibility to provide crisis services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$97,140	\$2,180,232	\$0	\$2,448,887
Contracts	\$1,052,299	\$2,167,310	\$1,073,345	\$3,036,662
Materials & Supplies	\$2,523	\$42,658	\$0	\$25,540
Internal Services	\$26,493	\$404,212	\$0	\$313,437
Total GF/non-GF:	<b>\$1,178,455</b>	<b>\$4,794,412</b>	<b>\$1,073,345</b>	<b>\$5,824,526</b>
Program Total:	<b>\$5,972,867</b>		<b>\$6,897,871</b>	
Program FTE	3.00	20.56	0.00	23.56
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$6,000	\$0	\$0
Intergovernmental	\$0	\$4,788,411	\$0	\$5,818,526
Other / Miscellaneous	\$0	\$0	\$0	\$6,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$4,794,411</b>	<b>\$0</b>	<b>\$5,824,526</b>

## Explanation of Revenues

\$1,735,251 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09  
\$153,744 - State Mental Health Grant Local Admin; \$1,718,898 - State Mental Health Grant Non Residential, and \$2,210,633 - State Mental Health Grant Community Crisis Services: All Based on FY09-11 projected State Biennial Budget  
\$6,000 - Fees: Based on FY10 received Y-T-D Revenue projections  
\$1,073,345 - County General Fund

## Significant Program Changes

**Last year this program was:** #25055A, Mental Health Crisis Services - Base

This program was funded to adequately provide a 24-hour mental health emergency response system 365 days per year.

Significant changes in this proposal include:

- Moving the Program Manager 1 and Office Assistant Senior positions from the MHASD Administration budget to this program offer. LA01 dollars from the MHASD Administration budget were transferred into this program offer to cover the positions.

This program offer includes a 2% inflationary increase of \$ 21,246 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 25055

**Program Contact:** David Hidalgo

**Program Characteristics:**

**Executive Summary**

The Mental Health and Addiction Services Division (MHASD) has identified crisis assessment and treatment, also known as sub-acute, as a missing service in the system of care. This facility offers 16 beds of short-term mental health treatment in a secure locked environment as a lower cost alternative to hospitalization for 600-800 clients per year. Facility staffing will include physical and mental health professionals and peer support specialists. This program offer supports ongoing operating costs that would be funded once the facility has been renovated with the build-out funds identified in program offer 25056A.

**Program Description**

Sub-acute is a short-term stabilization program for those individuals who require a secure alternative to incarceration or hospitalization. It is a critical component in a full continuum of mental health services but does not currently exist in our community. Although it works with other community agencies that provide long term-care, the mission of the sub-acute facility is brief intervention when a person becomes a danger to themselves or others due to his/her mental illness. The target length of stay is a maximum of 10 days. Since the individual remains linked to the community, length-of-stay is minimized and the person is less likely to lose critical recovery supports including Medicaid eligibility and housing. Sub-acute care is less expensive than hospitalization. Incarceration hinders recovery and strains the resources of courts and the jail. As part of a best practice model for facilities of this type, the proposed treatment team includes consumer positions on staff (Peer Support Specialists) to provide mentoring and linkage to services in the community. These positions are salaried members of the treatment team.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# persons admitted who would otherwise have been hospitalized or jailed <sup>1</sup>	0	0	0	150
Outcome	A low readmission rate to acute care <sup>1</sup>	0.0%	0.0%	0.0%	14.0%

**Performance Measure - Description**

<sup>1</sup>This is a new program offer and the performance measures are also new. The next year offer is based on a planned opening in April 2011 and 3 months of operation.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$0	\$0	\$200,000	\$175,000
Total GF/non-GF:	\$0	\$0	\$200,000	\$175,000
Program Total:	\$0		\$375,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$175,000
Total Revenue:	\$0	\$0	\$0	\$175,000

Explanation of Revenues

\$175,000 - City of Portland  
\$200,000 - County General Fund

Significant Program Changes

Last year this program was: #25056B, Mental Health Sub-acute (Operating Expenses)



**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:** 25055, 25068

**Program Characteristics:**

### Executive Summary

The more intensive mental health needs of children and families enrolled in Oregon Health Plan are met through the following service types: psychiatric inpatient hospitalization services, psychiatric residential treatment services for children, and secure alternatives to psychiatric hospitalization for children. The three program elements combined provide a continuum of services for 668 children each year who need secure placement outside the home for mental health care.

### Program Description

Three distinct levels of higher intensity care are available in the mental health service continuum for children and families:

Psychiatric inpatient hospitalization is the most intensive and restrictive level of treatment for children suffering from mental illness. The Mental Health and Addiction Services Division (MHASD) Call Center and Family Care Coordination Team coordinates with hospital and community providers to recommend inpatient medical treatment only when community-based care is inadequate to prevent a mental health crisis or manage severe symptoms, based on medical necessity and clinical criteria. The average hospital stay for a child is 7.5 days.

Secure alternatives to psychiatric hospitalization (sub-acute) stabilize mental health symptoms for children who would otherwise require inpatient hospitalization. Service is provided at a secure community-based facility that is staffed 24 hours a day with medical and clinical personnel. Treatment includes clinical programming, family therapy, medication management and discharge planning. The MHASD Call Center authorizes the service.

The least intensive of these three service types, psychiatric residential services treat children who, because of acute mental illness, are unable to manage their own behavior and who often present a threat to themselves and their parents. Highly trained staff provide 24-hour-a-day service, including psychiatric day treatment, medication management and basic supervision. MHASD's Family Care Coordination Team supervises these services and works with providers to discharge children into the community when appropriate.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total unduplicated children receiving inpatient, subacute & residential care <sup>1</sup>	639	667	668	668
Outcome	Average length of stay in psychiatric residential treatment <sup>2</sup>	90	102	82	82

### Performance Measure - Description

<sup>1</sup>Total unduplicated children receiving inpatient, subacute, and residential psychiatric care.

<sup>2</sup> Average psychiatric residential treatment length of stay in number of days.

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization (MHO) contract; Statement of Work.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$0	\$2,050,000	\$0	\$2,800,000
Internal Services	\$0	\$0	\$0	\$47,600
Total GF/non-GF:	<b>\$0</b>	<b>\$2,050,000</b>	<b>\$0</b>	<b>\$2,847,600</b>
Program Total:	<b>\$2,050,000</b>		<b>\$2,847,600</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,050,000	\$0	\$2,847,600
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,050,000</b>	<b>\$0</b>	<b>\$2,847,600</b>

**Explanation of Revenues**

\$2,847,600 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

**Significant Program Changes**

Last year this program was: #25057, Inpatient & Residential MH Services for Children

**Lead Agency:** County Human Services

**Program Contact:** Sandy Haffey

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Commitment Services includes Emergency Psychiatric Holds (E-Holds), Involuntary Commitment Program (ICP), Commitment Monitors, and the State Hospital Waitlist Reduction Program (WLRP). The county is the payor of last resort for indigent E-Holds and ICP staff are required to investigate and determine whether individuals on an E-Hold present a risk of harm to themselves or others and if a court hearing should be recommended. Provision of commitment monitors is a requirement of the county as the Local Mental Health Authority (LMHA). In FY09 ICP, investigated 1,103 E-Holds for indigent residents and 4,491 total holds; commitment staff monitored 489 patients and 116 trial visits.

### Program Description

Commitment Services is comprised of several distinct, yet interconnected services:

**Involuntary Commitment Program:** An E-Hold places an individual in a hospital while ICP staff investigate the individual's mental health status to determine whether to recommend civil commitment in Circuit Court. ICP staff determine the need for a pre-commitment hearing. When staff recommend a hearing, ORS 426.110-120 requires that a court examiner make an independent recommendation to the Judge.

**Emergency Hold:** When an individual is placed on an E-Hold and cannot pay for the hospital stay, ORS 426 requires that the county provide these services. The county is required to provide commitment monitoring services.

**Commitment Monitors:** Staff in this unit assess committed individuals to determine whether they continue to meet commitment criteria, work with hospital staff to develop treatment and discharge plans, and make recommendations on continued hospitalization. Commitment monitors perform monitoring services during trial visits to the community, facilitate financial and medical entitlements, and ensure that individuals transition into the most appropriate level of community care.

**State Hospital Waitlist Reduction Program (WLRP):** Staff provide Intensive Case Management (ICM) for patients discharging from the state hospital and acute care hospitals, and provides funding for four Emergency Department Liaisons. ICM and transition planning prevent relapses into hospital care and reduce the County's burden as the payor of last resort. ICM staff provide connection with resources and assistance in obtaining housing, access to health care, social services, and outpatient mental health services. These services address the needs of mentally ill county residents at the highest level of care. Services provide care and service coordination, ensure adequacy and appropriateness of resources and provide protection of legal and civil rights.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of E-Holds for indigent County residents <sup>1</sup>	1,103	1,270	1,100	1,100
Outcome	% of total E-Holds that went to Court hearing <sup>2</sup>	6.7%	6.5%	7.4%	7.4%
Output	# of commitments monitored	605	600	750	750
Outcome	% of total E-Holds with a hearing that result in commitment <sup>3</sup>	71.0%	60.0%	73.0%	73.0%

### Performance Measure - Description

<sup>1</sup> Indigent E-Holds are a subset of the total number (4,491) of holds in Multnomah County.

<sup>2</sup> Outcomes measure staff effectiveness in applying ORS 426

<sup>3</sup> This measure is the percentage of E-Hold Court hearings that result in a commitment. This percentage is increasing as staff acclimate referrals to the increased conservativeness of the Circuit Court and State Appellate Court in interpreting ORS 426.

**Legal/Contractual Obligation**

ORS 426.005 to 426.415

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$725,377	\$1,985,097	\$898,489	\$2,056,968
Contracts	\$316,015	\$1,672,724	\$200,000	\$2,098,071
Materials & Supplies	\$10,252	\$40,790	\$0	\$51,950
Internal Services	\$147,701	\$141,452	\$0	\$370,101
Total GF/non-GF:	<b>\$1,199,345</b>	<b>\$3,840,063</b>	<b>\$1,098,489</b>	<b>\$4,577,090</b>
Program Total:	<b>\$5,039,408</b>		<b>\$5,675,579</b>	
Program FTE	8.40	20.90	9.00	20.30
<b>Program Revenues</b>				
Intergovernmental	\$0	\$3,686,567	\$0	\$4,577,090
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$3,686,567</b>	<b>\$0</b>	<b>\$4,577,090</b>

**Explanation of Revenues**

\$523,028 - State Mental Health Grant Non Residential, and \$2,703,598 - State Mental Health Grant Regional Acute Inpatient Facility; \$1,350,464 - State Mental Health Grant Community Crisis Services: All Based on FY09-11 projected State Biennial Budget  
 \$1,098,489 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25058A, MH Commitment Services

Last year, this program was: #25058A,B,C,& D, MH Commitment Services to accomodate potential budget cuts.

**Lead Agency:** County Human Services

**Program Contact:** Sandy Haffey

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program includes Mental Health Residential Services and Transitional Housing. Staff in Residential Services facilitates referral, screening and placement for individuals with a severe mental illness that requires care in a 24-hour-a-day setting. Transitional Housing focuses on individuals who require assistance obtaining permanent housing while addressing their mental health needs. The Bridgeview provides 48 units of single-room housing, support services and on-site mental health and dual diagnosis treatment. Royal Palm provides 20 dormitory shelter beds and 30 units of Single Room Occupancy housing.

### Program Description

Residential services is comprised of two distinct, yet interconnected services:

**Residential Services** - Residential staff screen and place adults with severe and persistent mental illness in structured housing where licensed caregivers provide mental health and social services. Staff have received 330 referrals in FY10, with 38.5% placement rate. Staff monitor facilities, provide training, technical assistance and assist with development and siting of new facilities.

**Transitional Housing** - Royal Palm is a 50 bed transitional housing facility, providing 20 dormitory shelter beds and 30 units of Single Room Occupancy, low barrier housing for individuals with a mental illness who are homeless or at imminent risk of homelessness. The facility is staffed 24 hours a day. The Royal Palm housed 100 clients in FY09. Bridgeview provides 48 transitional, Single Room Occupancy units. Staff provide mental health services, 24-hour-a-day on-site case management, dual diagnosis treatment, and integration into permanent housing. To preserve the transitional focus, individuals are evaluated every six months to determine readiness for permanent housing. Bridgeview housed 85 clients in FY09.

Residential Services and Transitional Housing link mental health treatment to stable, short and long term housing. Programs provide intervention and service coordination in the provision of housing and comprehensive community supports and services, as well as facilitate discharge of adults with mental illness to community residential programs from local acute care inpatient psychiatric facilities and the Oregon State Hospital, allowing consumers to increase their independence in the least restrictive level of care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of new Residential Services referrals	330	330	360	350
Outcome	% of Residential Services referrals placed	38.5%	45.0%	41.0%	40.0%
Output	# of residents served by Bridgeview	85	110	100	100

### Performance Measure - Description

<sup>1</sup>Measure allows residential services to assess the percentage of referrals it is able to place and provides information related to the gap in number of beds needed relative to referrals received. Referrals go up and down in response to the number of new residential beds opened in a fiscal year, as well as discharges from the acute care and state hospitals.

## Legal/Contractual Obligation

Residential Services: OAR 309-035-0100 through 309-035-0190, OAR 309-035-0460, OAR 309-032-0450, Adult Foster Chapter 309, Division 040. Bridgeview Transitional Services: OAR 309-032-0525 Standards for Adult Mental Health Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$452,868	\$174,996	\$465,394	\$311,486
Contracts	\$361,982	\$2,727,597	\$565,722	\$7,513,741
Materials & Supplies	\$3,557	\$6,919	\$12,292	\$0
Internal Services	\$106,952	\$0	\$70,571	\$12,260
Total GF/non-GF:	<b>\$925,359</b>	<b>\$2,909,512</b>	<b>\$1,113,979</b>	<b>\$7,837,487</b>
Program Total:	<b>\$3,834,871</b>		<b>\$8,951,466</b>	
Program FTE	4.80	1.70	4.50	3.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,909,512	\$0	\$7,837,487
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,909,512</b>	<b>\$0</b>	<b>\$7,837,487</b>

## Explanation of Revenues

\$323,746 - State Mental Health Grant Local Admin; \$3,234,241 - State Mental Health Grant Non Residential; \$1,873,494 - State Mental Health Grant Residential Treatment Services; \$651,162 - State Mental Health Grant PSRB; \$244,033 State Mental Health Grant Supp Emp; \$234,333 State Mental Health Grant Homeless; \$942,674 State Mental Health Grant Non Res Support; \$126,155 State Mental Health Grant General: All Based on FY09-11 projected State Biennial Budget  
\$207,649 - City of Portland: Based on FY10 grant award  
\$1,113,979 - County General Fund

## Significant Program Changes

**Last year this program was:** #25060A, MH Residential Services

Last year, this program was: #25060A, B, and C, MH Residential Services, due to potential State & County budget cuts. This offer adds .5FTE Office Assistant 2 and 1.0FTE Program Development Specialist to Residential Services, funded with State Local Admin. dollars which are designated for Residential Services. The decrease in numbers served at Bridgeview is the result of transition of program to new provider and subsequent need to limit number served in anticipation of move to new building with transitional beds decreased to 39 and the addition of 9 permanent supported housing units.

This program offer includes a 2% inflationary increase of \$ 8,152 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:** 25055

**Program Characteristics:**

### Executive Summary

Mental health services describe the existing continuum of mental health care for adults. Psychiatric hospitalization treats persons at immediate risk to themselves or others. Respite services provide intervention when an individual's symptoms have risen beyond the scope of outpatient treatment. Outpatient treatment services provide a range of care matched to diagnosis and acuity to over 6,800 adults annually. Primarily funded by the Oregon Health Plan, this continuum addresses the needs of adults at emergent (most acute), urgent and routine (least acute) levels of care.

### Program Description

This service continuum contains three distinct service elements that contribute to a system of care for adults: psychiatric inpatient, respite and outpatient services. Psychiatric inpatient hospitalization is the most intensive level of care in the adult system. Hospital admission is carefully monitored to ensure that it is only offered where medically and clinically appropriate. Once admitted, individuals receive the full range of treatment services provided in a hospital setting. The Mental Health and Addiction Services Division (MHASD) Call Center works with the hospitals and providers to provide individuals a safety net of services as they transition into the community following discharge. This service was provided to approximately 1,328 clients.

Mental health respite services are a community-based approach to stabilize individuals whose symptoms have exceeded the scope of outpatient treatment. The goal is to prevent hospitalization through early intervention with short-term, intensive residential treatment. Respite care contains a range of treatment options, including medication management, clinical treatment and post-discharge transition planning. It has been defined as a best practice when used in a continuum of treatment services. MHASD funds six respite beds and served approximately 300 clients with an average stay of 5.52 days.

Adult mental health outpatient services provide a comprehensive array of treatment options that address the needs of each individual, including several categories of individual and group therapy, case management, intensive outreach and medication management. Outpatient services address long and short term mental health needs and avoid more acute services. An average of 5,000 adults receive outpatient services each month, with many remaining in treatment for several months.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total adults receiving Outpatient mental health services <sup>1</sup>	6,602	6,378	6,813	6,813
Outcome	Percent of adults readmitted to inpatient within 30 days of discharge <sup>2</sup>	18.9%	18.8%	19.4%	19.4%

### Performance Measure - Description

<sup>1</sup> Number of unduplicated Verity adult enrollees who received an outpatient mental health service during the fiscal year.

<sup>2</sup> Percent of unduplicated Verity adult enrollees who were readmitted to inpatient hospitalization within 30 days of discharge during the measurement period.

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization (MHO) Contract, Statement of Work.

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$64,760	\$131,484	\$0	\$240,877
Contracts	\$0	\$17,791,280	\$0	\$20,900,000
Materials & Supplies	\$1,682	\$3,415	\$0	\$1,891
Internal Services	\$17,662	\$35,859	\$0	\$383,818
Total GF/non-GF:	<b>\$84,104</b>	<b>\$17,962,038</b>	<b>\$0</b>	<b>\$21,526,586</b>
Program Total:	<b>\$18,046,142</b>		<b>\$21,526,586</b>	
Program FTE	1.02	0.98	0.00	2.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$17,962,038	\$0	\$21,526,586
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$17,962,038</b>	<b>\$0</b>	<b>\$21,526,586</b>

**Explanation of Revenues**

\$21,526,586 - OHP Premium: Based on FY10 Rate per client times number of clients as of 12/31/09

**Significant Program Changes**

**Last year this program was:** #25062, Mental Health Services for Adults

This program has not significantly changed. We will allocate additional resources to the development of Intensive Case Management (ICM) pilot projects in the coming year with the goal of decreasing hospital admissions & re-admissions. ICM provides more intensive outreach/in-community supports for high-risk individuals who are not engaging in existing treatment modalities.



**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:** 25115, 25063B

**Program Characteristics:**

### Executive Summary

The Multnomah Treatment Fund (MTF) prioritizes community-based services to severely mentally ill individuals who have been released from jail or psychiatric hospitals and/or are at risk of hospitalization or significant decompensation but are uninsured and ineligible for Oregon Health Plan (OHP). MTF addresses immediate health and safety concerns until insurance or OHP coverage is obtained. The program will provide mental health services to 500 adults (decrease due to reduction in funds to keep program in target).

### Program Description

Multnomah Treatment Fund will support an array of services for 500 severely mentally ill individuals who are uninsured and without financial resources. The Mental Health and Addiction Services Division (MHASD) provides funds to the network of providers to treat these uninsured persons during periods for aggravated symptoms in acute stages of illness. The goal is to stabilize these persons and prevent more drastic consequences including hospitalization, incarceration, addiction relapse, and loss of custody of children. If these services are effective, the client is spared a prolonged period of instability and the county preserves funds that would otherwise be lost to high-cost alternatives such as hospitalization.

Since these funds are limited, a designated adult system of care coordinator reviews each event for clinical necessity, choice of intervention, and financial eligibility. Services can include individual and group therapy, intensive case management, community outreach, housing assistance, medication management, dual diagnosis treatment, care coordination and crisis intervention. While the person is receiving services, he/she can be linked to other supports and acquire assistance in securing OHP benefits through the Department of Community Services' Benefits Recovery Project and health care through the Multnomah County Health Department or other clinics serving indigent clients.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total # of adults who received County funded outpatient services or medication <sup>1</sup>	822	845	758	500
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	1	4	1	0
Outcome	Percent of adults who received county funded services with one or more e-holds	21.9%	0.0%	20.7%	21.0%

### Performance Measure - Description

<sup>1</sup> Unduplicated uninsured adults who received at least one county funded outpatient mental health service or at least one county funded medication during the measurement period.

<sup>2</sup> This outcome is being discontinued as we have a more accurate measure of hospitalizations for clients served.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$1,537,976	\$0	\$1,177,976	\$260,000
Total GF/non-GF:	<b>\$1,537,976</b>	<b>\$0</b>	<b>\$1,177,976</b>	<b>\$260,000</b>
Program Total:	<b>\$1,537,976</b>		<b>\$1,437,976</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$260,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$260,000</b>

**Explanation of Revenues**

\$260,000 - State Mental Health Grant Non-Residential Mental Health Services MHS 20  
 \$1,177,976 - County General Fund

**Significant Program Changes**

✓ **Significantly Changed**

**Last year this program was:** #25063A, MH Treatment & Medication for Uninsured/Indigent

The decrease in FY 09-10 total served (758) is due to changes in clinical criteria intended allow us to pay for more costly services for higher-need clients involved in more intensive programs - i.e, Intensive Case Management (ICM) and Assertive Community Treatment (ACT). The decrease in numbers for FY10-11 is due to the \$600,000 decrease in funding for this program.

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young persons age 15-25 who demonstrate initial symptoms of psychosis, with the goal of managing long-term problems and consequences. EASA offers formal psychiatric treatment services as well as vocational and educational support, and involves the young person's family in treatment. The program will provide services for approximately 80 clients.

### Program Description

The EASA team identifies young people experiencing the first episodes of psychosis and offers them a broad array of individualized treatment avenues and community-based care. Services include assessment, treatment planning, case management, medication management, psycho-educational workshops, multi-family groups, occupational assessments and interventions, and assistance with accessing supported employment and educational opportunities. These services are provided by a multidisciplinary team that includes a psychiatrist, a nurse, a vocational and occupational therapist and mental health consultants. The team's composition and activities are designed to meet the standards of a defined evidenced based practice model as required by the state. Research suggests that the median age for the onset of initial episodes of psychosis is under the age of 25. Research also suggests that early intervention and immediate access to treatment can reduce the incidence of psychosis' long-term disabling consequences.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total individuals enrolled in program receiving ongoing services	30	60	60	80
Outcome	Percent reduction in hospitalization rate 6 months pre and post enrollment <sup>1</sup>	81.0%	87.0%	82.0%	82.0%

### Performance Measure - Description

<sup>1</sup> This measure compares the hospitalization rate for the six months prior to services with the rate for the six months after the end of services which is an indication of the stabilization of the individual.

## Legal/Contractual Obligation

We receive funds from the State of Oregon for this program through State General Fund 20.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$602,473	\$0	\$692,820
Contracts	\$0	\$0	\$0	\$246,900
Materials & Supplies	\$0	\$2,376	\$0	\$16,565
Internal Services	\$0	\$0	\$0	\$91,995
Total GF/non-GF:	<b>\$0</b>	<b>\$604,849</b>	<b>\$0</b>	<b>\$1,048,280</b>
Program Total:	<b>\$604,849</b>		<b>\$1,048,280</b>	
Program FTE	0.00	6.20	0.00	7.20
<b>Program Revenues</b>				
Intergovernmental	\$0	\$604,849	\$0	\$1,048,280
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$604,849</b>	<b>\$0</b>	<b>\$1,048,280</b>

## Explanation of Revenues

\$50,850- OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$997,430 - State Mental Health Grant Non-Residential Adult: Based on FY09-11 projected State Biennial Budget

## Significant Program Changes

**Last year this program was:** #25064A, Early Assessment and Support Alliance

1.0 FTE Program Supervisor position was added to this program offer via a budget modification approved by the BCC in FY10.

**Program # 25066 - Mental Health Organization Provider Tax (Verity)**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The county's managed mental health organization, Verity, is required to pay a 1% provider tax to the state to leverage additional federal funds for the Oregon Health Plan. The additional funds received by the state are then redistributed through the Oregon Health Plan reimbursement.

**Program Description**

The Oregon State Legislature approved a tax on managed care plans to support benefits for Oregon Health Plan Standard enrollees. The dollars raised by the tax on managed care plans are eligible to be matched by federal Medicaid funds. The federal government will match every dollar the State raises with \$1.50. This additional money is used by the State to fund Oregon Health Plan benefits so that individuals at a higher percentage of the federal poverty level can receive healthcare, including mental health care.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	N/A	0	0	0	0
Outcome	N/A	0	0	0	0

**Performance Measure - Description**

## Legal/Contractual Obligation

Provider Tax is a requirement of participation in Oregon Health Plan as a Mental Health Organization under contract with the State of Oregon.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$0	\$2,188,844	\$0	\$420,965
Internal Services	\$0	\$0	\$0	\$7,156
Total GF/non-GF:	<b>\$0</b>	<b>\$2,188,844</b>	<b>\$0</b>	<b>\$428,121</b>
Program Total:	<b>\$2,188,844</b>		<b>\$428,121</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,188,844	\$0	\$428,121
Total Revenue:	<b>\$0</b>	<b>\$2,188,844</b>	<b>\$0</b>	<b>\$428,121</b>

## Explanation of Revenues

\$428,121 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25066, Mental Health Organization Provider Tax (Verity)

State legislation has resulted in a decrease in the percentage of provider tax. The percentage for provider tax has dropped to 1% from 5.5%.

**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:** 25055, 25057, 25068, 25075, 25156B

**Program Characteristics:**

**Executive Summary**

This mental health service array serves children and youth up to age 21. Services range from prevention/early intervention in the Early Childhood and Head Start program that serves 4,511 children annually, to a comprehensive outpatient system that successfully maintains over 4,200 children in the community, to the Intensive Community Based Treatment program that has successfully reduced the average length of stay in psychiatric residential facilities over the last three years.

**Program Description**

This array provides a continuum of services for over 8,700 children by combining Early Childhood and Head Start Mental Health Services, Child Abuse Mental Health Services provided at CARES NW, Children's Mental Health Outpatient Services (Verity), and Intensive In-Home and Community Mental Health Services for Children.

Services include evidence based counseling for at risk children and their families, Incredible Years parent groups, early childhood classroom consultation, psychiatric day treatment, crisis respite, individual and group therapy, skill building and medication management. Care is coordinated with allied agencies such as Child Welfare, MESD and schools, Head Start programs, Developmental Disabilities, the juvenile justice system, Wraparound Oregon, and physical healthcare providers, to ensure the best outcomes for children and youth.

Services offered are culturally competent and promote the development of healthy attachments and positive parenting practices so that needs are addressed before they become acute. The goal of every program in this array is to promote educational success and to keep vulnerable children in home settings with their families, permanent foster care families or other long term caregivers. Special effort is taken to guarantee families are provided opportunities for planning and choosing their care.

The prevention and early intervention services provided by the Early Childhood and Head Start Program addresses child and families needs before they become more acute. The Child Abuse Mental Health program reduces trauma of vulnerable children and their families which in turn reduces their risk of developing long term health and mental health problems. Outpatient Services delivers a family-centered model that leads to long-term stability for children and parents. Intensive mental health treatment intervenes in crisis situations to keep children at home, in school, and out of trouble.

This service array is in keeping with the goals of both the Early Childhood and School Aged Policy Frameworks as they relate to strengthening families and promoting educational success for children with mental illness.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total children receiving outpatient services	4,131	4,261	4,142	4,142
Outcome	Percent children with improved behavior in school <sup>2</sup>	81.0%	80.0%	80.0%	80.0%

**Performance Measure - Description**

<sup>1</sup> This measure is the number of unduplicated children and youth ages 0 - 20 with at least one reported mental health treatment encounter in any outpatient service. Verity and Multnomah Treatment Fund (MTF) claims data. Previously this measure included children served by the Family Care Coordination Team, which has a new separate budget offer for FY10-11.

<sup>2</sup> Percentage of children with improved behavior in school as reported in mental health CPMS closed case data.

## Legal/Contractual Obligation

Community Mental Health Program obligations ORS 430.630

State of Oregon, Mental Health Organization contract Statement of Work

Oregon Administrative Rule 309-032-1240 to 309-032-1305, 309-014-0020, 309-014-0025, 309-014-0030, 309-014-0035.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$1,190,406	\$702,003	\$1,044,007	\$954,924
Contracts	\$128,750	\$10,765,764	\$135,264	\$11,642,615
Materials & Supplies	\$23,342	\$15,967	\$1,305	\$38,406
Internal Services	\$169,281	\$202,128	\$275,910	\$241,403
Total GF/non-GF:	<b>\$1,511,779</b>	<b>\$11,685,862</b>	<b>\$1,456,486</b>	<b>\$12,877,348</b>
Program Total:	<b>\$13,197,641</b>		<b>\$14,333,834</b>	
Program FTE	11.58	6.37	9.90	8.35
<b>Program Revenues</b>				
Intergovernmental	\$0	\$11,685,862	\$0	\$12,877,348
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$11,685,862</b>	<b>\$0</b>	<b>\$12,877,348</b>

## Explanation of Revenues

\$11,654,129 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$603,544- State Mental Health Grant: Based on FY09-11 projected State Biennial Budget

\$104,264- FQHC

\$285,764- OMAP payments

\$85,444- FFS Service Receipts

\$144,203- Head Start Contracts

\$1,456,486 - County General Fund

## Significant Program Changes

**Last year this program was:** #25067, Community Based MH Services for Children & Families

This program offer includes a 2% inflationary increase of \$ 2,652 over FY10 for the County General Fund portion of contracted client services.



**Program # 25068 - Family Care Coordinators**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:** 25057, 25067, 25069

**Program Characteristics:**

**Executive Summary**

Family Care Coordinators (FCC's) are Master's level clinicians serving children and adolescents up to age 18 years who have severe mental health disorders, and their families. These at risk children need the most intensive mental health services and have multiple service systems involvement. FCC's served 275 children and their families last fiscal year. FCC's provide clinical care coordination to identify, access and coordinate services for children and families that are clinically appropriate, evidence based, cost effective and in the least restrictive and most culturally appropriate environment. FCC's develop and facilitate Child and Family Teams that are family-guided, culturally competent, multidisciplinary and naturally supported to help children stay with family, in the community, in school and out of trouble.

**Program Description**

The Family Care Coordination Team (FCCT) of seven and a half FTE Mental Health Consultants and one Supervisor is the sole access point to the Integrated Service Array (ISA) that includes psychiatric residential, day treatment and Intensive Community Based Treatment as well as care coordination and facilitation of Child and Family support Teams for children. Children served are at risk of out of home placement or are already out of their home due to their mental health needs.

FCC's served 275 child referrals for the Integrated Service Array level of care last year. The FCCT continues to implement the Statewide Children's System Change Initiative begun in 2005. The FCCT reduced the percentage of children in the ISA who were leaving their family home to enter costly psychiatric residential care. The percentage of children going into psychiatric residential care went from 44% in 2006 to 22.5% in 2009. In addition, FCC's serve children in inpatient and State Hospital programs. The Family Care Coordination Team is the sole access point and provides facilitation of State Hospital screenings for all children in Multnomah County. The FCCT served an unduplicated count of 204 children and their families through 954 Child and Family Team meetings last fiscal year.

Child and Family Teams are a group of people chosen with the family/legal guardian who are connected through natural, community and formal service support relationships. FCC's assist each Child and Family Team to develop an agreed upon strengths-based overall Service Coordination Plan to support each child and family. Service Coordination Plans include goals from the multiple service systems involved such as child welfare, juvenile justice, health, education and developmental disabilities. FCC's also work closely with culturally specific contracted Family System Navigators who support families to understand their child's mental health disorder, develop natural supports, and access to basic needs and entitlements.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of Child and Family Team Meetings for children served by the FCC's	954	992	992	992
Outcome	Percent of FCCT served ISA children needing psychiatric residential treatment	22.5%	19.0%	19.0%	16.0%

**Performance Measure - Description**

Output: Number of Child and Family Team Meetings for FCCT clients during the measurement period.

Outcome: Percent of children served by the FCCT in Intensive Service Array who entered psychiatric residential treatment. This program was incorporated into 25067 program offer last year.

### Legal/Contractual Obligation

State OHP-MHO Contract with Verity: Exhibit B Statement of Work Part II, b. Components of the Delivery System (1) Service Coordination and (8) Integrated Service Array (ISA) for Children and Adolescents and c. Integration and Coordination OAR 309-032-1260 for ICTS service coordination planning.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$828,182	\$0	\$830,853
Contracts	\$0	\$155,000	\$0	\$96,000
Materials & Supplies	\$0	\$9,886	\$0	\$16,074
Internal Services	\$0	\$103,458	\$0	\$124,496
Total GF/non-GF:	<b>\$0</b>	<b>\$1,096,526</b>	<b>\$0</b>	<b>\$1,067,423</b>
Program Total:	<b>\$1,096,526</b>		<b>\$1,067,423</b>	
Program FTE	0.00	8.50	0.00	8.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,096,526	\$0	\$1,067,423
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,096,526</b>	<b>\$0</b>	<b>\$1,067,423</b>

### Explanation of Revenues

\$963,423 - OHP Premium: Based on FY10 Rate per Client times number of clients as of 12/31/09

\$104,000 - State Mental Health Grant Child/Adoles MH Svc: Based on FY09-11 projected State Biennial Budget

### Significant Program Changes

**Last year this program was:** #25067, Community Based MH Services for Children & Families  
The Family Care Coordination Team program offer was included in FY10 offer 25067.

**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:** 25156A

**Program Characteristics:**

**Executive Summary**

Bienestar de La Familia (Wellbeing of the Family) is a multidisciplinary approach serving a large Latino community. Bienestar provides culturally specific, linguistically appropriate direct mental health and addiction treatment services to children, adolescents, adults and families at sites throughout Multnomah County. Qualified mental health professionals and an Addiction Specialist served 530 Hispanic children and families in their homes and in the community last year. Service sites include schools, Headstarts, CARES NW, and La Clinica Health Clinic. About 93% of individuals served are uninsured. Bienestar strives for health equity by providing services to traditionally underserved populations of Spanish speaking Latino families who experience significant barriers to service access.

**Program Description**

Bienestar mental health consultants provide mental health assessments, crisis intervention, individual, family and group treatment services, referrals and consultation. Four (2.0 FTE) Bienestar mental health consultants and an addictions specialist (.88 FTE) travel across the county to serve children and families within their homes, high school based health clinics, Early Childhood Headstart (60% Hispanic), Migrant Headstart (99% Hispanic), CARES NW and La Clinica Health Clinic.

The population served by CARES NW, a child abuse evaluation program, is composed of 22% (380) Hispanic children. There is a Hispanic population of more than 850 in the area surrounding La Clinica, the anchor health care program for homeless children and families. Bienestar mental health consultants and the addiction specialist collaborate with medical practitioners, community social service providers, domestic violence and gang intervention and prevention programs as well as Portland Police to ensure children and families receive support and medical care. Families and children get assistance with their mental health, domestic violence, social support, poverty, and substance abuse issues to improve their functioning in the community.

The Bienestar program is aligned with the School Age Policy and Early Childhood Frameworks as well as the Health Equity Initiative. Every family receiving Bienestar mental health services is assessed for the presence of domestic violence. Of those receiving mental health services 88% are uninsured. Staff assist families to apply for Oregon Health Plan and other supports. The mental health staff initiate consultation and coordination efforts to build cross cultural understanding among other service providers as well as with county staff. Purchase of this program offer plus the Bienestar social services offer (25156A) brings the program to the current level of funding.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total unduplicated children, families and adults served <sup>1</sup>	530	615	468	550
Outcome	% of uninsured children and families receiving services in Spanish <sup>2</sup>	93	85	91	93

**Performance Measure - Description**

<sup>1</sup> Total unduplicated child, families and adults identified as receiving formal and informal mental health services. Data for number served by Alcohol and Drug staff not available this year due to staff changes.

<sup>2</sup> Percent of uninsured children and families from documented mental health services with a Bienestar code.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$257,776	\$0	\$252,607	\$0
Materials & Supplies	\$4,778	\$0	\$4,363	\$0
Internal Services	\$0	\$0	\$62,577	\$0
Total GF/non-GF:	<b>\$262,554</b>	<b>\$0</b>	<b>\$319,547</b>	<b>\$0</b>
Program Total:	<b>\$262,554</b>		<b>\$319,547</b>	
Program FTE	2.80	0.00	2.80	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$319,547 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25156B, Bienestar Mental Health Services  
#25156B – Bienestar Mental Health Services included in this offer.

**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Backfill State/Federal/Grant, Measure 5 Education

### Executive Summary

School Based Mental Health is an essential component of the mental health system of care for children and families. This program serves 924 children and teens with serious mental health disorders in over 88 school settings throughout the county. Mental health professionals provide culturally competent, family focused, evidence based treatment. Children and teens receive service that decreases the risk of hospitalization or other restrictive and costly services. Additional children with emotional and behavioral needs are helped through 12,381 preventative consultation contacts with school based health center staff and others that averted need for higher level of care. Sustainability efforts has been focused on improving the program's OHP billing reimbursement, which increased 30% in the last year.

### Program Description

Mental health treatment is provided in schools to decrease barriers such as stigma, cost and transportation for 924 underserved families. This program reaches youth who have not accessed services in a mental health center and 47% of those served were children of color. Approximately 95% of the children served were uninsured or insured by the Oregon Health Plan.

School based mental health consultants provide crisis intervention, mental health assessment, individual, group and family treatment and clinical case management as well as interventions with schools to help manage a child's mental health disorder. Consultation on children's mental health is provided to school and school based health clinic staff as well as community providers. Mental health consultants are co-located in School Based Health Clinics when possible to provide seamless services. About 60% of the families receive linkage services of mental health screenings and referral to community mental health centers.

Locating mental health services in schools is a best practice and Multnomah County has been a leader in the nation by providing this program since 1967. Through this program children and teens who are at risk of harming themselves or others are identified and receive intervention. This is important because, in Oregon, suicide is the number two cause of death among young people. Earlier identification and treatment can divert children from needing higher cost and more restrictive services. This program meets a child's basic need for mental health and is congruent with the goals of the School Age Policy Framework. It is also a part of the Children's Mental Health Redesign.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total unduplicated children receiving mental health services.	800	825	924	950
Outcome	% of children receiving services showing improved school behavior & attendance <sup>1</sup>	80.0%	80.0%	87.0%	80.0%

### Performance Measure - Description

<sup>1</sup> Improvements in school behavior and attendance are measures that reflect a child's overall success at home, in school and in the community.

### Legal/Contractual Obligation

Revenue Contracts exist with Parkrose School District for \$10,000 and Centennial School District for \$75,000. All revenue contracts have expectations for School Based Mental Health Consultant FTE's to be provided.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$190,686	\$1,114,683	\$437,529	\$912,485
Materials & Supplies	\$4,209	\$22,091	\$6,565	\$25,008
Internal Services	\$117,716	\$114,748	\$87,820	\$45,947
Total GF/non-GF:	<b>\$312,611</b>	<b>\$1,251,522</b>	<b>\$531,914</b>	<b>\$983,440</b>
Program Total:	<b>\$1,564,133</b>		<b>\$1,515,354</b>	
Program FTE	2.23	11.01	4.02	9.22
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,251,522	\$0	\$983,440
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,251,522</b>	<b>\$0</b>	<b>\$983,440</b>

### Explanation of Revenues

\$575,176 - State Mental Health Grant Child/Adoles MH Svc: Based on FY09-11 projected State Biennial Budget  
\$158,708- FQHC  
\$164,556- FFS Service Receipts  
\$10,000- Parkrose School District  
\$75,000- Centennial School District  
\$531,914 - County General Fund

### Significant Program Changes

**Last year this program was:** #25075, School Based Mental Health  
Contract with the Multnomah Educational Service District for \$78,710 ended on 6/09.  
Loss of \$49,164 funding from the Health Department School Based Clinics is expected to occur as of July 1, 2010. This currently funds a .8 FTE.

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Culturally specific outpatient mental health services provide treatment for five underserved communities in our county (Asian, African-American, Eastern European, Latino and Native-American). These communities have encountered difficulty finding mental health treatment that incorporates their culture, tradition and language. These services provide culturally and linguistically relevant care for these populations. Some communities of color are also overrepresented in the criminal justice system. Approximately 400 individuals receive services.

### Program Description

The system of care built and maintained by Multnomah County must reflect the demographics of those we serve. To ensure that all members of our community have treatment options that incorporate specific cultural needs, DCHS contracts for mental health services for individuals from five communities currently underserved or insufficiently served. Those communities are: Eastern European, African-American, Asian-American, Latino-American, and Native American.

Data suggests that members of the African-American and Native American communities are more likely than other populations to suffer from severe mental illnesses that require a more intensive level of care. African-Americans are four times more likely to be involuntarily placed in a hospital setting than members of other culturally specific groups. African-Americans are also overrepresented in jail and the criminal justice system.

The culturally specific services address mental health problems through early access to culturally and linguistically appropriate treatment. Early intervention can mitigate the need for expensive hospital, residential care, or crisis services. Treatment also reduces the risk of inappropriate incarceration or homelessness.

These mental health providers understand community cultural norms and have a relationship of trust with the communities they serve. These providers offer a wide variety of mental health services in a supportive and culturally appropriate setting.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total Culturally Diverse Individuals Receiving Services <sup>1</sup>	410	383	400	400
Outcome	Culturally Specific Persons Served per 1000 Culturally Diverse in Population <sup>2</sup>	2	2	2	2

### Performance Measure - Description

<sup>1</sup> This total includes all persons served under this contract and does not include those culturally diverse persons served by Verity or in other programs.

<sup>2</sup> Service Rate Per 1000 Calculation- Numerator: Total unduplicated culturally diverse individuals served. Denominator: Total county census for similar groups taken from the American Community Survey estimates for 2008.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$1,266,900	\$0	\$1,292,239	\$0
Total GF/non-GF:	<b>\$1,266,900</b>	<b>\$0</b>	<b>\$1,292,239</b>	<b>\$0</b>
Program Total:	<b>\$1,266,900</b>		<b>\$1,292,239</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$1,292,239 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25078A, Culturally Specific Mental Health Services

This program offer includes a 2% inflationary increase of \$ 25,339 over FY10 for the County General Fund portion of contracted client services.



**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The adult treatment continuum consists of outpatient addictions treatment including various counseling options, medication management and relapse prevention; residential treatment (intensive addictions services in a 24 hour setting); community recovery (aftercare services for clients learning to live sober); and a specialized program for severely addicted and multi-diagnosed, homeless clients. The continuum will serve about 5,500 clients next year. Research has shown that Oregon taxpayers save \$5.60 for every dollar spent on treatment.

### Program Description

The overall goal of addiction treatment is to have as many clients as possible successfully complete treatment and maintain sobriety (average successful completion statewide is about 50%). Services are delivered throughout Multnomah County by a network of state licensed providers. These providers are culturally competent and many have bilingual staff. Outpatient treatment allows a client to work, go to school, attend job training, socialize and otherwise carry on a normal life. The system treats about 5,000 outpatient clients annually.

Residential treatment provides intensive services in a 24/7 setting with clients living in the treatment center during their course of treatment, usually for two to six months. Clients needing this level of care often have multiple failures in outpatient treatment, often related to the severity and length of their addiction, as well as risk factors like chronic unemployment and housing problems. Residential treatment serves about 500 clients annually.

Treatment helps clients shift from ambivalence and denial about their addiction to acceptance and incentive to change. Clients address issues that are barriers to recovery, and develop strategies and skills to overcome them. Providers also address the self sufficiency needs of each client through help with: parenting skills; stress and anger management; housing issues; independent living skills; referrals for physical and mental health issues; linkages to employment services; and recreation and healthy use of leisure time.

Community recovery programming provides a variety of sober social support activities for clients and their families, utilizing a community sited 'clubhouse' model.

This program supports recovery and a return to a healthy lifestyle by offering access to addictions treatment that addresses the negative consequences of alcohol and other drugs.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number served in treatment (all levels)	4,700	5,500	5,200	5,500
Outcome	Percentage of clients who successful complete outpatient treatment <sup>1</sup>	55.0%	60.0%	60.0%	60.0%

### Performance Measure - Description

<sup>1</sup> "Successful completion of treatment" is defined as achieving at least 2/3 of treatment plan goals and having 90 days sobriety. Successful completion of treatment has been repeatedly shown to help move people toward greater self-sufficiency by increasing their employability and income and reducing their criminal activities.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A D 61 is Adult Alcohol & Drug Residential Treatment Services and Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$82,021	\$619,238	\$270,204	\$422,421
Contracts	\$2,724,554	\$4,558,199	\$2,612,974	\$8,037,682
Materials & Supplies	\$1,776	\$3,692	\$83,150	\$0
Internal Services	\$24,553	\$52,825	\$59,842	\$9,243
Total GF/non-GF:	<b>\$2,832,904</b>	<b>\$5,233,954</b>	<b>\$3,026,170</b>	<b>\$8,469,346</b>
Program Total:	<b>\$8,066,858</b>		<b>\$11,495,516</b>	
Program FTE	1.15	5.55	2.50	4.20
<b>Program Revenues</b>				
Intergovernmental	\$0	\$5,233,954	\$0	\$8,469,346
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$5,233,954</b>	<b>\$0</b>	<b>\$8,469,346</b>

### Explanation of Revenues

\$254,909- State Mental Health Grant Local Admin; \$71,015- State Mental Health Grant Special Projects; \$4,493,881- State Mental Health Grant A&D Residential Services; \$301,563- State Mental Health Grant Drug Residential Care; \$2,034,655- State Mental Health Grant A&D Continuum of Care Services; \$1,051,200- State Mental Health Grant A&D Residential Capacity Services; \$105,741- State Mental Health Grant Prevention Services: All Based on FY09-11 projected State Biennial Budget

\$156,383- Local 2145 Beer & Wine Tax Revenues

\$3,026,170- County General Fund

### Significant Program Changes

**Last year this program was:** #25080A, Adult Addictions Treatment Continuum

This program offer includes a 2% inflationary increase of \$ 52,629 over FY10 for the County General Fund portion of contracted client services. FY10 funding increase from State's Adopted budgeted vs Governor's proposed budget. Increase approved via budget modification.

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Gambling addiction treatment uses evidence-based practices in an outpatient setting to provide treatment to persons diagnosed with problem or pathological gambling. The county's community-based providers treat approximately 513 gamblers and their family members annually. Countywide data shows that problem gamblers and family members seeking treatment can access services in less than five days 99% of the time.

### Program Description

Multnomah County's Problem Gambling Services are guided by a public health approach that takes into consideration biological, behavioral, economic, cultural, and policy factors influencing gambling and health. Gambling treatment and prevention services incorporate prevention, harm reduction and multiple levels of treatment by placing emphasis on quality of life issues for the gambler, family members and communities. Based on community norms (3% of problem gamblers seek treatment), 436 adults can be expected to access treatment each year in Multnomah County. This year, 443 gamblers enrolled in treatment (102% of projection). As noted, family participation is important and approximately 60 family members enrolled in treatment as well.

Multnomah County has one of the highest rates per capita (18 years and older) of lottery sales statewide. Approximately 74% of the gambling treatment clients report video poker as their primary gambling activity. Problem gambling treatment services are closely aligned to the county's Basic Living Needs priority by promoting healthy behaviors. The treatment focus is on relieving initial client stress and crisis, supporting the client and family members in treatment and assisting the family to return to a level of healthy functioning. Problem gambling treatment assists the gambler and family in managing money/finances, rebuilding trust within the family, learning gambling prevention techniques, and maintaining recovery.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Gamblers and family members accessing treatment annually <sup>1</sup>	513	550	500	500
Outcome	Gambler successful completion rate <sup>2</sup>	34.0%	27.0%	32.0%	34.0%

### Performance Measure - Description

<sup>1</sup>'Gamblers and family members accessing treatment annually' means the number of problem and/or pathological gamblers completing enrollment and entering treatment annually.

<sup>2</sup> 'Successful completion rate' is defined as the gambling client having completed a minimum of 75% of the short-term treatment goals, completion of a continued wellness plan, and lack of engagement in problem gambling behaviors for at least 30 days prior to discharge.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A D 80 is Problem Gambling Prevention Services and Service Element A-D 81 is Outpatient Problem Gambling Treatment Services).

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$9,714	\$19,722	\$0	\$33,818
Contracts	\$0	\$855,000	\$0	\$780,000
Materials & Supplies	\$252	\$512	\$0	\$0
Internal Services	\$2,649	\$5,379	\$0	\$2,183
Total GF/non-GF:	<b>\$12,615</b>	<b>\$880,613</b>	<b>\$0</b>	<b>\$816,001</b>
Program Total:	<b>\$893,228</b>		<b>\$816,001</b>	
Program FTE	0.10	0.20	0.00	0.30
<b>Program Revenues</b>				
Intergovernmental	\$0	\$880,613	\$0	\$816,001
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$880,613</b>	<b>\$0</b>	<b>\$816,001</b>

### Explanation of Revenues

\$36,000 - State Mental Health Grant Local Admin; \$60,000- State Mental Health Grant Gambling Prevention; \$720,000- State Mental Health Grant Gambling Treatment Services: All Based on FY09-11 projected State Biennial Budget

### Significant Program Changes

**Last year this program was:** #25085, Addiction Services Gambling Treatment and Prevention

Last year this program was: #25085, Addiction Services Gambling Treatment and Prevention. Moved FTE from Administration # 25050 and utilizing grant funding to fund position. FY11 grant funding is expected to be reduced.

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The alcohol and drug prevention program provides an array of services for children and families at high risk for substance abuse, school failure and juvenile justice problems. Prevention services include structured after-school activities (homework assistance, tutoring and home visits), a parent-child readership program, and culturally-specific youth leadership activities. These programs promote school success, family bonding, improved parenting skills and youth life skills. The aim is to reduce youth substance abuse, school failure and juvenile crime. The program is projected to provide over 5,000 prevention service contacts to over 250 participants.

### Program Description

The structured after-school program for public housing residents is a long-standing collaboration with the Housing Authority of Portland (HAP), providing after-school clubs offering on-site homework help, socializing and skill building activities to 200 youth in public housing. The services at HAP housing sites also include tutoring, mentoring and family-support home visits. Most of the children served by the structured after-school program are ages 8-12.

In addition, two smaller culturally-specific programs are supported by this offer. An Asian teen leadership program provides youth leader community service projects. A Latino program runs a youth soccer team that encourages supportive parent involvement and engages team youth in pro-social activities and community projects. Both Asian and Latino programs offer activities ranging from regularly scheduled core group meetings of 10-12 youth and parents to larger one-time neighborhood events.

By directly addressing community risk factors, prevention reduces multiple problem behaviors and improves outcomes for children and families. This program strengthens partnerships with geographic coalitions and culturally-specific entities and uses natural helpers, volunteer organizations, professionals and cultural mentors to promote developmental assets and academic achievement.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Youth served at public housing sites <sup>1</sup>	258	400	200	200
Outcome	Core group <sup>2</sup> youth w/ improved behavior based on parent/teacher observation	91.0%	75.0%	75.0%	75.0%
Outcome	Core group youth w/ improved academic achievement	95.0%	75.0%	75.0%	75.0%

### Performance Measure - Description

<sup>1</sup>Public Housing measures are for the collaborative after-school program serving youth in public housing, including all after-school activities. Current year and next year targets were lowered to reflect cuts in staffing and service days resulting from the loss of a grant that previously supplemented these services.

<sup>2</sup>Intensive core group services will be provided to an average of 10 families at three sites. Outcomes of improved behavior (i.e. less disruptive, better attendance, fewer suspensions) and improved academic achievement are good predictors of reduced future substance abuse.

### Legal/Contractual Obligation

Contractual obligation: This program is funded with federal substance abuse prevention resources and state general funds through the State DHS Addictions and Mental Health Division (AMH) contract. Program planning is developed based on AMH requirements and submitted in the "Biennial Implementation Plan" in conformance with the local Community Comprehensive Plan (SB555) and any other State Mental Health Grant Award requirements. Because Multnomah County accepts the State Mental Health grant, we are obligated to spend funds in accordance with regulations regarding State Service Element A-D 70, Prevention Services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$0	\$319,259	\$0	\$194,259
Total GF/non-GF:	<b>\$0</b>	<b>\$319,259</b>	<b>\$0</b>	<b>\$194,259</b>
Program Total:	<b>\$319,259</b>		<b>\$194,259</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$319,259	\$0	\$194,259
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$319,259</b>	<b>\$0</b>	<b>\$194,259</b>

### Explanation of Revenues

\$194,259 State Mental Health Grant Prevention Services: Based on FY09-11 projected State Biennial Budget

### Significant Program Changes

**Last year this program was:** #25086, Addiction Services Alcohol and Drug Prevention  
FY10 funding decrease from State's Adopted budgeted vs Governor's proposed budget. Decrease approved via Budget Modification.

**Lead Agency:** County Human Services

**Program Contact:** Sandy Haffey

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Coordinated diversion includes three jail and/or hospital diversion programs for consumers with a serious mental illness. Three teams of mental health professionals work with the Community Court, Mental Health Court and Aid and Assist/Treat Until Fit programs. All three programs provide assertive, short term support for persons with serious mental illness, with the goal of connecting them with appropriate ongoing community treatment options. Staff working with the Community Court and Mental Health Court focus on jail diversion. Staff with the Aid and Assist/Treat Until Fit Program focus on avoiding or decreasing days of unnecessary psychiatric hospitalizations. In FY08-09 Community Court served 999 clients, Aid and Assist/Treat Until Fit served 195 clients, Mental Health Court opened 23 cases and served 19.

### Program Description

The three coordinated diversion programs target persons with serious mental illness who are at risk of either entering or having lengthy stays in jail or hospitals unless provided additional treatment, support, and resources. The Community Court Program addresses quality of life crimes with a focus on restorative justice. Clients are able to participate in a variety of social services as an alternative to jail or community service.

Mental Health Court provides time-limited intensive case management services to persons involved in the criminal justice system while connecting them to community treatment, housing, and financial and medical entitlements. Staff provide ongoing monitoring and support for persons enrolled in Mental Health Court. Staff initiated services to 23 in FY08-09.

The Aid and Assist/Treat Until Fit Program is a pilot project with Marion and Lane Counties to increase diversion from the criminal justice system for persons charged with misdemeanors and ordered to undergo evaluation/restoration at the State Hospital. Staff provide evaluation of mental status and basic needs, time-limited case management and coordination of treatment services, housing, financial and medical entitlements, and social services.

The three diversion programs address the needs of residents with a mental illness who can be diverted from jail and/or the State hospital and into community services. Initial case management and coordination protects the legal and civil rights of these individuals, ensures appropriateness of resources and decreases the unnecessary expense of time in jail or the State Hospital.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of participants in Community Court	999	1,050	1,200	1,200
Outcome	% of participants in good standing or have successfully completed	57.0%	55.0%	60.0%	60.0%
Output	# of participants in Aid and Assist/Treat Until Fit	195	180	190	195
Outcome	% of participants discharged from hospital/jail to community treatment	56.8%	40.0%	65.0%	70.0%

### Performance Measure - Description

<sup>1</sup> The outcomes measure staff effectiveness in diversion of clients from jail and hospital systems.

**Legal/Contractual Obligation**

No legal requirements

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$238,647	\$532,922	\$208,528	\$583,334
Contracts	\$0	\$0	\$0	\$0
Materials & Supplies	\$0	\$4,316	\$3,782	\$14,436
Internal Services	\$0	\$47,722	\$19,266	\$57,246
Total GF/non-GF:	<b>\$238,647</b>	<b>\$584,960</b>	<b>\$231,576</b>	<b>\$655,016</b>
Program Total:	<b>\$823,607</b>		<b>\$886,592</b>	
Program FTE	2.00	5.00	2.00	5.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$0	\$0	\$0
Intergovernmental	\$0	\$584,960	\$0	\$655,016
Other / Miscellaneous	\$0	\$0	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$584,960</b>	<b>\$0</b>	<b>\$655,016</b>

**Explanation of Revenues**

\$558,804 - State Mental Health Grant Non-Residential Adult: Based on FY09-11 projected State Biennial Budget

\$96,212 - State Mental Health Grant Local Admin

\$230,820 - County General Fund

**Significant Program Changes** **Significantly Changed****Last year this program was:** #25088A, Coordinated Diversion for Persons with Mental Illness

Last year, this program was: #25088A &amp; 25088B, Coordinated Diversion for Persons with Mental Illness. It included Mental Health Court, Community Court, Aid Assist/Treat Until Fit &amp; Critical Time Intervention. The Critical Time Intervention Program was cut last year.

This offer includes the loss of 1.0 FTR Mental Health Counselor and the addition, within the DCHS constraint target, of 1.0 FTE Diversion Program Manager to oversee the operations and development of the three programs.



**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Detoxification and Supportive Housing are two vital steps to working towards long-term recovery and stability. Detoxification, a medically monitored inpatient service, is the primary entrance point into addiction services for many severely addicted and low-income persons. There are approximately 2,500 admissions to detoxification annually with an average successful completion rate of 75%. Supportive Housing is available for homeless addicts who have completed detoxification and are continuing treatment. The 50 Supportive Housing units can serve approximately 150 clients annually. Benefiting from both clinical and housing support, clients move from active addiction, through treatment and into the recovery world; and from homelessness, through supportive housing and into permanent housing.

### Program Description

Alcohol and drug detoxification medically stabilizes a highly vulnerable and diverse client population. It prepares them for further alcohol/drug treatment and connects them to other services needed to resolve homelessness and other health issues. Supportive Housing greatly increases post-detoxification treatment retention rates and promotes recovery. After detoxification, Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Detoxification beds provide services 24 hours-a-day, 7 days-a-week. Clients receive prescribed medication to ease withdrawal symptoms and acupuncture to reduce physiological stress so they are more likely to complete the process. The program includes an integrated medical clinic with primary care and dual-diagnoses services. Detoxification is provided in a culturally competent manner that includes a variety of services: counseling and case management, physical and mental health care, housing resources (permanent housing, rent assistance, eviction prevention), food and transportation, and economic independence (job training, employment referrals, benefits eligibility screening).

After detoxification, homeless clients who are entering outpatient treatment are referred to supportive housing services. Supportive Housing (\$16 per unit per day) is an evidence based, low cost resource when compared to inpatient hospitalization (\$700+ per day) or adult residential treatment (\$106 per day) and we can provide less restrictive/expensive outpatient treatment while the individual is in Supportive Housing. Each of the fifty supportive housing units can house two to three clients per year (3-4 month stays). Clients are helped by Housing Support Specialists to access key services that promote health, recovery, stability and self-sufficiency.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of admissions annually to detoxification <sup>1</sup>	2,537	2,530	2,642	2,201
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	91.0%	91.0%	91.0%	91.0%

### Performance Measure - Description

<sup>1</sup> A person who completes the enrollment process and enters detoxification is an admission. There can be multiple admissions for a person annually.

<sup>2</sup> Average length-of-stay in supportive housing is 14-15 weeks. Supportive housing increases post-detoxification treatment retention rates, so it is important that the supportive housing units are utilized to their fullest extent. Our outcome measures the annual utilization rate.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$682,376	\$1,878,359	\$1,037,166	\$1,878,359
Total GF/non-GF:	<b>\$682,376</b>	<b>\$1,878,359</b>	<b>\$1,037,166</b>	<b>\$1,878,359</b>
Program Total:	<b>\$2,560,735</b>		<b>\$2,915,525</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,878,359	\$0	\$1,878,359
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,878,359</b>	<b>\$0</b>	<b>\$1,878,359</b>

### Explanation of Revenues

\$1,459,442 State Mental Health Grant Continuum of Care Services: Based on FY09-11 projected State Biennial Budget  
\$418,917- Local 2145 Beer & Wine Tax Revenues  
\$1,037,166 County General Fund

### Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25090, Addictions Detoxification and Post-Detoxification Housing

This program offer includes a 2% inflationary increase of \$ 15,238 over FY10 for the County General Fund portion of contracted client services.

**Program # 25091A - Sobering**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Sobering program provides a safe, secure holding environment for persons publicly intoxicated due to alcohol or drug abuse. As these individuals regain their functionality, staff encourages them to seek further care. The Sobering program has more than 11,000 annual admissions.

**Program Description**

The Sobering program is a multi-jurisdictionally funded community resource that operates 24 hours per day, seven days per week. The program provides special emphasis on ethnic minorities, homeless people, and women. Staff persons are appropriately licensed and credentialed (such as Emergency Medical Technicians) and are knowledgeable about acute alcohol/drug intoxication and emergency first aid techniques. The Sobering program serves more than 11,000 clients annually. The average length of stay is 5.5 hours.

The Sobering program serves a public safety function by providing a medically monitored environment in which these individuals become responsive to their surroundings while they are protected from abuse and neglect. This program reduces the use of critical and finite police, fire and emergency services. It saves the City police approximately 900 bookings (and associated costs) per month. The Sobering program includes the CHIERS (Central City Concern Hooper Inebriate Emergency Response Service) mobile outreach van, funded by the City of Portland, to transport intoxicated persons to the program.

The Sobering program also provides a behavioral health function by providing a point of intervention for these publicly intoxicated persons. Before the individual is released, staff gives them information about chemical dependency, alcohol and drug treatment options, and access to additional health care.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total Admissions	10,948	11,000	10,706	11,000
Outcome	Percentage of clients that successfully discharge <sup>1</sup>	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

<sup>1</sup> A successful discharge includes: a) no deaths in sobering (the program had one death three years ago); and b) clients are cognizant of surroundings and no longer in immediate danger of harm to self or others.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$468,812	\$0	\$477,722	\$0
Total GF/non-GF:	<b>\$468,812</b>	<b>\$0</b>	<b>\$477,722</b>	<b>\$0</b>
Program Total:	<b>\$468,812</b>		<b>\$477,722</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$477,722 County General Fund

**Significant Program Changes**

Last year this program was: #25091, Sobering

This program offer includes a 2% inflationary increase of \$ 9,367 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Backfill State/Federal/Grant

### Executive Summary

The Sobering program provides a safe, secure holding environment for persons publicly intoxicated due to alcohol or drug abuse. As these individuals regain their functionality, staff encourages them to seek further care. The Sobering program has more than 11,000 annual admissions.

This scale-up reflects last year's County/City agreement to assist the Sobering program by helping to replace a \$300,000 annual contribution from local hospitals. The hospital contributions are ending in fiscal year 2009-2010. The \$150,000 represents the County's portion of that agreement.

### Program Description

The Sobering program is a multi-jurisdictionally funded community resource that operates 24 hours per day, seven days per week. The program provides special emphasis on ethnic minorities, homeless people, and women. Staff persons are appropriately licensed and credentialed (such as Emergency Medical Technicians) and are knowledgeable about acute alcohol/drug intoxication and emergency first aid techniques. The Sobering program serves more than 11,000 clients annually. The average length of stay is 5.5 hours.

The Sobering program serves a public safety function by providing a medically monitored environment in which these individuals become responsive to their surroundings while they are protected from abuse and neglect. This program reduces the use of critical and finite police, fire and emergency services. It saves the City police approximately 900 bookings (and associated costs) per month. The Sobering program includes the CHIERS (Central City Concern Hooper Inebriate Emergency Response Service) mobile outreach van, funded by the City of Portland, to transport intoxicated persons to the program.

The Sobering program also provides a behavioral health function by providing a point of intervention for these publicly intoxicated persons. Before the individual is released, staff gives them information about chemical dependency, alcohol and drug treatment options, and access to additional health care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total admissions	10,948	10,000	10,706	11,000
Outcome	Percentage of clients that successfully discharge <sup>1</sup>	100	100	100	100

### Performance Measure - Description

These program measures are for the entire Sobering program and duplicate the measures in the base program offer, 25091A. It is not possible to break out in any meaningful way the particular admissions or outcomes purchased by this offer alone.

<sup>1</sup> A successful discharge includes: a) no deaths in sobering (the program had one death three years ago); and b) clients are cognizant of surroundings and no longer in immediate danger of harm to self or others.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$0	\$0	\$150,000	\$0
Total GF/non-GF:	\$0	\$0	\$150,000	\$0
Program Total:	\$0		\$150,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

Funded with \$150,000 of one-time-only general funds.

The majority of funding for the Sobering program is contained in program offer 25091A.

Significant Program Changes

✔ Significantly Changed

Last year this program was: #25091, Sobering

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program provides a continuum of youth outpatient and residential addictions treatment as well as two culturally-specific intensive outpatient service packages for high-risk Latino youth and African-American youth and their families; and Alcohol and Drug Free housing resources for families in which the adult parent(s) are in early addiction recovery. In 2010-11, 250 youth will be provided outpatient treatment services, about 40 youth will receive residential treatment, and a minimum of 100 families will receive housing supports in recovery-focused housing communities.

### Program Description

Youth alcohol and drug treatment focuses on the developmental issues of youth up to age 18, as well as older transition-age adolescents, to intervene in the immediate and long-term consequences of substance abuse. Our youth treatment continuum funds both outpatient and residential services, and reflects collaboration with schools and juvenile justice services. Our youth outpatient services include "generic" youth slots and two culturally-specific intensive service packages for Latino and African-American youth. Most youth who fall within our targeted population (youth through age 18 whose families' income is less than 200% of Federal Poverty Level) will qualify for the Oregon Health Plan (OHP, Medicaid), but since they may not be insured at time of treatment enrollment, our slots allow for immediate treatment access and serve as bridge funding until OHP enrollment is complete. Our slots also provide for developmentally-appropriate treatment for transition age older adolescents (19 or older) who are uninsured by OHP.

Some youth need a higher level of care, and youth residential treatment addresses the needs of some of the most vulnerable and at-risk County adolescents, a subset of whom have significant mental health issues. Youth residential treatment is funded by a mix of County General Fund and state funds: the County sends County General dollars to the State Addictions and Mental Health Division, where dollars are Medicaid-matched (more than doubling the funds) and contracted via the State back to a Multnomah County provider agency.

The Family Alcohol and Drug-Free Network (FAN), a collaboration of community providers, includes 88 units of long-term transitional housing for families who are rebuilding their lives following the devastation of their addictions. These housing communities provide a clean, safe and sober living environment in which parents can raise their children and in which new recovery principles are put into practice. This offer funds an array of services aligned for FAN families -- including rent assistance, family mentoring, and housing case management -- to support recovery and build family stability, economic self-sufficiency, healthy community involvement and success in permanent housing.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Youth assessed and entered into treatment <sup>1</sup>	450	450	300	250
Outcome	Percentage of youth successfully completing treatment <sup>2</sup>	75.0%	75.0%	75.0%	75.0%
Output	Number of households served in housing services	100	100	100	100
Outcome	Percentage of families that move into long term permanent housing	52.0%	53.0%	53.0%	53.0%

### Performance Measure - Description

<sup>1</sup> Reduced numbers of youth in outpatient treatment reflects a change in how our County funds are used: Due to the recent greatly increased enrollment of youth into the Oregon Health Plan, fewer County slots are needed, and those slots are now used principally as bridge funding until OHP enrollment is complete, with a secondary focus on use of slots to provide developmentally-appropriate treatment for transition age older adolescents (19 or older) who are uninsured by OHP.

<sup>2</sup> Successful completion includes attaining treatment plan goals and maintaining sobriety.

## Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 60 is Special Projects and Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$403,060	\$510,984	\$272,941	\$863,552
Total GF/non-GF:	<b>\$403,060</b>	<b>\$510,984</b>	<b>\$272,941</b>	<b>\$863,552</b>
Program Total:	<b>\$914,044</b>		<b>\$1,136,493</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$510,984	\$0	\$863,552
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$510,984</b>	<b>\$0</b>	<b>\$863,552</b>

## Explanation of Revenues

\$308,627 - State Mental Health Grant A&D Special Projects; \$530,225 State Mental Health Grant A&D Continuum of Care:  
All Based on FY09-11 projected State Biennial Budget  
\$24,700- Local 2145 Beer & Wine Tax Revenues  
\$272,941 County General Fund

## Significant Program Changes

**Last year this program was:** #25094A, Family and Youth Addictions Treatment Continuum

Last year this program was offered under #25094A, #25094B, and #25094C "Family and Youth Addictions Treatment Continuum" as we were responding to uncertain State funding by scaling offers. As noted above, we are reducing the number of youth slots being requested as a result of greatly increased OHP Plus enrollment among Multnomah County youth.

This program offer includes a 2% inflationary increase of \$ 7,925 over FY10 for the County General Fund portion of contracted client services.



**Program # 25096 - Sexual Offense & Abuse Prevention**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Godwin Nwerem

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Backfill State/Federal/Grant

**Executive Summary**

This program provides treatment services for children and youth who are exhibiting significant sexual reactivity and/or who are sexually predatory. There were 100 youth served by this program in FY09. 98% of youth served do not re-offend within six months after treatment in this program. Medically necessary services are funded through Multnomah County Verity Mental Health Outpatient Services for children while non-medicaid reimbursable services are funded through county general fund contained in this offer. Empirical evidence shows that this model reduces recidivism and helps the youth acquire prosocial skills needed for successful transition to productive adult life style.

**Program Description**

Sexual Offense and Abuse Prevention Program/Responsible Adolescent and Parent Program (SOAP/RAPP) is a blended funding arrangement between the Department of Community Justice and the Department of County Human Services to provide treatment services. This program provides outpatient clinical treatment services to children who are at risk for sexual offense and to adolescents who are sex offenders, approximately 100 total served. It is designed to prevent them from requiring a more intensive and costly level of care which includes residential treatment or incarceration. Without treatment, there is a high risk that the individuals served by this program will offend or re-offend and establish a pattern of long-term behaviors that put the community and themselves at risk. There is an intensive family education and group support component to the full service array of treatment for the child and family to decrease the likelihood of the child re-offending. The goal of the program is to maintain the child in the least restrictive, most clinically and culturally appropriate level of care, preferably in the community. Many of these individuals have co-occurring disorders which further complicate treatment if not served in such a specialized treatment program.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total individuals served <sup>1</sup>	100	132	97	100
Outcome	Percent of youths that do not re-offend within six months after treatment <sup>2</sup>	100.0%	98.0%	100.0%	100.0%

**Performance Measure - Description**

<sup>1</sup> Number of unduplicated children and youth who received at least one Sexual Offense and Abuse Prevention treatment service during the measurement period.

<sup>2</sup> The difference between the number of discharges from the program and the number of children and youth who sexually reoffend divided by the number of discharges from the program for the measurement period.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$100,000	\$250,000	\$200,000	\$0
Total GF/non-GF:	<b>\$100,000</b>	<b>\$250,000</b>	<b>\$200,000</b>	<b>\$0</b>
Program Total:	<b>\$350,000</b>		<b>\$200,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$250,000	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$200,000 - County General Fund

**Significant Program Changes**

✔ Significantly Changed

**Last year this program was:** #25096, Sexual Offense and Abuse Prevention

Since last year, this program funding sources has been clarified to comply with medicaid rule on reimburseable services provided to this population.

**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Family Involvement Team (FIT) for Recovery program is a team effort among alcohol and drug treatment providers, social service agencies, and the Family Dependency Court to connect parents with an allegation of child abuse or neglect with drugs and/or alcohol involved to appropriate treatment. Last year, the FIT for Recovery program connected 887 clients entering Family Dependency Court with addictions treatment as expeditiously as possible and provided enhanced services to keep them in treatment.

### Program Description

The FIT for Recovery core team, housed at the Family Dependency Court, works with Child Welfare parents and their children until they enter addictions treatment. Additional team members located at the five treatment providers begin working with the parent and their children once the parent and/or the parent and child enter treatment. Staff at the treatment agencies provide the family with support services including case management, family therapy, and wrap around services to assist the client to remain successful in treatment. A five-year, federally funded grant enables FIT for Recovery to 1) expand the number of Child Welfare clients that can access alcohol and drug treatment, and 2) provide enhanced and previously unavailable aftercare and parent mentoring services to those clients. By accepting services, parents are demonstrating to the state Department of Human Services (DHS) Child Welfare that they are recognizing that drugs or alcohol are affecting their abilities to parent effectively and are willing to take steps to become effective parents. FIT partners include: DHS Child Welfare, Family Dependency Court, Lifeworks NW, Cascadia, NARA, Central City Concern, Volunteers of America and CODA.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Percent of eligible parents accepting FIT services	59.5%	59.0%	58.0%	60.0%
Outcome	Average time from screening to treatment	26	28	24	24

### Performance Measure - Description

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, it is obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 60 is Special Projects and Service Element A-D 66 is Continuum of Care Services).

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$0	\$87,966	\$0	\$25,000
Contracts	\$0	\$829,886	\$0	\$1,663,496
Materials & Supplies	\$0	\$140	\$0	\$0
Internal Services	\$0	\$43,922	\$0	\$35,675
Total GF/non-GF:	<b>\$0</b>	<b>\$961,914</b>	<b>\$0</b>	<b>\$1,724,171</b>
Program Total:	<b>\$961,914</b>		<b>\$1,724,171</b>	
Program FTE	0.00	0.60	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$21,493	\$0	\$18,285	\$0
Intergovernmental	\$0	\$961,914	\$0	\$1,724,171
<b>Total Revenue:</b>	<b>\$21,493</b>	<b>\$961,914</b>	<b>\$18,285</b>	<b>\$1,724,171</b>

### Explanation of Revenues

\$272,436 - State Mental Health Grant A&D Special Projects; \$ 723,560 State Mental Health Grant A&D Continuum of Care:  
All Based on FY09-11 projected State Biennial Budget  
\$728,175 Child & Family ACYF Federal Grant based on year 3/4 NGA

### Significant Program Changes

**Last year this program was:** #25098A, Enhanced Family Involvement Team  
FY10 funding increase from State's Adopted budgeted vs Governor's proposed budget. Increase approved via budget modification.

### Division Overview

The mission of the Community Services Division (CSD) is to align services in order to create systems of support that impact poverty and increase academic success. Core services within the Division are identified in three areas: Energy; Homelessness and Housing; and Anti-Poverty/Prosperity.

A variety of services and supports addressing a range of prevention, intervention, and treatment are made available to the more than 55,000 households in the community that meet federal poverty guidelines. This is achieved through a mix of contracted services provided by non-profit social service organizations, direct services provided by county staff, and involvement with community initiatives. The division is the Community Action Agency for Multnomah County.

Forty-five percent of Portland households pay more than 30% for housing (cost burdened) vs. the national average of 36%. Workers with a full-time job at minimum wage cannot afford apartments of any size at fair market rate in the metro area without being cost burdened (more than 30% of their income).

This is the environment in which the division conducts its work. Current need for services far outstrips available resources, with no end in sight. The situation calls for new strategic thinking, leadership, action and investment - particularly in the area of economic development related to human capital.

The Division's work over the past year - Energy Paperless System, Homeless Benefits Recovery Project, 30 Families in 30 Days, and continuing collaboration at the local, regional, and state levels shows the new approaches to serve the current and future needs of those most affected by the recession.

#### Community Services Administration

- 25118 Administration

#### Energy

- 25119 Energy Services

#### Anti-Poverty/Prosperity

- 25123A-B Youth Gang Prevention
- 25127 Court Care
- 25137 Native American Child Development
- 25139 Anti-Poverty Services

#### Homeless and Housing

- 25114A-B Bridges to Housing
- 25115 Homeless Benefits Recovery
- 25120 Homeless Family Shelter System
- 25124 East County Homeless Outreach
- 25133 Housing Stabilization
- 25134 Family Warming Center
- 25136A Homeless Youth System
- 25138 Runaway Youth
- 25140 Housing

### Significant Changes

The following describes the significant budget changes that impacted the division.

In order to address the growing need for assistance with basic needs, seek greater efficiency and effectiveness of current investments, and work to build the systems of care that lead to greater prosperity for the county's low-income households, a number of changes to the division's program offers were made. These include:

1. Housing and case management services for teen parents and their children that will double current system capacity;
2. Capacity to respond to increased requests for technical assistance from faith based communities seeking to serve the homeless;
3. Multi-family housing weatherization projects funded by federal stimulus - doubling both staff and number of projects; and,
4. A pilot prosperity project funded by Federal stimulus that leverages county contracted funds at a ratio of 2:1 through collaboration with WorkSystems, Inc., Portland Housing Bureau and the Housing Authority of Portland.

### Measuring Success

Despite challenges related to the measurement of social service impact in general, and the chronic lack of resources necessary to evaluate the impact of services due to on-going reductions in administration, the division has worked to align measures across programs and jurisdictional partners in order to assess impact of housing investments. All division housing programs track the rate of safe, stable housing retention at six, nine, and 12 months after program exit - regardless of population or service system. This is a good measure of initial stability for households. Average retention rate over 80%.

The Division also tracks increases in household income over the course of service involvement for those receiving case management services - a good measure of household gains made on the path to self-sufficiency.

Finally, through participation with initiatives such as the Greater Portland Indicators Project and Oregon Thrives, the Division seeks to create regional measures of prosperity that provide the Board of Commissioners and other elected officials with meaningful data that guides and focuses current and future investments towards activity that creates long-term prosperity for the community.

# County Human Services

## Community Services

fy2011 adopted budget

### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25114A	Bridges to Housing	\$239,516	\$0	\$239,516	0.00
25114B	Bridges to Housing - Scale	228,000	0	228,000	0.00
25115	Homeless Benefit Recovery Project	401,265	0	401,265	0.00
25118	Community Services Administration	809,572	0	809,572	6.50
25119	Energy Services	331,985	19,745,933	20,077,918	20.46
25120	Homeless Family Shelter System	295,000	0	295,000	0.00
25123A	Youth Gang Prevention	334,401	51,923	386,324	1.00
25123B	Youth Gang Prevention - Scale	937,878	0	937,878	0.00
25124	East County Homeless Outreach	75,000	0	75,000	0.00
25127	Court Care	28,673	28,110	56,783	0.00
25133	Housing Stabilization for Vulnerable Populations	1,503,738	626,561	2,130,299	4.00
25134	Family Warming Center	153,000	0	153,000	0.00
25136A	Homeless Youth System	2,142,163	1,104,048	3,246,211	1.33
25137	Native American Child Development Services	38,604	0	38,604	0.00
25138	Runaway Youth Services	744,054	189,475	933,529	0.17
25139	Anti-Poverty Services	572,370	2,888,006	3,460,376	1.00
25140	Housing	156,884	512,016	668,900	1.54
<b>Total</b>		<b>\$8,922,103</b>	<b>\$25,146,072</b>	<b>\$34,138,175</b>	<b>36.00</b>

(this page intentionally left blank)



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:** 25114B

**Program Characteristics:**

### Executive Summary

Bridges to Housing would help at least 70% of families served (28) maintain their housing six months after exit, thus reducing their reliance on County services.

Bridges to Housing (B2H) provides 40, high resource using homeless families with intensive case management, permanently affordable housing and childcare resources. High resource using homeless families have no permanent place to live, have at least one child under the age of 18, use a large amount of county-funded services, interact with several service systems at the same time, and have serious barriers that cause them to be excluded from housing. The 139 Bridges to Housing units all were developed with funding from the city of Portland and state of Oregon, and have permanent rent assistance provided by the Housing Authority of Portland. County funds provide support services to families living in these units.

### Program Description

Bridges to Housing (B2H) was developed to solve a problem facing a challenging group of homeless families served in our County. While most homeless families experience homelessness due to short-term economic reasons, a subset of families have such serious problems that they cannot be housed without permanent rent assistance and a period of intense services. B2H case managers work with no more than fifteen families at a time to move them into a B2H housing unit, prevent them from losing their housing, prevent the children from being removed and help them obtain the services needed to attain their goals.

County funds serve 40 B2H families currently in housing, and leverage funds from city of Portland and state of Oregon to build and maintain the housing; \$6,000 per family per year in rent assistance funds, \$4,500 per family per year in childcare funds, and \$958,000 to date in matching funds from private foundations. B2H uses a holistic approach focused on coordinated service addressing multiple and complex needs. A typical B2H family is a single mother with one or more children, often fleeing domestic violence, fighting with mental health or addictions issues, and struggling to provide for the basic needs of her child(ren). Most B2H families have poor rental histories, very low income, minor criminal convictions and bad credit, making it impossible for them to lease apartments without B2H. While B2H families use services from multiple county systems, their inability to access housing causes those services to be ineffective and poorly coordinated. B2H provides housing units to this very difficult to house population, and case managers coordinate services across service systems, increasing their efficiency and effectiveness.

B2H families are expected to become successful renters, be less likely to have their children removed and placed in foster care, more likely to have their children succeed in school, less likely to have episodes of domestic violence and less likely to be involved in the criminal justice system.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of high resource using homeless families served over 2 years <sup>1</sup>	124	40	40	40
Outcome	% of families served that remain in permanent housing 6 months after exit <sup>2</sup>	0.0%	70.0%	70.0%	70.0%

### Performance Measure - Description

<sup>1</sup> The way that we have calculated the number of families served has changed- for the purpose of the program offer, the number of households served has been adjusted to reflect just those funded by the offer. We have 139 total units, this offer will support 40 of those units.

<sup>2</sup>Permanent housing is long-term community-based housing, with attached appropriate support services where an individual can stay without time limit.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$234,820	\$0	\$239,516	\$0
Total GF/non-GF:	<b>\$234,820</b>	<b>\$0</b>	<b>\$239,516</b>	<b>\$0</b>
Program Total:	<b>\$234,820</b>		<b>\$239,516</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$239,516 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25114A, Bridges to Housing

There are no significant changes to this program offer.

This program offer includes a 2% inflationary increase of \$ 4,696 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 25114A

**Program Contact:** Mary Li

**Program Characteristics:**

**Executive Summary**

This offer funds an additional 40 high resource using homeless families currently receiving services through Bridges to Housing (B2H). County funds will provide the full package of B2H support services - intensive case management, permanently affordable housing, and childcare resources to 80 of a total 139 households currently enrolled. Services are provided for the balance of households through on-going utilization of initial funding, leverage of City of Portland funds, and the B2H Collaboration fundraising efforts.

This is the second of three anticipated requests to build permanent, on-going funding for B2H following the initial, one-time-only investment of \$1 million dollars of County General Funds (CGF).

The total 139 B2H housing units all were developed with funding from the City of Portland and State of Oregon, and have permanent rent assistance provided by the Housing Authority of Portland. Loss of these units to a less challenged population will represent a significant negative impact to the City of Portland/County 10 Year Plan to End Homelessness efforts, for homeless families.

At least 70% (28) of families served will maintain their housing, thus reducing their reliance on County services.

**Program Description**

Bridges to Housing (B2H) was developed to solve a problem facing a challenging group of homeless families served in our County. While most homeless families experience homelessness due to short-term economic reasons, a subset of families have such serious problems that they cannot be housed without permanent rent assistance and a period of intense services.

The County made an initial investment of one-time-only funds to develop and implement the original program. Having achieved documented success with a very challenging population, the work to build permanent funding and on-going funding is necessary in order to not lose precious family size units to households less challenged than current B2H families.

A typical B2H family is a single mother with one or more children, often fleeing domestic violence, fighting with mental health or addictions issues, and struggling to provide for the basic needs of her children. Most B2H families have poor rental histories, very low income, minor criminal convictions and bad credit. These are families who would be unable to be housed through any other means, leaving them at the mercy of predatory landlords, doubled up and migratory, or in their cars or camping - with resultant negative impacts to both adults and their children.

\$958,000 to date in matching funds has been raised for the four County collaborative project. The County's share of these funds continues to play an important role in overall program funding, but is inadequate to meet the need of all 139 units once initial funds have been exhausted.

B2H families are expected to become successful renters, be less likely to have their children removed and placed in foster care, more likely to have their children succeed in school, less likely to have episodes of domestic violence, and less likely to be involved in the criminal justice system.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	High resource using homeless families served over two years	0	0	0	40
Outcome	% of families served that remain in permanent housing six months after exit <sup>1</sup>	0.0%	0.0%	0.0%	70.0%

**Performance Measure - Description**

Permanent housing is long-term community-based housing, with attached appropriate support services, where an individual can stay without time limit.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$0	\$0	\$228,000	\$0
Total GF/non-GF:	\$0	\$0	\$228,000	\$0
Program Total:	\$0		\$228,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

Funded with \$228,000 of one-time-only general funds.

Significant Program Changes

Last year this program was:

**Program # 25115 - Homeless Benefit Recovery Project**

**Version 3/05/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Homeless Benefits Recovery Project (HBR) utilizes a proven program model to assist 120 chronically homeless individuals with mental illness, addictions and disabilities in accessing federal benefits, such as Social Security Disability Insurance (SSI/SSDI), and services to which they are entitled but have been unable to receive because their disabilities prevent them from successful navigation of the appeals system. Locally, only 11% of those eligible receive benefits.

HBR is a tested, evidence based program that anticipates a 50-70% success rate in gaining benefits for eligible individuals.

**Program Description**

Homeless Benefits Recovery (HBR) provides benefits eligibility determination, systems advocacy and short-term case management to approximately 120 individuals annually who are Multnomah Treatment Fund eligible. The Multnomah Treatment Fund is a County General Fund (CGF) program serving a limited number of individuals with mental illness without insurance or benefits.

HBR services include: eligibility screening, appeals process advocacy, case management, and medical and other documentation to individuals evaluated to be potentially eligible while the appeals process continues. In the first year of service, approximately 90 Multnomah Treatment Fund eligible clients will be served.

Studies estimate that as many as 60% of those living on the streets are living with disabilities. Often, the nature of those disabilities makes it impossible for an individual to successfully complete the benefits eligibility process. Nationally, 60% of all applications for assistance are denied at first request. The average wait time between first application and receiving assistance is 30 months. Without those benefits, individuals are either without services and utilizing expensive, locally funded safety net services – jail, hospital/medical care, other safety net services – or have their treatment paid for with scarce local community (non-federal) funds. Providing this unreimbursed care creates significant impact on the County's General Fund.

HBR provides intervention and coordination of services, and assures care for vulnerable members of the community. HBR targets those who would potentially not be on the County's caseload if they had access to the benefits for which they are eligible, or those currently on the County's caseload and whose cost of care is not reimbursed. Local estimates identify 39% of the chronic homeless population is eligible for SSI/SSDI as a result of mental illness and 46% eligible as a result of their physical health. Benefit recovery efforts are a key strategy of the local 10 Year Plan to End Homelessness.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of chronic homeless individuals with disabilities served <sup>1</sup>	0	120	60	120
Outcome	% of individuals served who receive benefits	0.0%	0.0%	40.0%	50.0%

**Performance Measure - Description**

<sup>1</sup> Services began January 2010.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$393,397	\$0	\$401,265	\$0
Total GF/non-GF:	<b>\$393,397</b>	<b>\$0</b>	<b>\$401,265</b>	<b>\$0</b>
Program Total:	<b>\$393,397</b>		<b>\$401,265</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$401,265 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25115A, Homeless Benefits Recovery Pilot Project

There are no significant changes to this program offer.

This program offer includes a 2% inflationary increase of \$ 7,868 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Community Services Division Administration (CSA) ensures that all requirements for divisional operation are maintained to county, state, and federal standards.

CSA is responsible for providing, contracting for, and/or coordinating the County's investments in three core service/policy areas, Energy, Homelessness and Housing, and Anti-Poverty/Prosperity.

Division supported services are provided to more than 26,000 unduplicated Multnomah County citizens annually. The division also functions as the county's legislatively mandated Community Action Office.

### Program Description

Managing the work of 34 FTE, CSA effectively administers a package of direct services, contract services and community initiatives representing more than \$34 million dollars investment of county, state, and federal funds.

As the county's Community Action Office, CSA provides leadership for anti-poverty and prosperity efforts, including the Poverty Elimination Framework, the 10 Year Plan to End Homelessness, the Greater Portland Indicator Project, and Oregon Thrives. CSA collaborates in community efforts to create prosperity for all county citizens through key partnerships with local, regional, and statewide public, private and community stakeholders including consumer, business, faith, jurisdictional and others.

CSA provides leadership through formal and informal provider relationships; staffing of and participation on oversight committees such as the Homeless Youth Oversight and the Short-Term Rent Assistance System; and collaborative work on local, regional and statewide initiatives such as Oregon Thrives and the Greater Portland Indicator Project.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	% of staff attending at least one skill bldg/pro development training session <sup>1</sup>	100.0%	100.0%	100.0%	0.0%
Outcome	% of stakeholders expressing satisfaction with services received	75.0%	80.0%	51.4%	60.0%
Output	% of staff attending at least 10 hours of skill bldg/pro development training	0.0%	0.0%	0.0%	70.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> This output measure is being discontinued in favor of a new measure, which identifies the percentage of staff attending at least 10 hours of training annually.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$565,407	\$116,933	\$653,867	\$0
Contracts	\$3,000	\$0	\$3,000	\$0
Materials & Supplies	\$26,023	\$3,037	\$24,359	\$0
Internal Services	\$93,655	\$31,891	\$128,346	\$0
Total GF/non-GF:	<b>\$688,085</b>	<b>\$151,861</b>	<b>\$809,572</b>	<b>\$0</b>
Program Total:	<b>\$839,946</b>		<b>\$809,572</b>	
Program FTE	5.50	0.60	6.50	0.00
<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$151,861	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$151,861</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$809,572 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25118, Community Services Division Administration

1.0 FTE Program Development Specialist Senior position has been added in FY11 to this program offer. The addition of this position is necessary due to the increased levels of state and federal funding over the past several years that has created a divisional budget of significant size and scope. With this growth comes the need for increased divisional capacity for program and grant reporting, and to provide for a liaison function between the division and DCHS Business Services in the areas of finance, budget and contracts. This position was created through re-purposing of an existing position from Energy Services (25119) and is funded within the current County General Fund constraint.

No net increase to the overall division FTE or County General Fund is created as a result of this change.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Energy Services (ES) ensures that approximately 23,000 fixed and low-income households have access to safe and sufficient energy in their homes. In FY07-08, this program offered weatherization (WX) repair and replacement to approximately 788 households, and direct utility payments to approximately 22,000 households, along with energy education, case management, and other services to help households manage and pay for their energy costs. Services prevent utility shutoff for vulnerable households. Services are primarily tax and rate payer funded by the state and federal government.

According to an Oregon Housing and Community Services (OHCS) study, services create \$1.78 of economic activity within the county for every \$1 invested in WX.

### Program Description

Weatherization repair and replacement provides energy use audits, weatherization, furnace repairs and replacement, and appliance replacement to fixed and low-income households; county staff and vendors provide services. In FY 08-09, more than 86,000 households were income eligible for service; of those, 788 were served.

Energy payment assistance works through nine community agencies to make utility payments for fixed and low-income households. In FY 08-09 more than 86,000 households were income eligible for service; of those, 22,000 were served. Services are part of the SUN Service System (SUNSS), a countywide integrated and coordinated system of care for school-age youth and their families.

Energy Education helps fixed and low-income households understand their energy use and provides the tools - such as light bulbs, window stripping and showerheads - necessary to better control energy expenses. All households receiving Energy Services receive education on how to reduce energy costs. Case management supports self-sufficiency for up to 90 households annually.

Energy services contribute to reducing the number of households living in poverty by increasing household self-sufficiency and improving local economic conditions through energy conservation. Energy costs disproportionately affect low-income households. The Department of Energy (DOE) estimates low-income households pay an average of 12.6% of their income for energy expenses compared with 2.7% for the average household. In some fixed income households, energy costs can reach as high as 35%. DOE estimates WX households save an average \$274.00 annually in energy costs.

WX provides jobs for local contractors and revenue for businesses who supply materials, and indirectly creates another 1.25 jobs in Oregon for every administrative position funded. National research indicates that WX has multiple "non-energy related" benefits including affordable housing preservation, regional energy conservation, long-term home improvement, safer housing conditions and improved physical health. Locally, Oak Ridge National Laboratory found that WX increases household property values, maintains affordable housing and improves the environment through reduced consumption of fossil fuels.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of Households Served <sup>1</sup>	22,129	18,000	22,000	18,000
Outcome	% of households w/shutoff notices served that avoid shutoff	100.0%	100.0%	100.0%	100.0%
Output	# of affordable housing units maintained for 10 years <sup>2</sup>	300	300	600	600

### Performance Measure - Description

<sup>1</sup> Significant increase in units is result of federal stimulus funding.

<sup>2</sup> Weatherization of multi-family buildings requires landlord commitment to a minimum 10 years of affordability. It's one of the best ways to preserve and improve the quality of current affordable housing stock.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$25,087	\$1,441,224	\$0	\$1,646,869
Contracts	\$6,200	\$2,782,222	\$6,200	\$1,643,019
Materials & Supplies	\$44,740	\$14,327,188	\$35,475	\$15,524,051
Internal Services	\$233,114	\$1,003,214	\$290,310	\$931,994
Total GF/non-GF:	<b>\$309,141</b>	<b>\$19,553,848</b>	<b>\$331,985</b>	<b>\$19,745,933</b>
Program Total:	<b>\$19,862,989</b>		<b>\$20,077,918</b>	
Program FTE	0.67	19.19	0.00	20.46
<b>Program Revenues</b>				
Indirect for dep't Admin	\$522,363	\$0	\$534,911	\$0
Intergovernmental	\$0	\$19,255,356	\$0	\$19,345,933
Other / Miscellaneous	\$0	\$298,139	\$0	\$400,000
<b>Total Revenue:</b>	<b>\$522,363</b>	<b>\$19,553,495</b>	<b>\$534,911</b>	<b>\$19,745,933</b>

**Explanation of Revenues**

\$9,563,974 LIEAP Leverage, Energy, and Weatherization Grant Revenue

\$949,838 DOE Weatherization Grant Revenue

\$4,224,916 OEAP-Energy Grant Revenue

\$1,277,864 ECHO Grant Revenue

\$3,146,841 DOE American Recovery Act Grant Revenue

All the above amounts are based on the NOA's

\$152,500 PDX Water/Sewer Revenue FY11 projection is based on anticipated continuation of current FY10 funding level

\$30,000 Energy Show Rebates The program is expecting a slight increase in rebate income for FY11 plus a \$20K rollover from FY10 generated rebates

\$400,000 County Weatherization Rebates FY11 projection is based on anticipated same level of rebate income as FY10 with \$5K rollover from FY10

\$331,985 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25119, Energy Services

Federal stimulus funding has more than doubled the size of the Weatherization program - including staff positions and number of homes to be served.

Increased staffing 1.0 FTE PDS Senior to oversee Energy Assistance provider payment process.

**Program # 25120 - Homeless Family Shelter System**

**Version 6/29/2010 s**

**Lead Agency:** County Human Services  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 25133, 25134

**Program Contact:** Mary Li

**Program Characteristics:**

**Executive Summary**

Funding will provide access to year round shelter for homeless families with children. Building on the existing homeless families' winter shelter system, in operation for 5-6 months out of the year, capacity to house 30 families and their children will be made available for the rest of the year.

Services will provide shelter to 30 families with children and 15 households with permanent housing placement, with 85% of those placed remaining in housing at six months after exit.

**Program Description**

The FY 08-09 One Night Shelter Count documents at least 600 families sleeping on the streets, in cars or living in substandard situations every night in the county. Winter Shelter services are limited and run from November through March providing 12 county funded shelter slots to homeless families. The remainder of the year shelter capacity is so reduced as to be functionally unavailable as county funds only support shelter during the winter.

Leveraging new faith based partnerships put into service for the first time in FY 09-10, it appears possible to create shelter capacity, as well as support services and housing placement year round. This expansion represents the proven success of the homeless families' winter shelter system of care, the system's faith based partnerships and successful housing placement outcomes.

The county's system of care for homeless families during the winter includes: emergency information and referral, the Family Warming Center, night shelter, day shelter, support services, case management and housing placement. It represents a service system that is comprehensive in nature, but only available 5-6 months out of the year and severely under capacity to respond to community need.

By utilizing this service system as the base to build year round capacity, the investment of general funds is leveraged and maximized. Night and day shelter, support services, case management, and housing placement will all become available year round for less cost than if funded separately.

It is also anticipated that by providing services year round, potential need during the winter may be reduced as families won't have to wait until the winter in order to leave the streets or other unsafe or inappropriate shelter situations.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of homeless families with children served	0	0	0	30
Outcome	% of families served that remain in permanent housing 6 months after exit <sup>1</sup>	0.0%	0.0%	0.0%	85.0%

**Performance Measure - Description**

<sup>1</sup> Permanent housing is long-term community-based housing, with attached appropriate support services, where an individual can stay without time limit.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$0	\$0	\$280,000	\$0
Materials & Supplies	\$0	\$0	\$15,000	\$0
Total GF/non-GF:	\$0	\$0	\$295,000	\$0
Program Total:	\$0		\$295,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$295,000 County General Fund

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Youth Gang Prevention (YGP) supports community based, culturally, and gender specific prevention services to young people and their families at highest risk of gang membership, or who are already involved with gangs but have not yet entered the juvenile justice system. Services are subject to the provisions of a Strategic Plan for a Comprehensive and Coordinated Response to Youth and Gang Violence, which is currently in process by Multnomah County's Local Public Safety Coordinating Council (LPSCC).

Approximately 100 young people and their families will be served. It is expected that 90% of these youth served increase their academic achievement, and avoid or reduce subsequent juvenile justice system involvement.

### Program Description

The refocused Youth Gang Prevention will serve approximately 100 African-American, Asian, Native American, Latino, female youth, and their families, annually. Young people served will have one or more of the following risk factors: gang and criminally involved family and friends; early onset of delinquent behaviors; Alcohol, Tobacco, & Other Drugs (ATOD) use; mental illness issues; academic failure; and, lack of social and economic opportunities.

In response to the LPSCC systems redesign, a procurement process will be conducted to select community based providers able to deliver a specific intensive family support and intervention program model. The identified program model is a proven best practice successful in intervening with these young people and families.

By utilizing a specific, proven best practice model that provides intensive family focused support and intervention, services will be delivered that are culturally and gender specific, as well as tailored to individual client needs. Services will include: ATOD and mental health assessment and referral to treatment; school retrieval and retention; pro-social skill building activities; employment readiness and placement; basic needs; case management; linkage to support services; and, flexible client service funds. Monthly system/joint case staffing meetings ensure seamless referrals between the juvenile justice system and community based providers.

Intensive family support and intervention has been proven effective in successfully reducing or eliminating gang related behaviors. OSU research indicates that 20% of youth offenders commit 80% of juvenile offenses, and that most of this 20% are "early bloomers" who committed crimes before the age of 15.

YGP prioritizes this exact population in relationship to gang involvement, youth violence and juvenile delinquency.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of youth served	617	580	580	100
Outcome	% of youth served who avoid/reduce juvenile justice system involvement	97.0%	70.0%	97.0%	90.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$90,916	\$0	\$96,498	\$0
Contracts	\$233,426	\$64,000	\$232,785	\$51,923
Materials & Supplies	\$2,431	\$0	\$3,049	\$0
Internal Services	\$1,405	\$0	\$2,069	\$0
Total GF/non-GF:	<b>\$328,178</b>	<b>\$64,000</b>	<b>\$334,401</b>	<b>\$51,923</b>
Program Total:	<b>\$392,178</b>		<b>\$386,324</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$64,000	\$0	\$51,923
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$64,000</b>	<b>\$0</b>	<b>\$51,923</b>

**Explanation of Revenues**

\$51,923 OCCF Youth Investment Fed  
 \$334,401- County General Fund

**Significant Program Changes**
 **Significantly Changed**

**Last year this program was:** #25123, Youth Gang Prevention

Reduction in County General Fund of approximately \$1 million dollars has significantly reduced the number of youth to be served. Program model will also change in FY 10-11 due to system redesign planning process conducted by LPSCC.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer restores the Youth Gang Prevention (YGP) program to current FY 09-10 service levels. Funds will provide an additional 500 young people and their families with community based, culturally, and gender specific services.

Utilizing an identified program model that is proven best practice, intensive family support and intervention will be provided to young people and their families at highest risk of gang membership, or who are already involved with gangs but have not yet entered the juvenile justice system.

It is expected that 90% of these young people will increase their academic achievement, and avoid or reduce subsequent juvenile justice system involvement.

### Program Description

The refocused Youth Gang Prevention (YGP) program will serve approximately 500 African-American, Asian, Native American, and Latino, female youth, and their families, annually. Young people served will have one or more of the following risk factors: gang and criminally involved family and friends; early onset of delinquent behaviors; Alcohol, Tobacco, & Other Drugs (ATOD) use; mental illness issues; academic failure; and, lack of social, and economic opportunities.

By utilizing a specific, proven best practice model that provides intensive family focused support and intervention, services will be delivered that are culturally and gender specific, as well as tailored to individual client needs. Services will include: ATOD and mental health assessment and referral to treatment; school retrieval and retention; pro-social skill building activities; employment readiness and placement; basic needs; case management; linkage to support services; and, flexible client service funds. Monthly system/joint case staffing meetings ensure seamless referrals between the juvenile justice system and community based providers.

Intensive family support and intervention has been proven effective in successfully reducing or eliminating gang related behaviors. OSU research indicates that 20% of youth offenders commit 80% of juvenile offenses, and that most of this 20% are "early bloomers" who committed crimes before the age of 15.

YGP prioritizes this exact population in relationship to gang involvement, youth violence, and juvenile delinquency.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of youth served	0	0	0	500
Outcome	% of youth served who avoid/reduce juvenile justice system involvement	0.0%	0.0%	0.0%	90.0%

### Performance Measure - Description

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$919,937	\$0	\$937,878	\$0
Total GF/non-GF:	\$919,937	\$0	\$937,878	\$0
Program Total:	\$919,937		\$937,878	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

Funded with \$937,878 of one-time-only general funds.

Significant Program Changes

Last year this program was:



**Program # 25124 - East County Homeless Outreach**

**Version 3/05/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Innovative/New Program

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Funding will support on-going assessment of, and interim response to the outreach needs of homeless populations currently camping in East County cities. \$75,000 of one-time-only funding will leverage existing outreach staffing capacity funded by the city of Portland and provide flexible rent assistance and other support services.

As poverty continues to move east, homelessness and resultant camping is moving east as well. The Sheriff and East County cities' law enforcement agencies have conducted increased interdiction and suppression activities with local area illegal camping in the past year. When these activities occur, there is no outreach mechanism available to assist individuals in mitigating the impact of these events.

Funding will allow for sheriff and other law enforcement personnel to contact trained outreach staff prior to and during their actions, as well as the ability to refer specific individuals to assistance during the regular course of their duties.

Approximately 60 individuals or households will be served annually.

**Program Description**

Using the existing successful collaboration between law enforcement and homeless outreach providers in the City of Portland as the model, the program will create capacity for response to the outreach needs of the Sheriff and East County cities' law enforcement agencies during FY 10-11.

When Portland Police schedule a sweep of a camp site, they post notices and contact city funded outreach workers to work with residents prior to the action. By balancing the need to enforce anti-camping laws with the reality of the lack of housing for the homeless, a humane approach is offered for those directly impacted.

Using existing staff capacity and providing flexible rent assistance funds, the county will be able to assess the size and scope necessary for appropriate on-going system capacity, as well as work to create a collaborative funding plan with participating jurisdictions if on-going capacity is needed.

Since funding will be used for flexible rent assistance and other client support services, not staffing, funds will not be used if not needed for individual clients.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of homeless households contacted	0	0	0	60
Outcome	# of households placed in housing	0	0	0	20

**Performance Measure - Description**

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Contracts	\$0	\$0	\$75,000	\$0
Total GF/non-GF:	\$0	\$0	\$75,000	\$0
Program Total:	\$0		\$75,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$75,000 - County General Fund

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Court Care provides on-site childcare for approximately 900 children annually whose parents are involved with legal proceedings at the Multnomah County Courthouse.

This program eases the burden on parents with young children, allowing them better access to court proceedings and supporting their ability to focus on those proceedings without worry about their children's safety.

Court Care is a collaboration among DCHS, the Oregon Judicial Department and the Multnomah County Bar Association.

### Program Description

Court Care services are jointly provided with the state of Oregon Department of Justice. Through contract with a non-profit agency, a full-service child care facility provides developmentally appropriate care, including food for participating children and screening for potential referrals to on-going service by certified childcare providers.

An advisory committee under the auspices of the Multnomah County Bar Association raises service delivery funds, oversees operations and evaluates program effectiveness. Court Care services eliminate barriers to a parent/caregiver's ability to fully participate in legal proceedings created by lack of childcare and protect children from inappropriate exposure to potentially traumatic adult situations that can be a part of the legal process.

In particular, services are critical for women seeking restraining orders against their batterers in order to increase both their safety and the safety of their children while they go through the legal process. Addressing these issues supports a more fully functioning and effective legal system which plays a critical role in citizens' perceptions of safety.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of children served	906	800	800	800
Outcome	% of parents expressing satisfaction with services received	100.0%	95.0%	95.0%	95.0%

### Performance Measure - Description

Court Care services are by definition temporary. Effectiveness is primarily defined by the existence and delivery of the services themselves. Every child served avoids inappropriate exposure to legal situations and increases the ability of their parent/care giver to participate in their own legal proceedings.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$28,110	\$26,496	\$28,673	\$28,110
Total GF/non-GF:	<b>\$28,110</b>	<b>\$26,496</b>	<b>\$28,673</b>	<b>\$28,110</b>
Program Total:	<b>\$54,606</b>		<b>\$56,783</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$26,496	\$0	\$28,110
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$26,496</b>	<b>\$0</b>	<b>\$28,110</b>

**Explanation of Revenues**

\$28,110 Oregon Judicial Dept The Intergovernmental Agreement allows for County to match funding up to \$28,110  
 \$28,673 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25127, Court Care

This program offer includes a 2% inflationary increase of \$ 563 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Housing stabilization services provide shelter, rent assistance, teen parent housing, homeless children's education, technical assistance to faith based efforts and workforce support to more than 2,000 households a year. About 1,200 families receive shelter or housing assistance annually. These services help our most vulnerable homeless and marginally housed families with children find shelter and support, working with them on the path to self-sufficiency.

Approximately 80% of those placed in housing remain housed six months after exit.

### Program Description

The county invests in a number of housing and support services programs within DCHS and other departments. Services have been targeted to specific populations, exist within different departments and divisions, and for the most part have operated in isolation from each other. No regular mechanism existed prior to the establishment of the county's Housing Team - representing all county departments and divisions - to determine opportunities for collaboration or potential efficiencies across programs, or to share best practice, results and innovation.

An example of the results of these efforts is the Homeless Benefits Recovery Project. Work also continues to place existing services into a continuum using the Poverty Elimination Framework and the 10 Year Plan to End Homelessness.

Programs included in this offer: homeless families' winter shelter, rent assistance, teen parent transitional housing, children living in homeless families' educational support and alternative education, technical assistance to faith based organizations working with the homeless and workforce flexible assistance funds.

Winter shelter and the unified rent assistance system provide a means by which households can meet immediate survival needs. Transitional housing for teen parents provides stabilization and the opportunity to address barriers to long-term self sufficiency. For children living in homeless families, educational support and alternative education services ensure that to the greatest extent possible these children do not lose critical steps toward academic success and long term self-sufficiency. The base of the County's homeless families' shelter rests on faith based organization efforts. As these communities have stepped forward in increasing number to assistance vulnerable households in the community, the need to offer technical assistance to their efforts has increased as well. Flexible client support funds help individuals seeking to gain living wage employment more fully utilize federal and state funds training and placement programs.

Finally, DCHS' work in partnership with other jurisdictions involved in the social housing service system has resulted in the creation of 1200 units of permanent supportive housing for individual households and 200 units for families.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of households receiving shelter or housing <sup>1</sup>	1,180	1,200	1,200	1,200
Outcome	% of households served that remain in permanent housing six months after exit <sup>2</sup>	93.0%	80.0%	80.0%	90.0%

### Performance Measure - Description

<sup>1</sup> These households are a subset of the approximately 2,000 families receiving services.

<sup>2</sup> % of households still housed six months after exit is an average of all programs' measures. Permanent housing is long-term community-based housing, with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$267,964	\$37,465	\$352,331	\$52,932
Contracts	\$753,071	\$585,542	\$1,068,032	\$548,661
Materials & Supplies	\$4,765	\$6,608	\$12,196	\$0
Internal Services	\$44,973	\$32,441	\$71,179	\$24,968
Total GF/non-GF:	<b>\$1,070,773</b>	<b>\$662,056</b>	<b>\$1,503,738</b>	<b>\$626,561</b>
Program Total:	<b>\$1,732,829</b>		<b>\$2,130,299</b>	
Program FTE	2.60	0.40	3.46	0.54
<b>Program Revenues</b>				
Indirect for dep't Admin	\$16,628	\$0	\$15,897	\$0
Intergovernmental	\$0	\$662,056	\$0	\$626,561
<b>Total Revenue:</b>	<b>\$16,628</b>	<b>\$662,056</b>	<b>\$15,897</b>	<b>\$626,561</b>

**Explanation of Revenues**

\$278,736 HUD Home Safe

\$326,566 OHCSH HSP,LIRHF,SHAP,EHA

\$21,259 PDX General Fund

For all Above FY11 projection is based on anticipated continuation of current FY10 funding level

\$1,503,738 County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25133, Housing Stabilization for Vulnerable Populations

In response to significant increase in the number of teen parent households seeking housing across all service systems, capacity for an additional 20 teen parent households to be served will be created in FY 10-11.

In response to increased requests for assistance by faith based organizations to serve homeless populations, one FTE staff position will be created in FY 10-11.

Both of these actions are funded within target. No net increase to overall division County General Fund as a result of these changes.

This program offer includes a 2% inflationary increase of \$ 14,961 over FY10 for the County General Fund portion of contracted client services.

**Program # 25134 - Family Warming Center**

**Version 3/05/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Family Warming Center provides basic life and safety services for homeless families with children during the winter months, November through March. Following a successful pilot during FY 08-09, establishment of on-going service capacity for homeless families has become an important component of a fully functioning safety net.

In FY 08-09, more than 2,700 nights of safety were provided to households as a safe, warm alternative to the streets, cars and camping. In FY 09-10, no homeless family was turned away from the Warming Center back into the winter weather.

**Program Description**

The Family Warming Center is one of two sites - one designated for single adults and the other for families with children. The two sites represent a cross jurisdictional collaboration to keep homeless people safe and out of the cold during the winter months from November through March.

The purpose of the Family Warming Center is safety for children and their parents/caregivers who would otherwise find themselves sleeping on the streets, in cars and/or places not meant for human habitation. Based upon the FY 08-09 One Night Shelter and Street Count, 600 families are living on the street or in other substandard situations on any given night.

Year-round shelter capacity is 21 slots for families. Winter shelter capacity provides an additional 12 slots. During severe weather events, there is no additional capacity for families. At maximum system capacity, there is a significant shortage of both beds and access to them in a variety of locations, particularly in East County and N/NE Portland, to meet the need. Ideally, every family would have access to shelter (while working towards permanent housing) when they need it. The reality is that almost none of them do.

The Family Warming Center provides minimum safety from the weather in order to avoid serious health consequences and/or death from exposure. Homeless families with children need shelter from the weather every night during winter. Current funding is inadequate to meet that need. The Family Warming Center seeks to fill that gap by building upon the successful experience operating a pilot project last winter.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of bed nights provided, November- March	2,765	6,600	5,610	6,000
Outcome		0	0	0	0

**Performance Measure - Description**

The Family Warming Center is by definition temporary. Effectiveness is defined by the existence and delivery of the services themselves. The ultimate outcome for this service is that no one dies or experiences serious health consequences due to exposure to winter weather, but this is not measurable.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$150,000	\$0	\$153,000	\$0
Total GF/non-GF:	<b>\$150,000</b>	<b>\$0</b>	<b>\$153,000</b>	<b>\$0</b>
Program Total:	<b>\$150,000</b>		<b>\$153,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$153,000 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25134, Family Warming Center

This program offer includes a 2% inflationary increase of \$ 3,000 over FY10 for the County General Fund portion of contracted client services.



**Program # 25136A - Homeless Youth System**

**Version 4/21/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Homeless Youth System (HYS) is a highly collaborative system comprised of four non-profit agencies that provide a continuum of screening, crisis intervention, safety services, shelter, assertive engagement, housing, education, employment and health services to approximately 1,000 homeless youth up to age 25 annually.

This system is integrated with the public safety system and is a jointly funded collaboration among DCHS, DCJ, the city of Portland, Portland Police Bureau, Citizens Crime Commission, Portland Business Alliance, the State, Outside In, New Avenues for Youth, Janus Youth Programs, Native American Youth & Family Center and the community.

Services ensure that up to 75% of those served exit to safe stable housing and that 75% of those remain in safe, stable housing for at least six months post exit.

**Program Description**

The HYS provides late stage intervention for 1,000 homeless youth annually through: 24/7 crisis and safety services; shelter; assertive engagement and linkage to long-term community supports; transitional and permanent housing; education and employment services; and alcohol, tobacco and other drugs, mental and other health services.

System accountability is managed through the Homeless Youth Oversight Committee (HYOC), a citizen body appointed by the Chair with representation that includes the Citizen's Crime Commission, Portland Business Alliance, DHS, Juvenile Rights Project, city of Portland, Health and Community Justice Departments, service providers and homeless youth.

The system continues to engage in the redesign process for anticipated full implementation in 2011.

Homeless youth visibility has a direct impact on citizen perception of safety. Homeless youth are particularly vulnerable to crime, to be preyed upon, or to victimize others as they attempt to survive on the streets. Through joint planning and regular cross jurisdictional meetings, services are exceptionally integrated with public safety and other service systems, with significant community oversight.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of homeless youth served	994	1,000	1,000	1,000
Outcome	% of youth served that remain in permanent housing six months after exit <sup>1</sup>	75.0%	75.0%	75.0%	75.0%

**Performance Measure - Description**

<sup>1</sup> Permanent housing is long-term community-based housing, with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$75,460	\$0	\$121,170	\$456
Contracts	\$2,017,200	\$1,091,525	\$1,997,544	\$1,094,645
Materials & Supplies	\$2,030	\$0	\$4,054	\$0
Internal Services	\$12,591	\$9,403	\$19,395	\$8,947
Total GF/non-GF:	<b>\$2,107,281</b>	<b>\$1,100,928</b>	<b>\$2,142,163</b>	<b>\$1,104,048</b>
Program Total:	<b>\$3,208,209</b>		<b>\$3,246,211</b>	
Program FTE	0.83	0.00	1.33	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$4,818	\$0	\$5,697	\$0
Intergovernmental	\$0	\$1,100,928	\$0	\$1,104,048
<b>Total Revenue:</b>	<b>\$4,818</b>	<b>\$1,100,928</b>	<b>\$5,697</b>	<b>\$1,104,048</b>

**Explanation of Revenues**

\$200,578 HUD Horizons/Pathways

\$903,470 PDX General Fund

FY11 projections are based on anticipated continuation of current FY10 funding level

\$2,142,163 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25136, Homeless Youth System

This program offer includes a 2% inflationary increase of \$ 40,344 over FY10 for the County General Fund portion of contracted client services.

**Program # 25137 - Native American Child Development Services**

**Version 3/05/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Native American Child Development Services (NACDS) provide services for 40 families with young children (birth through age 5) to promote positive parenting, healthy child development and school readiness.

Last year, 80% of children served were within a normal developmental stage at the end of the program.

**Program Description**

NA Child Development Services (NACDS) provide an evidence based curriculum to approximately 40 families per year. Services include a range of activities designed to promote parent competence and healthy child development to ensure children are prepared to learn.

Specific services include: age appropriate parent child play groups, parenting education and support services, developmental screening, immunization status checks and follow up, culturally specific child care for parents in residential treatment, and access to other social and health services.

The Ages and Stages Child Development Screening Tool is used to determine developmental stage. Those not meeting the relevant stage for their age are referred for early childhood intervention services. Services are developmental and culturally specific.

By providing opportunities for parents to interact with their children in mentored settings with child development specialists, they are able to learn healthy and age appropriate parenting skills, manage challenging behavior and learn ways to support their children to promote school readiness.

These opportunities are critical for families struggling to meet basic needs and who may not have other such opportunities; the majority of families who participated in the program in FY 08-09 were at or below the federal poverty level.

The Oregon State University Family Study Center's 1998 research shows a strong correlation among kindergarten readiness and a child's immunization status, age-appropriate development, and a parent/caregiver's ability to provide consistent parenting. School readiness correlates to early academic performance, an indicator of future school success and school completion impacts adult success in life.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of families served	63	40	40	50
Outcome	% of children screened who are at appropriate developmental stage at exit	100.0%	80.0%	80.0%	80.0%

**Performance Measure - Description**

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$37,847	\$0	\$38,604	\$0
Total GF/non-GF:	<b>\$37,847</b>	<b>\$0</b>	<b>\$38,604</b>	<b>\$0</b>
Program Total:	<b>\$37,847</b>		<b>\$38,604</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$38,604 County General Fund

**Significant Program Changes**

**Last year this program was:** #25137, Native American Child Development Services

This program offer includes a 2% inflationary increase of \$ 757 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Runaway Youth Services provide 24/7 Reception Center, crisis line, shelter, support services, family counseling and reunification services, and gender specific transitional housing services for approximately 2,250 youth ages 12-17 who have run away, as well as their families. This program is a collaboration among DCHS, DCJ and DHS.

About 85% of those served return home or to another stable living environment at exit.

### Program Description

Runaway Youth Services include: Reception Center - a collaboration among law enforcement, DCJ and DHS to directly receive from officers, youth found to have committed minor status offenses such as curfew violation, truancy, etc. as an alternative to detention. The Reception Center is co-located with runaway crisis response services, creating a countywide "child receiving center" for youth up to age 18.

Crisis Line - 24/7 youth and family help line that serves as central access point for services. Telephone intervention and face-to-face, drop-in intervention also is available. This is the only community based resource for runaway youth and families in the county.

Emergency Shelter - shelter and emergency assistance in 11-bed, co-ed group home with services focused on family reunification. Youth receive food, safety, medical care, transportation and case management services. Shelter services operate within a 72 hour intervention timeline. Research shows that the longer a young person is separated from family (where no abuse is present), the potential for eventual reunification decreases and further penetration into the child welfare system increases.

Support Services/Case Management - intake, assessment, individual service plans targeting family reunification, alcohol, tobacco and other drugs, and mental health counseling, and family mediation. Gender Specific Transitional Housing - two beds for girls in a group home setting. Research shows that a single gender environment results in better self-sufficiency outcomes for young women.

Runaway Youth Services successfully impact detention reform efforts and reduce the number of children entering the child welfare system. County investment in Runaway Youth Services through DCHS is leveraged by investments from law enforcement, the juvenile justice system and DHS. When families are able to appropriately raise their children at home, community resources are not depleted.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of youth and families receiving intervention & services	1,025	2,250	2,250	2,250
Outcome	% of youth served who return home or exit to other stable housing <sup>1</sup>	94.0%	85.0%	85.0%	85.0%

### Performance Measure - Description

<sup>1</sup> Stable housing typically includes DHS custody which could include foster or group home placements, but most youth are reunited with family.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$15,456	\$0	\$16,405	\$0
Contracts	\$709,247	\$189,476	\$723,432	\$189,475
Materials & Supplies	\$376	\$0	\$518	\$0
Internal Services	\$2,399	\$0	\$3,699	\$0
Total GF/non-GF:	<b>\$727,478</b>	<b>\$189,476</b>	<b>\$744,054</b>	<b>\$189,475</b>
Program Total:	<b>\$916,954</b>		<b>\$933,529</b>	
Program FTE	0.17	0.00	0.17	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$189,476	\$0	\$189,475
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$189,476</b>	<b>\$0</b>	<b>\$189,475</b>

**Explanation of Revenues**

\$189,475 OCCF Youth Investment-Fed FY11 projection is based upon current biennial award from the State which is split evenly between the 2010-2011 fiscal years  
 \$744,054 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25138, Runaway Youth Services

This program offer includes a 2% inflationary increase of \$ 14,185 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Anti-Poverty Services (APS) form the basis of a system of care designed to assist homeless and low-income households to become self-sufficient. Four core services – Basic Needs, Anti-Poverty Education and Support, Housing, and System Collaboration were provided in FY 08-09 to 1,099 households and 3,793 individuals. Of those, 2155 were children. Assistance ranges in both length of service – immediate, short, and long-term - and in intensity provided.

For those receiving housing services, approximately 74% remain housed six months after exit.

### Program Description

Anti-Poverty Services (APS) comprise four core services provided to approximately 1,000 households annually.

APS are part of the SUN Service System (SUNSS), a countywide integrated and coordinated system of care for school age youth and their families. Services assist households seeking services and provide them with or make connections to meet basic needs as they relate to food, housing, parenting and school success.

Basic Needs - shelter, food, energy, transportation, and clothing.

Anti-Poverty Education and Support - case management services delivered through a collaborative, one-on-one relationship. Case managers engage in a variety of activities to support households reaching identified goals and program outcomes. Jointly, a plan is built to achieve self-sufficiency by addressing existing barriers such as addiction, mental illness, un/underemployment, unstable housing, etc... Skill building provides households and individuals with skills such as financial management, asset building, vocational education and training.

Housing - housing and supportive services that range from readiness to rent, housing identification and rent assistance.

System Collaboration - working with the County, the SUN Service System school-based services providers, community based providers, and other stakeholders, APS leverage funder investments to maximize resources, coordinate and link services to create efficiencies and improve outcomes, and ensure that quality and accountability is maintained throughout the system.

In FY 08-09, 72% of the households served were at or below the Federal Poverty Level and 52% were headed by a single parent (48% were single female parents). 56% of the adults in households served identify themselves as ethnic minorities. By utilizing a multi-intervention approach targeted to a mix of needs, households become and remain stably housed.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of households to receive case management	1,099	951	951	950
Outcome	% of households served that remain housed six months after exit <sup>1</sup>	89.0%	70.0%	70.0%	85.0%

### Performance Measure - Description

<sup>1</sup>Permanent housing is long-term community-based housing, with attached appropriate support services where an individual can stay without time limit.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$38,801	\$54,681	\$39,403	\$57,093
Contracts	\$498,110	\$3,603,862	\$507,973	\$2,705,628
Materials & Supplies	\$2,436	\$0	\$2,979	\$70
Internal Services	\$14,990	\$184,794	\$22,015	\$125,215
Total GF/non-GF:	<b>\$554,337</b>	<b>\$3,843,337</b>	<b>\$572,370</b>	<b>\$2,888,006</b>
Program Total:	<b>\$4,397,674</b>		<b>\$3,460,376</b>	
Program FTE	0.42	0.58	0.41	0.59
<b>Program Revenues</b>				
Indirect for dep't Admin	\$94,715	\$0	\$79,739	\$0
Intergovernmental	\$0	\$3,843,337	\$0	\$2,888,006
<b>Total Revenue:</b>	<b>\$94,715</b>	<b>\$3,843,337</b>	<b>\$79,739</b>	<b>\$2,888,006</b>

**Explanation of Revenues**

\$1,150,995 HUD Family Futures - FY11 projection is based on anticipated continuation of current FY10 funding level  
 \$1,387,011 OHCSDB - CSDB,HSP,EHA - FY11 projection is based on anticipated continuation of current FY10 funding level, and on an anticipated decrease in funding for CSBG during FY11 fiscal year  
 \$350,000 American Recovery Package - Funding ends June 30, 2010; based upon current spending rates, we are anticipating a \$350,000 carryover to FY11  
 \$572,370 County General Fund

**Significant Program Changes** **Significantly Changed**

**Last year this program was:** #25139, Anti-Poverty Services

In FY 09-10, federal stimulus funds in the Community Services Block Grant were added to this program offer. A new collaboration among the county, WorkSystems, Inc., and the Portland Housing Bureau created Action for Prosperity (AFP), a one-time-only project serving approximately 300 households.

This program offer includes a 2% inflationary increase of \$ 9,863 over FY10 for the County General Fund portion of contracted client services.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Housing administers public resources to expand affordable housing and infrastructure in low and moderate income communities through the federal Community Development Block Grant (CDBG), the Affordable Housing Development Program (AHDP), and the home improvement loan program.

It is a collaboration among DCHS, the cities of Gresham, Wood Village, Fairview, Troutdale, Maywood Park, Portland, and the community.

The program preserves approximately 50 housing units, and will create approximately three affordable housing units next year.

### Program Description

Using a regional collaborative approach and an advisory board comprised of citizens living in East County cities outside of Portland, administers Community Development Block Grant funds targeted to neighborhood revitalization, public services and housing rehabilitation in East County.

The Affordable Housing Development Program (AHDP) which deeds county foreclosed properties to non-profit community development corporations for affordable housing development manages an ongoing portfolio of approximately 450 units for program compliance and real estate transactions.

A no cost home improvement loan program for fixed and low-income homeowners is maintained on behalf of the Portland Development Commission.

Federal and state funds improve the livability of existing low and moderate income housing and neighborhoods. Annually, 54% of funding for the homeless is directed to shelters and transitional housing, while only 12% supports permanent housing. Studies conducted for the 10 Year Plan to End Homelessness make it clear that, without abandoning people in need of immediate temporary housing, the County must devote greater resources to long-term solutions. Housing programs are designed to make investments in alignment with this policy direction.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of public works projects completed	1	2	2	2
Outcome	# of affordable housing units preserved <sup>1</sup>	50	50	50	50
Outcome	# of affordable housing units created	6	6	3	3

### Performance Measure - Description

<sup>1</sup> Preservation refers to units that are currently used for affordable housing purposes but are at risk of conversion to market rate housing, displacing low and fixed income residents.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$106,513	\$38,850	\$116,919	\$43,703
Contracts	\$0	\$658,524	\$0	\$451,275
Materials & Supplies	\$0	\$0	\$4,633	\$0
Internal Services	\$22,936	\$15,548	\$35,332	\$17,038
Total GF/non-GF:	<b>\$129,449</b>	<b>\$712,922</b>	<b>\$156,884</b>	<b>\$512,016</b>
Program Total:	<b>\$842,371</b>		<b>\$668,900</b>	
Program FTE	1.12	0.42	1.17	0.37
<b>Program Revenues</b>				
Indirect for dep't Admin	\$7,969	\$0	\$10,848	\$0
Intergovernmental	\$0	\$299,415	\$0	\$386,767
Other / Miscellaneous	\$0	\$413,507	\$0	\$125,249
<b>Total Revenue:</b>	<b>\$7,969</b>	<b>\$712,922</b>	<b>\$10,848</b>	<b>\$512,016</b>

**Explanation of Revenues**

\$386,767 Multnomah County HUD CDBG -FY11 projection is based information we have from State.

\$125,249 Loan Repays

\$156,884 County General Fund

**Significant Program Changes**

Last year this program was: #25140, Housing

FY10's budget included one time only Strategic Investment Fund (SIP) revenue of \$288,258 which is no longer available for this program.

### Division Overview

The SUN Service System Division has 3 principal areas of oversight. First, contracting for services that promote academic success and promote family self sufficiency through the SUN Service System (SUNSS). Second, program delivery and service coordination at the Ortiz Center. Third, management of data collection, reporting and evaluation activities.

As a service delivery system, the SUN Service System contracts for a continuum of school-based and community sited services that support student success and family self-sufficiency. Services include 58 SUN Community Schools, youth case management, early childhood supports and anti-poverty/prosperity services for families. An important emphasis in the SUNSS is on partnership development and maintenance. Administrative staff engage in these activities in order to align services and strengthen the system. Staffing for the SUN Service System Coordinating Council (and workgroups), the Education Cabinet (and workgroups) and four key program delivery areas are examples of these efforts. The Ortiz Center is a critical gateway into an array of services for Multnomah County's Latino community. Staff both coordinate resources and services on site, provide intensive case management for families and triage hundreds of requests for assistance. Finally, data collection, technical assistance, reporting and program evaluation functions are implemented across both the SUNSS and the Community Services divisions.

Programs of the SUN Service System Division served more than 86,000 duplicated individuals in FY 2009, ranging from 14,773 youth who engaged in educational support and enrichment activities in SUN Community Schools to more than 59,000 individuals who received one-time-only energy assistance payments. Sixty-seven percent of individuals served through division programs identified being from a culturally specific community, while 71% of the students participating in services were receiving free or reduced lunch.

#### SUN Service System Division Administration

- 25143 Administration

#### Ortiz Center

- 25156A Bienestar Social Services

#### SUN Service System

- 25145 SUN Community Schools
- 25147 Child & Family Hunger Relief
- 25149 Social & Support Services for Education Success
- 25151 Parent Child Development Services
- 25154 Alcohol, Tobacco & Other Drug Services
- 25155 Services for Sexual Minority Youth

### Significant Changes

The following describes the significant budget changes that impacted the division. More information can be found in the program offers.

Several changes within the SUN Service System Division are proposed for FY 2011. An additional 0.50 FTE Family Intervention Specialist has been added to the Ortiz Center (25156A). This additional service capacity restores a reduction made in the 2005 fiscal year.

The Division has one new program. The Food Security Project is an effort to provide hot meals to students attending SUN Community Schools on days when school is not in session - every day in the summer and identified days when school is closed. This program is a one-time-only request for funding to establish the food delivery infrastructure at sites. This investment will leverage nearly \$300,000 in federal matching funds from school districts.

### Measuring Success

Success in the SUN Service System Division's programs are measured in several ways. Demographic, service delivery and outcome data are collected for all individuals participating in programs. Following are examples.

1. Academic, attendance and development outcomes are measured for youth who participate in SUN Community Schools (25145) and the Social and Support Services for Educational Success (25149); outcomes are reported on 7,477 youths who attended regularly; 74% increased state reading benchmark scores; and they had a 93% attendance rate. Academic and attendance data comes directly from the school districts. Extensive teacher and student surveys provide insights on youth asset development.

2. Children participating in the Parent Child Development Services program (25151) are monitored for immunization rates and age-appropriate development. Both of these indicators are shown to be critical indicators for school readiness; Ninety-eight percent were up to date with immunizations at exit, for last year.

3. For families participating in rent assistance and case management supports (25139), housing stability is reported at exit and at a six month follow-up interval. Ninety-five percent of families remained in permanent housing at the follow-up interval.

### Division by Program

The following table shows the programs that make up the division for FY 2011.

Prog #	Program Name	FY 2011 General Fund	Other Funds	Total Cost	Total FTE
25143	SUN Service System Administration	\$953,721	\$0	\$953,721	7.37
25145	SUN Community Schools	2,957,668	602,993	3,560,661	2.75
25147	Child and Family Hunger Relief	186,043	0	186,043	0.50
25149	Social and Support Services for Education Success	1,915,056	322,831	2,237,887	1.00
25151	Parent Child Development Services	1,301,274	152,353	1,453,627	1.00
25154	Alcohol, Tobacco and Other Drug Services	203,000	0	203,000	0.00
25155	Services for Sexual Minority Youth	106,940	0	106,940	0.00
25156A	Bienestar Social Services	482,976	0	482,976	3.80
<b>Total</b>		<b>\$8,106,678</b>	<b>\$1,078,177</b>	<b>\$9,184,855</b>	<b>16.42</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The SUN Service System Division Administration (SUNSS) is responsible for management and oversight functions for the contracted and county provided direct services through the SUNSS, as well as development and maintenance of partnerships with the system's stakeholders and partners. The 14.5 FTE in this division provide direct services, manage contracts, provide technical assistance and training, monitor programs, oversee data collection and reporting, conduct program evaluation and coordinate service delivery associated with the SUN Service System and the Ortiz Center. Programs operated through this division serve more than 65,000 people annually.

### Program Description

SUNSS administration staff has responsibility for leadership, partnership development, direct staff supervision and program oversight for the SUN Service System. Responsibilities include supporting the overall county policy promoting school age services, ensuring evidenced-based and high quality services by both county staff and contracted service providers, maintaining communication internally and with the SUN Service System and partner communities. Oversight for contract management functions related to the SUNSS and ensuring that accurate data is collected and reported to stakeholders, contractors, the Board of County Commissioners and to funders are critical functions of administrative staff. Data collection, technical assistance, reporting and program evaluation functions are implemented across both the SUNSS and the Community Services divisions of the department.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of times school district and system partners meet to align and monitor service	34	12	16	16
Outcome	% funder required reports completed and submitted on time	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

Alignment and monitoring meetings include meetings of SUNSS Coordinating Council and its workgroups, SUNSS Districts Council, grant, policy and sustainability groups.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$703,144	\$0	\$739,726	\$0
Contracts	\$94,880	\$0	\$49,880	\$0
Materials & Supplies	\$14,652	\$0	\$13,881	\$0
Internal Services	\$139,787	\$0	\$150,234	\$0
Total GF/non-GF:	<b>\$952,463</b>	<b>\$0</b>	<b>\$953,721</b>	<b>\$0</b>
Program Total:	<b>\$952,463</b>		<b>\$953,721</b>	
Program FTE	7.45	0.00	7.37	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

\$953,721 - County General Fund

Significant Program Changes

Last year this program was: #25143, SUN Service System Administration



**Program # 25145 - SUN Community Schools**

**Version 6/15/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25044, 25139, 25149, 25151, 25154, 25155

**Program Characteristics:** Measure 5 Education

**Executive Summary**

SUN Community Schools (SUN CS) provide school-based educational, recreational, social and health services focusing on school-age children at risk of academic failure and their families. The 45 county-supported full-service sites in this offer serve approximately 13,000 students, 71% of whom receive free or reduced lunch (FRL). SUN's nationally award-winning program removes barriers for students and families so that they can achieve educational success and lifelong self-sufficiency. Last year, participants had a 95% school attendance rate and 75% improved academic benchmark scores. SUN CS is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

**Program Description**

SUN CS is a jointly owned collaboration of the city of Portland, school districts, non-profits, state and Multnomah County. The SUN partnership leverages significant contributions including an estimated \$2.8 million in cash from the city and districts, over \$6 million in supplemental services, and \$7 million in in-kind resources. In total, the partnership supports 58 total SUN CS sites countywide.

SUN Community Schools provide 13,000 youth with a comprehensive array of social and support services that allow students to come to school ready to learn and succeed academically and that foster family success. Services are developmentally appropriate and operate year-round at elementary, middle and high schools. They include: 1) social and health services to meet basic needs; 2) out-of-school-time activities: a broad range of academic support, enrichment, social and behavioral skill development, recreation and adult education; 3) family engagement: support and education for family members so they can prepare children for school and have positive involvement with schools; 4) community and business involvement; and 5) service integration: oversight and coordination of a comprehensive, accessible system of services. SUN Community Schools focus on prevention and also provide significant intervention services, working to reduce poverty and other high-cost service needs in the future. SUN CS is a national model, that utilizes best practices and tailors services to the specific needs of local neighborhoods and schools.

Research demonstrates that SUN CS are effective in improving student academic success and attendance, as well as engagement, pro-social behaviors and other skills that lead to life success. Outcomes are measured on regularly attending students, approx. 6,500 youth annually. Eighty percent of SUN participants improved classroom academic performance. SUN CS serve the neediest children, targeting those living in poverty and performing below standards. 63% are racial/ethnic minorities, 21% are English Language Learners and 71% receive FRL (compared to 50% in districts).

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of children ages 5-18 served	12,760	9,200	11,000	9,200
Outcome	% who improve state test scores in Reading	75.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended	95.0%	92.0%	92.0%	92.0%
Outcome	% who improved classroom behavior	67.0%	75.0%	75.0%	75.0%

**Performance Measure - Description**

Actuals and estimates for # served reflect SUN CS exceeding purchased amounts due to additional resources leveraged beyond county funding. DCHS does not presume continued contractor "overperformance" in projections. Outputs reflect the annual number served; outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold; 6,451 children participated at this level last year.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$90,914	\$40,920	\$96,498	\$148,879
Contracts	\$2,730,278	\$477,247	\$2,827,651	\$417,093
Materials & Supplies	\$4,535	\$7,040	\$4,535	\$26,503
Internal Services	\$24,477	\$4,268	\$28,984	\$10,518
Total GF/non-GF:	<b>\$2,850,204</b>	<b>\$529,475</b>	<b>\$2,957,668</b>	<b>\$602,993</b>
Program Total:	<b>\$3,379,679</b>		<b>\$3,560,661</b>	
Program FTE	1.05	0.50	1.00	1.75
<b>Program Revenues</b>				
Indirect for dep't Admin	\$1,726	\$0	\$5,304	\$0
Intergovernmental	\$0	\$529,475	\$0	\$515,959
Other / Miscellaneous	\$0	\$0	\$0	\$87,034
<b>Total Revenue:</b>	<b>\$1,726</b>	<b>\$529,475</b>	<b>\$5,304</b>	<b>\$602,993</b>

**Explanation of Revenues**

\$285,094 - City of PDX Parks & Rec: Based on continuation of FY10 funding level  
 \$101,290 - St Dept of Ed ODE21C: Based on FY09-11 projected State Budget  
 \$85,000 - Oregon Community Schools: Based on estimated carryover funds  
 \$4,100 - Gresham-Barlow School District: Based on continuation of FY10 funding level  
 \$21,000 - David Douglas School District: Based on continuation of FY10 funding level  
 \$100,000 - Communities Putting Prevention To Work Grant Initiative (ARRA)  
 \$2,034 - Leaders Roundtable  
 \$4,475 - City of Portland Mayor's Office  
 \$2,957,668 - County General Fund Subsidy

**Significant Program Changes****Last year this program was:**

This program offer includes a 2% inflationary increase of \$ 53,473 over FY10 for the County General Fund portion of contracted client services.

**Program # 25147 - Child & Family Hunger Relief**

**Version 6/15/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Related Programs:** 25139, 25145

**Program Characteristics:** One-Time-Only Request, Measure 5 Education

**Executive Summary**

The Child & Family Hunger Relief program is a one-time request for a CGF investment to lessen food insecurity and improve healthy eating by allowing SUN Community School (SUN CS) sites to increase the number of meals served to hungry children and families and developing on-going capacity for food support. The offer will serve an additional 100,000 meals to over 3,500 children and 600 parents/guardians at SUN CS sites and an additional 800 families through a weekend "backpack" food program. The program is a partnership between the SUN Service System, six school districts, Oregon Hunger Relief Task Force and the Commission on Children, Families and Community.

**Program Description**

Oregon is currently ranked #2 in hunger, yet millions of dollars in available federal food funding for children goes untapped. 50% of children in the County are eligible for Free or Reduced (FRL) price meals through schools and over 70% of SUN CS participants receive FRL. However, these students don't have access to food on non-school days during the school year and in summer only 31% of the students who eat FRL meals during the school year are fed. Parents/guardians of these students also suffer the effects of poverty including hunger, often foregoing regular meals so their children can eat.

The SUN CSs are designed to act as a vehicle for delivering services to children and families in an easily accessible and non-stigmatizing environment. This offer capitalizes on SUN's community-based capacity in four ways: 1) Increasing the # of non-school days that SUN CSs serve a full USDA meal to children; 2) Providing pilot sites where parents access meals; 3) Developing the capacity for weekend "backpack" food programs at 20 SUN sites; and 4) Offering nutrition education and activities at summer food sites to improve healthy eating and physical activity. The offer supports staffing for 10 additional school-year days that 44 SUN CS would be open to feed children, and 4 additional weeks in the summer at 30 SUN CS. During the summer, college interns will deliver nutrition education to support healthy food choices, budgeting and exercise. This offer also includes one-time start-up costs of a weekend family food "backpack" program at 20 SUN CS sites and a .5 FTE Program Development Specialist to coordinate the programs, develop partnerships and secure in-kind resources and supports.

Experts agree that healthy nutrition is vital to brain development and capacity to learn for children and youth in all age groups. Even moderate under-nutrition has lasting impacts on cognitive development and school performance. This offer leverages over \$300,000 in federal meal reimbursement and significant in-kind for weekend food for families.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# of meals served to children	0	0	0	100,000
Outcome	% of children and adults who demonstrate increased knowledge of healthy eating	0.0%	0.0%	0.0%	90.0%

**Performance Measure - Description**

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Personnel	\$0	\$0	\$42,043	\$0
Contracts	\$0	\$0	\$144,000	\$0
Total GF/non-GF:	\$0	\$0	\$186,043	\$0
Program Total:	\$0		\$186,043	
Program FTE	0.00	0.00	0.50	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$186,043 - County General Fund Subsidy

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25139, 25145, 25151, 25154, 25155

**Program Characteristics:**

### Executive Summary

Social and Support Services for Educational Success program (SSSES) fosters academic achievement by providing year round school-linked, age appropriate and culturally specific academic support, case management, family engagement, and skill building groups. The SSSES serves nearly 1,800 high-risk youth, 85% of whom are ethnic minorities. SSSES is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

### Program Description

Social and Support Services for Educational Success provides services for 1,828 high-risk youth (ages 6-17) and their families to help ensure that youth remain in or return to school. These services are delivered at community and school sites to youth attending regular and/or alternative schools who are at risk of academic failure. SSSES targets six specific populations of youth and families of color: African American, African Immigrant, Asian Pacific Islander, Latino, Native American and Slavic. Key services include: case management with a focus on academic and life goals; skill building groups; academic support activities such as tutoring, mentoring, reading club, gender-specific groups, and conflict resolution classes; and parent outreach/engagement. SSSES staff work in collaboration with SUN Community School programs and other school personnel towards youth and family success.

Youth who participate in the SSSES program are at risk for academic failure due to poor attendance, failing grades, language barriers, family instability and behavior issues. Case managers support and mentor youth that allows them to build personal assets leading to school and life success. Developing a consistent relationship with a trusted, caring adult is a primary identified issue by the youth served. SSSES staff engages youth at risk for academic failure in a variety of school and community activities. SSSES services that meet basic needs allow youth to focus on school and provides their caregivers with the resources to support educational success. Increased access to social services and additional learning opportunities outside of, but connected to, the classroom are "promising practices" for reducing the achievement gap. SSSES provides this link - in schools and in the community.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# youth served	1,828	1,735	1,735	1,735
Outcome	% youth served who improve state test scores in reading <sup>1</sup>	71.0%	75.0%	75.0%	75.0%
Outcome	Percentage of school days attended	89.0%	92.0%	90.0%	90.0%

### Performance Measure - Description

<sup>1</sup>Outcomes are analyzed for students who participate for 45 days or more; in FY 2009, 1,028, or 56%, of students participated at that level.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$90,916	\$0	\$96,498	\$0
Contracts	\$1,761,420	\$332,351	\$1,796,644	\$322,831
Materials & Supplies	\$2,221	\$0	\$2,221	\$0
Internal Services	\$18,638	\$0	\$19,693	\$0
Total GF/non-GF:	<b>\$1,873,195</b>	<b>\$332,351</b>	<b>\$1,915,056</b>	<b>\$322,831</b>
Program Total:	<b>\$2,205,546</b>		<b>\$2,237,887</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$332,351	\$0	\$322,831
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$332,351</b>	<b>\$0</b>	<b>\$322,831</b>

**Explanation of Revenues**

\$322,831 - OCCF:Based on FY09-11 projected State Budget  
 \$1,915,056 - County General Fund Subsidy

**Significant Program Changes**

**Last year this program was:**

This program offer includes a 2% inflationary increase of \$ 35,224 over FY10 for the County General Fund portion of contracted client services.

**Program # 25151 - Parent Child Development Services**

**Version 3/05/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25139, 25145, 25149, 25154, 25155

**Program Characteristics:**

**Executive Summary**

Parent Child Development Services (PCDS) provides services for young children (birth through age 5) and their parents to promote positive parenting, healthy child development and school readiness. In FY 2009, the program served over 740 families, 75% of whom were at or below the Federal Poverty Level. PCDS uses a nationally recognized evidence-based curriculum, Parents As Teachers. This program aligns with the Early Childhood Framework and is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

**Program Description**

Parent Child Development Services include a range of activities designed to promote parent competence and healthy child development to ensure children are prepared to learn. Over 740 families participated in these services in FY 2009. Specific services include: age appropriate parent-child play groups, parenting education and support services, developmental screening, immunization status checks and follow up, and access to other social and health services. The Ages and Stages child development screening tool is used to determine developmental stage. Children not meeting the relevant stage for their age are referred for early childhood intervention services. Services are delivered in both community and school sites.

PCDS creates opportunities for parents to interact with their children in mentored settings with child development specialists. In these settings they are able to build on healthy and age appropriate parenting skills, manage challenging behavior, and learn new ways to support their children and promote school readiness. These opportunities are critical for families struggling to meet basic needs and who may not have other such opportunities; 75% of families who participated in the program in FY 2009 were at or below the Federal Poverty Level.

PCDS services are developmentally and culturally appropriate. The Parents As Teachers curriculum is used as the foundation for intervention with families; the outcomes for participating families are strong. Last year, at the time of exit from the program 98% of children served had up-to-date immunizations and 94% were within a normal developmental stage. Nearly all of the parents (99%) indicated they gained new skills from program participation.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# families served	747	600	600	600
Outcome	Percentage of children up to date on immunizations	98.0%	95.0%	95.0%	95.0%

**Performance Measure - Description**

Actual numbers served exceed targets due to contractor overperformance, due largely to leveraged funds. Contractor overperformance is not assumed when setting annual targets; thus targets tend to be lower than actual families served.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$90,916	\$0	\$96,498	\$0
Contracts	\$1,208,828	\$165,090	\$1,182,782	\$152,353
Materials & Supplies	\$2,303	\$0	\$2,303	\$0
Internal Services	\$2,219	\$0	\$19,691	\$0
Total GF/non-GF:	<b>\$1,304,266</b>	<b>\$165,090</b>	<b>\$1,301,274</b>	<b>\$152,353</b>
Program Total:	<b>\$1,469,356</b>		<b>\$1,453,627</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$165,090	\$0	\$152,353
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$165,090</b>	<b>\$0</b>	<b>\$152,353</b>

**Explanation of Revenues**

\$152,353 - OCCF:Based on FY09-11 projected State Budget  
 \$1,301,274 - County General Fund Subsidy

**Significant Program Changes**

**Last year this program was:**

This program offer includes a 2% inflationary increase of \$ 23,977 over FY10 for the County General Fund portion of contracted client services.



**Program # 25154 - Alcohol, Tobacco & Other Drug Svcs**

**Version 7/01/2010 s**

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25139, 25145, 25149, 25151, 25155

**Program Characteristics:**

**Executive Summary**

This program provides alcohol and drug screening, assessment, referral, and prevention services to youth aged 12-17 and their families. For FY 2011, the program will target 200 youth for screening, assessment and prevention services. The focus will be on Middle and High School students in SUN Community Schools. This program is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

**Program Description**

The Alcohol Tobacco and Other Drug program offers early intervention through screening, assessment, referral and education. Screening is a review of drug and alcohol use to determine behaviors and patterns that may require further assessment. Assessment involves a more in depth interview with the youth and his/her family about drug and alcohol use. This results in a rapid referral and connection to treatment, if necessary; the program leverages third party insurance to cover treatment. Prevention activities include skill-building groups (teaching refusal skills, for example) and groups for youth who are at risk for (but not yet demonstrating) substance abuse, such as children from drug-affected families.

By reducing or eliminating ATOD use, the program helps youth remain in school thus increasing the likelihood they will be successful academically and, ultimately, have a healthy and self-sufficient adulthood. Research indicates that the more successful a young person is in school, the less likely he/she is to use, abuse or become dependent on ATOD. This program offers early intervention through education, screening and assessment and provides an important gateway into other youth ATOD services throughout the county. Early intervention is key to breaking the cycle; and the earlier the intervention, the better the likelihood of preventing substance abuse. Most other youth ATOD services focus only on treatment. This program targets youth early to avoid long-term use and the need for treatment services.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of youth served <sup>1</sup>	287	300	300	200
Outcome	% youth who participate in treatment who reduce use of ATOD <sup>2</sup>	42.0%	70.0%	70.0%	0.0%

**Performance Measure - Description**

<sup>1</sup>Target number for FY 2011 reduced due to changes in the program (see Significant Changes section).

<sup>2</sup> The outcome for youth reducing their ATOD is being monitored in FY 2010 for closer compliance with the contracted target. This outcome will no longer be necessary in FY11 due to the change in the program scope. A new outcome will be developed for the new year.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$200,020	\$0	\$203,000	\$0
Total GF/non-GF:	<b>\$200,020</b>	<b>\$0</b>	<b>\$203,000</b>	<b>\$0</b>
Program Total:	<b>\$200,020</b>		<b>\$203,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$203,000 - County General Fund Subsidy

**Significant Program Changes****Last year this program was:**

This program offer includes a 2% inflationary increase of \$ 3,000 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25139, 25145, 25149, 25151, 25154

**Program Contact:** Peggy Samolinski

**Program Characteristics:**

**Executive Summary**

The Sexual Minority Youth Services (SMYS) program offers counseling, skill building and support services to over 300 sexual minority youth. Its direct service impact is enhanced through technical assistance and training to approximately 500 SUN Service System, school and other direct service staff so that they may work more effectively with sexual minority youth. SMYS is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

**Program Description**

The SMYS program utilizes two primary strategies: 1) providing direct services and a safe place in which sexual minority youth can feel comfortable and participate in supportive services that reflect their unique needs (70% of the program); and 2) enhancing the understanding and skill levels of community providers to provide competent and relevant services to sexual minority youth (30% of the program).

Due to difficulties with family, peers and the broader community, sexual minority youth often experience isolation and stigmatization, resulting in higher rates of emotional distress, homelessness, school drop outs, suicide attempts, risky sexual behavior and substance abuse. This program provides a safe place for 300 youth to go for support and services that are culturally relevant and responsive; it directly supports the operation and service delivery at the Sexual Minority Youth Resource Center. The program fosters increased school retention and success; last year 97% of youth served re-enrolled or remained in school. In addition to the direct service impact, nearly 99% of training participants reported an increased knowledge of SMY issues and competency in serving these youth.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	# youth served in counseling and Resource Center services	343	300	300	300
Outcome	% youth accessing services at the SMYRC that remain in or re-enroll in school <sup>1</sup>	97.0%	60.0%	60.0%	60.0%

**Performance Measure - Description**

Measures were changed for FY 2010 to better capture program participation. The measure "Of the youth receiving therapy/case management services, the % who report reduction in at-risk behaviors by the time of exit" has been dropped due to small sample size.

<sup>1</sup> The outcome "% of SMYRC youth who re-enroll or remain in school" has been revised slightly to "% of youth accessing services at the SMYRC that remain in or re-enroll in school". This latter change will be measured on more youth than the previous measure.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$104,843	\$0	\$106,940	\$0
Total GF/non-GF:	<b>\$104,843</b>	<b>\$0</b>	<b>\$106,940</b>	<b>\$0</b>
Program Total:	<b>\$104,843</b>		<b>\$106,940</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$106,940 - County General Fund Subsidy

**Significant Program Changes****Last year this program was:**

This program offer includes a 2% inflationary increase of \$ 2,097 over FY10 for the County General Fund portion of contracted client services.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25070

**Program Characteristics:**

### Executive Summary

Bienestar de La Familia (Well-being of the Family) Social Services provides culturally specific and linguistically appropriate case management, information and referral, service linkage, coordination and resource recruitment to address the needs of the largest minority, fastest growing and historically underserved group in the County, the Latino community. While sited full-time in the Baltazar Ortiz Community Center, 2.3 FTE direct service staff serve Latinos throughout Multnomah County. In FY09 the social service program served 65 families and over 500 children, adults and parents in order to impact poverty, promote family stability, support academic success and assist families to meet basic living needs. The nutrition and food programs serve over 1,300 residents, immigrants and refugees a year.

### Program Description

Bienestar works closely with staff in La Clinica de Buena Salud (Health Clinic). The group functions as a multi-disciplinary team with members from mental health/addictions, healthcare services and our community partner, Hacienda CDC. Although the primary mission is to serve the Latino community, the program recruits providers to serve the Somali community, Russian speaking families, and other diverse groups residing in the nearby housing complex and neighborhood who also seek Bienestar's unique services.

Bienestar is unique because it provides multi-entry access to a wide range of basic services. Yearly, approximately 75 families experiencing complex, single or multiple issues that affect their ability to attain or maintain school success, healthy family functioning and self sufficiency receive solution focused case management with some or all of these services: individual and family case management, service coordination and crisis intervention. These services ensure that basic needs are met for food, stable housing, energy assistance, parenting skills, employment, school completion, clothing, physical and mental health. 1.5 FTE case managers and .8 FTE program development staff provide services on site, in families' homes, schools & other locations. The nutrition & food programs serve over 1,300 residents, immigrants and refugees a year. The anti-poverty programs promote self sufficiency through links with job training and school support services. The program also initiates consultation, coordination efforts with other providers to build cultural competency among them and leads efforts to create community solutions.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of households served by case management <sup>1</sup>	63	77	77	100
Outcome	% of families completing most or all of their case management goals	78.0%	75.0%	78.0%	75.0%
Output	Number of families who received food to meet basic needs <sup>2</sup>	1,762	2,700	1,300	1,600
Outcome		0	0	0	0

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> Output measure was changed from individual to households because service delivery focuses on the household. The change results in a lower number reported.

\*Projection for case managed households for FY11 is higher due to additional .5 staffing capacity (see significant changes section).

<sup>2</sup>Food delivery numbers are quite variable depending upon how many people show up on a given day. Given trends, however, the projection for FY09-10 was overestimated.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Personnel	\$329,304	\$0	\$385,579	\$0
Materials & Supplies	\$6,395	\$0	\$16,395	\$0
Internal Services	\$62,377	\$0	\$81,002	\$0
Total GF/non-GF:	<b>\$398,076</b>	<b>\$0</b>	<b>\$482,976</b>	<b>\$0</b>
Program Total:	<b>\$398,076</b>		<b>\$482,976</b>	
Program FTE	3.30	0.00	3.80	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$482,976 - County General Fund Subsidy

**Significant Program Changes****Last year this program was:**

For FY11, this offer includes two new components. First, it adds \$10,000 in direct client assistance funds. These funds were inadvertently left out of the FY 10 program offer. Second, this offer includes an additional .5 FTE Family Intervention Specialist (FIS) to bring the second FIS position at the Center to full-time. Both of these are funded with County General Fund dollars.