

Department: Health Department

Program Contact: Neisha Saxena

Program Offer Type: Operating

Program Offer Stage: Adopted

Related Programs:
Program Characteristics:
Executive Summary

Communicable Disease (CD) is a foundational public health program that protects the health of the community by fulfilling State of Oregon infectious disease statutes for disease tracking and investigation, disease intervention and control, and response evaluation. CD Clinical and Community Services provides sexual health services and community testing/prevention outreach to prevent STD and HIV transmission and treatment. Immunization are in program offer 40010C.

Program Description

CD Clinical and Community Services limits the spread of sexually transmitted infections (STIs) by treating existing and preventing new cases, especially among the most-impacted communities. Program activities include: STD Clinical Services - Low barrier, timely medical evaluation, treatment, and prevention counseling in a judgment-free, culturally relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals. The STD clinic is a designated training site for medical providers and provides consultations and continuing medical education. Partner Services - Staff contact the sex/needle-sharing partners of persons with confirmed STD/HIV/hepatitis C infections, link them to testing and treatment, and counsel for behavior change. Partnerships – Subcontracted community partners support the program in providing field-based testing, health promotion, and condom distribution. Outreach & Epidemiology - Case investigation identifies population-level patterns of STD/HIV infection to guide testing and prevention outreach and inform health care and other systems to appropriately target resources. The program's epidemiology work informs interventions in response to the syndemic (e.g., simultaneous, related epidemics of multiple diseases) of new and rising HIV, syphilis, hepatitis C, and shigella cases. TB clinical services have moved from this program offer (40010B) to 40010A.

Racial inequalities persist in the realm of STIs, including HIV. Tackling these disparities stands as a prioritized approach to diminish the overall burden of diseases. Disparities are discerned through prevalence and interview data, shedding light on transmission modes and patterns that contribute to the disproportionate impact. Monthly data reviews by program leadership, facilitated through dashboards, prompt the creation of new tools as necessary. The outreach endeavors are tailored towards disparity populations, encompassing LGBTQ and homeless communities. The program collaborates with culturally specific organizations under contracts to effectively engage these communities. Additional strategies involve outreach efforts at homeless camps, the involvement of peer leaders, and advertisements on social media and hook-up sites. Surveys conducted at STD clinics capture client input, with a forthcoming survey specifically honing in on ways to enhance services for culturally specific communities.

Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of clinical visits (STD, HIV)	5,399	5,800	4,000	4,400
Outcome	Percentage of all County gonorrhea/syphilis/HIV cases diagnosed through this program	14%	15%	15%	15%
Quality	Percentage of syphilis/HIV cases investigated	76%	85%	80%	85%
Output	Number of patients initiated on HIV prevention medication (PrEP)	447	450	430	450

Performance Measures Descriptions

Measure 1: Includes STD and outreach testing. Measure 2: The LPHA Agreement requires reporting on communicable diseases. The measure shows the impact and efficiency of the program to find, diagnose, and treat a significant portion of reportable STDs relative to the entire health care system. Measure 3: Percentage of newly reported HIV and syphilis cases that are successfully interviewed by DIS case investigators. 100% of cases are initiated to attempt an interview.

Legal / Contractual Obligation

ORS 433 mandates disease prevention & control. Oregon State DHS HIV Prevention, HIV Early Intervention Services and Outreach, and STD contractual program elements.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,340,864	\$2,591,331	\$1,325,403	\$2,608,128
Contractual Services	\$0	\$541,784	\$146,959	\$395,184
Materials & Supplies	\$73	\$304,806	\$25,733	\$363,661
Internal Services	\$456,008	\$766,828	\$732,282	\$815,514
Total GF/non-GF	\$1,796,945	\$4,204,749	\$2,230,377	\$4,182,487
Program Total:	\$6,001,694		\$6,412,864	
Program FTE	7.55	18.57	6.88	18.19

Program Revenues				
Intergovernmental	\$0	\$3,853,542	\$0	\$3,831,280
Service Charges	\$0	\$351,207	\$0	\$351,207
Total Revenue	\$0	\$4,204,749	\$0	\$4,182,487

Explanation of Revenues

This program generates \$382,401 in indirect revenues.

STD/HIV/Hep C is funded by an intergovernmental agreement between Multnomah County as the local public health authority (LPHA) and the Oregon Health Authority for HIV prevention and State Support for Public Health disease investigation. Federal CDC and HRSA grants also contribute to program revenues.

Surveillance Network GY05 - \$273,056; HIV Prevention Block - CTS Clinic - \$393,338; HIV Early Intervention & Outreach - \$1,666,772; ELC Gonococcal Infections - \$20,000; Sexually Transmitted Diseases Client Services - \$344,133; Public Health Modernization Local - STD - \$627,009; HIV/STI Services - \$146,040; COVID-19 Federal CDC Health Disparities STD - \$240,000; HIV Early Intervention Services and Outreach - \$120,932; STD Program Medicaid FFS - \$170,599; STD Program Medicare \$3,753; STD Prog Pt Fee 3rd Party- \$107,890; STD Program Pt Fees - \$68,965

Significant Program Changes

Last Year this program was: FY 2024: 40010B Communicable Disease Clinical and Community Services

Moved Occupational Health Services into 40010B from 40010A.