



(this page intentionally left blank)

# Table of Contents

- Understanding Program Offers ..... 3
- What Makes a Good Program Offer ..... 3
- Program Offer Description..... 4
  - Performance Measures*..... 4
  - Legal and Contractual Mandates* ..... 5
  - Program Costs*..... 5
  - Explanation of Revenues* ..... 5
  - Significant Program Changes* ..... 5
- Types of Programs ..... 6
  - Administration*..... 6
  - Support*..... 6
  - Operating Program* ..... 6
  - New/Innovative* ..... 6
  - Program Alternative or Reconstruction* ..... 6
  - Internal Service* ..... 6
  - Revenues*..... 6
- Other Important Notes ..... 7
  - Characteristics of Program Offers*..... 7
  - Scaled Program Offers*..... 8

(this page intentionally left blank)

## Understanding Program Offers

This volume contains the program offers submitted by departments and funded in the budget. Each section is separated by department/division and contains the following items, in order:

- An introduction to the department along with budget trends and a division summary
- Division narrative including significant changes by division
- A list of all of the program offers in the department
- The department's individual program offers (in numerical order)

Program offers form the basis for County's budget process. They constitute a department's budget request and narrative budget, and provide the information that the Board of County Commissioners uses to select programs that will best serve the community.

"Nothing astonishes people so much as common sense and plain dealing."  
~Ralph Waldo Emerson

## What Makes a Good Program Offer

A good program offer explicitly shows the relationship between the program and the desired results for services. Program offers should:

- Describe how they will make a significant contribution to the services indicated.
- Show why the County's spending on this program is effective – the 'bang for the buck'.
- Show evidence the program can deliver and measure its results
- Give performance measures that accurately track the program's contributions.
- Link the offer to the policy direction/frameworks.
- Describe program activities in layperson's terms.

Program offers are not about funding programs because these programs exist – they are about outcomes. They emphasize meeting the County's goals, not preserving the government status quo. The following describes the configuration of each program offer and the major types of information each should contain.

### Program Offer Description

In Multnomah County's budget, a "program" is an organizational unit that provides services to the public or to other County departments or divisions. Its description should briefly and clearly explain the activities encompassed in the program offer. If the offer represents a change in current practice (a reorganization or change in staffing levels, service hours, etc.), it should briefly describe the nature of that change. The description should describe how the program will support the strategies outlined for the department or in known County policy frameworks. It should cite research, experience, or logic to convincingly make the case. If it is a new program, it should note how the department created its costs.

"I have no data yet. It is a capital mistake to theorize before one has data. Insensibly one begins to twist facts to suit theories instead of theories to suit facts."

~Sir Arthur Conan Doyle, Sherlock Holmes

### Performance Measures

Every program offer includes a minimum of two and up to four performance measures which indicate the level of service that the County can expect to receive if this program is selected. Two types of measures are required; the output which represents the volume of work and the outcome which represents the measurable results of that work. For example, a hypothetical addictions treatment program for abused teenage girls might report the number of teenage girls who entered and received treatment (output), and the percentage of teenage girls who were clean and sober and completed their treatment plan upon exit (outcome).

Departments also have the option of including additional types of measures to better illustrate a program's performance. These can include resources other than staffing or finances (inputs), measures of the quality service that's delivered, and measures of service efficiency in terms of cost or time. Using the addictions treatment example above, inputs might be reported as the number of treatment beds available to serve abused teenage girls. Quality could be reported as the percent of teenage girls that rated counseling staff as engaging and supportive, and efficiency might be reported as the cost to the county for each successful treatment completion.

The performance measures are organized in a uniform table. The table identifies the type of measure, the definition, and several cells to report the results. The cells present program history where available, annualized estimates of the current service level (what's being delivered at the time of printing), and the anticipated target service level for the upcoming year if the program is selected. Additional supporting information, such as explanations as to notable changes in a program's performance, are located in the description section below the table.

### *Legal and Contractual Mandates*

Many program offers will be constrained by legal or contractual mandates. If a program offer is affected by a mandate, the mandate and its authorizing document (a statute, contract, etc.) should be noted.

### *Program Costs*

This area should show the cost to the County of providing the program, as well as the revenues generated by the program for its support. These costs include personnel, contracted services, materials and supplies and internal services.

### *Explanation of Revenues*

This section explains how non-General Fund revenues or General Fund fee revenues were estimated. Revenue estimates should clearly demonstrate the reasonableness of the estimate.

### *Significant Program Changes*

This section details significant programmatic changes that affect the program—not financial changes up or down. Such changes might include the following information:

- Increases or decreases in the scope or level of services
- Increases or decreases in net personnel resources (FTE's)
- Revenue increases or decreases
- How this change affects other departments and/or service delivery programs.

In this section you will find a link from this years program offer to its predecessor, if applicable. Note that program offer numbering can change between fiscal years.

### Types of Programs

Program offers were categorized based on the “type” of services they deliver. Program offers fall into one of the following groups:

- Administration
- Support
- Operating Program
- New/Innovative Program
- Program Alternative/Reconstruction
- Internal Service
- Revenue

#### *Administration*

Department- or division-level management and related expenses (i.e. office space, supplies, telephones, etc.) Direct program supervision is considered to be a part of the operating program (NOT administration), and could be included in the operating program’s offer.

#### *Support*

An activity in a department that provides services directly to some or all operating programs within a department. Examples include the Health Department’s pharmacy, which supports the various health clinics; the Library’s Technical Services, which maintains the Library’s materials and catalog system-wide; or the District Attorney’s Human Resources unit.

#### *Operating Program*

An “on the ground” activity of the County. Includes front-line supervisors/ program managers with specific responsibilities for particular operating programs. An example would be the Health Departments Primary Care Clinics.

#### *New/Innovative*

“On the ground” or support activity the County currently does not perform.

#### *Program Alternative or Reconstruction*

A program that has been or is currently operated by one or more County departments that is proposed to be operated in a different way, by different providers, or with different business models.

#### *Internal Service*

Programs that support Countywide operations. Examples of these types of programs would be Fleet or Information Technology services.

#### *Revenues*

These programs are used to budget discretionary (primarily General Fund) revenues at the fund level. Program revenues are budgeted within the applicable program offer.



### Other Important Notes

#### *Characteristics of Program Offers*

Reading through the program offers, one should keep in mind:

- Program Offer characteristics (backfill and offers requesting one time only resources or those denoted as advancing the Climate Action Plan)
- The way in which program offers are scaled

**Backfill** - Backfill is defined as “discretionary dollars (General Fund) applied to a program that formerly was funded by a grant, state, or other dedicated funding source. Explicitly identifying backfill allows the Chair and the Board to decide to partially or fully backfill expiring grants, state or federal funds with General Fund dollars.

**One Time Only Resources** - In most budget years, the County has a varying amount of one-time-only funds. These funds will not be available in the following years and thus should be spent on projects that do not have or have minimal ongoing expenses.

**Measure 5 Education Offers** - Multnomah County has General Fund revenues which are not derived from real property taxes. These revenues can be expended on educational services without violating the Constitutional limitation on spending real property tax for educational services. In order for the County to easily demonstrate that it has complied with the Constitutional limitation on spending for “educational services,” departments can designate such programs so that they may be funded by non real property tax revenues.

**Climate Action Plan** - In 2009, Multnomah County adopted the Climate Action Plan (CAP), a comprehensive framework for reducing greenhouse gases and preparing County operations and the community for climate change impacts in the region. If a program contributes toward achieving a Climate Action Plan goal, the check box for Climate Action Plan (CAP) is marked on the program offer. The program offer will also include a description of the particular action the program addresses in the “program description” text box in the program offer.

### *Scaled Program Offers*

Program offers represent discrete increments of service and many County programs can deliver services at varying levels. For example, an Alcohol and Drug Treatment Program may be able to offer 100, 150 or 200 beds. Departments were asked, when appropriate, to provide decision-makers with the option to choose from those service levels. Looking at scaled program offers, one should consider:

- The Base Level of Service - Program "A" is the base level of service that can be provided while still delivering the expected results. In the example above, the base level of service would be 100 beds.
- Increments of Service - Program "B and beyond" represent incremental levels of service that buy additional outcomes. In the A&D treatment example, one increment could be 50 additional beds, and another, separate increment could be 100 additional beds.

## Department Overview

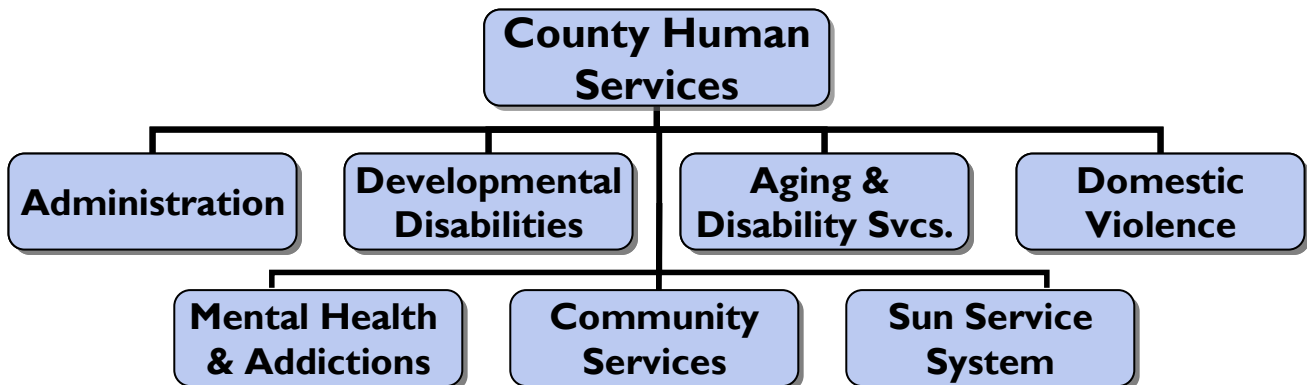
The Department of County Human Services' mission is to enhance the quality of life for individuals and families with a vision of safe, healthy, caring and diverse communities where hope, independence, learning and opportunity prevail for all.

With a budget of over \$215 million and 688 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 long-standing collaborations with many 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 of County Human Services 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, and coordinating and linking services for the county's most vulnerable and poorest residents.

Our work is accomplished through seven divisions: Administration, Aging and Disability Services, Mental Health and Addiction Services, Developmental Disabilities Services, Schools Uniting Neighborhoods (SUN) Services System, Community Services, and the Domestic Violence Coordinator's Office.



### Budget Overview

The Department of County Human Services has an FY 2012 budget of \$215.1 million, an increase of \$2.1 million from the FY 2011 Adopted budget. DCHS' General Fund budget increased \$3.6 million to \$51.3 million in FY 2012. The increase has gone to expand services for some of the County's most vulnerable citizens, including school-age youth, seniors and adults with disabilities, veterans, and the homeless. The increase is primarily through these new program offers:

**25032** - Gatekeeper Outreach - Identifying Vulnerable Adults: Trains community members to reach out to vulnerable seniors and help link them with County services.

**25111C** - Rapid Re-Housing Initiative: Helps the homeless to rapidly access housing to keep them from remaining homeless.

**25114B** - Bridges to Housing - Final Stabilization: Expands services to previously homeless populations to help them remain housed.

**25133E** - Short-Term Rent Assistance: Helps prevent homelessness through short-term rent assistance.

**25139B** - Action for Prosperity: Assists impoverished households to find stable employment, housing, and education or job training.

**25145A and B** - SUN Community Schools: Expands SUN Schools to David Douglas HS, Reynolds School District, and Gresham-Barlow School District.

DCHS' Fed/State budget decreased \$3.1 million, from \$122.4 to \$119.3 million between FY 2011 and FY 2012. Much of this reduction represents changes the State made in Fall of 2010 to balance their budget after revenues came in lower than expected. Most reductions were made in Developmental Disabilities and in Aging and Disability Services programs.

DCHS' budget for Verity, the County's mental health insurance program funded by the state, increased by \$1.5 million between FY 2011 and FY 2012, with planned revenues of \$44.4 million. This increase is largely due to a new state initiative for adults receiving residential treatment and supported housing for mental illnesses that was created during the year in FY 2011.

Budget Trends*	FY 2010	FY 2011	FY 2011	FY 2012	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	697.72	665.76	709.15	688.37	(20.78)
Personal Services	\$56,544,177	\$59,961,498	\$63,477,809	\$62,693,704	(\$784,105)
Contractual Services	130,097,531	133,993,199	133,764,705	135,327,418	1,562,713
Materials & Supplies	13,800,638	14,366,149	15,740,036	17,019,526	1,279,490
Capital Outlay	85,877	40,000	40,000	15,000	(25,000)
<b>Total Costs</b>	<b>\$200,528,223</b>	<b>\$208,360,867</b>	<b>\$213,022,550</b>	<b>\$215,055,648</b>	<b>\$2,033,098</b>

\*Does not include cash transfers, contingencies or unappropriated balances.

## Successes and Challenges

The Department is making significant progress in many areas while case loads and demand for services continue to increase.

The long-awaited 16 bed Mental Health Crisis Assessment and Treatment Center will open in spring 2011. Its completion creates an alternative to jail and hospitalization for individuals experiencing a mental health crisis.

More than 6,570 victims of domestic violence and their children received shelter, counseling and other services.

Aging and Disability Services (ADS) Long Term Care diverted 435 people from nursing facilities costing \$6,563 a month to community care at \$1,490 a month. Eighty-nine percent of the clients receiving interventions from the ADS Multi-disciplinary Team showed improvement in their living situation.

The SUN Service System's newly initiated Child and Family Hunger Relief Program allowed SUN Community Schools to extend the number of weeks they served lunch throughout the summer - several sites served lunch for the entire 11 weeks of summer vacation. A total of 37,000 meals were served over the summer, and this effort leveraged \$300,000 of federal nutrition dollars through our six school district partners.

In Community Services the Rapid Re-Housing Initiative (RRI), an expansion of the successful 30 Families in 30 Days pilot, was funded with one time only contingency funds and implemented in January 2011. The department hopes to achieve similar success with RRI as achieved by the 30/30 pilot where at three month follow up (nine months after program start) 94% of families were still housed, 40% were self-sufficient and the rest were receiving some rental subsidy through funding other than 30/30 funding.

Our greatest challenge is the potential for federal and state revenue reductions as approximately 74% of the Department's budget is from federal and state sources. Reductions in these funds will impact our ability to sustain services and continue to achieve our goals. We are following the legislative session very closely and will need to re-evaluate our financial position after we know the impact of the state budget, most likely in the fall.

### Diversity and Equity

The Department of County Human Services (DCHS) has examined issues of equity in our practices and outcomes over the last year and has launched a set of focused strategies to address key disparities that exist in the department. Department Leadership, the DCHS Diversity Committee and the DCHS Managers of Color are working closely together to ensure that we are meeting our expectation that DCHS is an equitable workplace that produces strong outcomes for everyone we serve.

Communities of color are disproportionately impoverished with often chronic lack of access to higher education, employment and housing. County general funds are the primary funding available for culturally specific services and the department has prioritized preserving culturally specific services in this budget.

DCHS Diversity Committee launched a poster series featuring photographic portraits of some of DCHS staff and the Department’s important messages about diversity. The posters are displayed throughout all DCHS buildings and work sites. To stimulate conversation across the Department about diversity and equity we used the new poster series as launching point to have diversity “Short Talks” in all unit meetings.

Over the past two years, approximately 75 departmental leaders have completed an intensive diversity curriculum called “Building Partnership Across Difference.” The department will continue to offer this experiential learning opportunity to more staff in the coming year.

### Budget by Division

Division Name	FY 2012 General Fund	Other Funds	Total Division Cost	Total FTE
Administration	\$3,978,516	\$1,984,059	\$5,962,575	41.50
Developmental Disabilities	2,117,962	21,547,082	23,665,944	109.90
Aging and Disability Services	7,819,780	35,436,524	43,256,304	310.45
Domestic Violence	2,252,908	1,244,688	3,497,596	7.50
Mental Health & Addiction Services	15,925,492	82,048,218	97,973,710	170.05
Community Services	10,887,439	20,340,545	31,227,984	32.50
Sun Service System	8,381,766	1,090,669	\$9,472,435	16.47
<b>Total County Human Services</b>	<b>\$51,363,863</b>	<b>\$163,691,785</b>	<b>\$215,055,648</b>	<b>688.37</b>

### Department Administration

The Department of County Human Services Administration provides leadership, vision and policy direction to the service divisions.

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; management; job performance issues; and labor relations.

Business Services provides the administrative, financial and business functions of the department including development, management and oversight of the department's budget; accounts receivable and payable; purchasing; facilities coordination; and grants management. It also ensures that the department is in compliance with all county, state and federal policies. The Contracts Unit 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.

### Significant Changes

As an administrative reduction necessary to meet County General Fund constraint, a 1.00 FTE Research and Evaluation Specialist position was eliminated. This change will reduce our oversight of evaluation best practices and capacity for performance measurement and reporting.

### Developmental Disabilities Service Division

The Developmental Disabilities Services Division (DDSD) serves over 4,200 people in Multnomah County. These are people with intellectual and physical disabilities diagnosed during the developmental years, prior to the age of twenty-two. DDSD provides case management service linking consumers and families to available resources in the community, and where eligible, to Medicaid funded residential, employment and brokerage services. The goal is to assure that every person is safe, healthy, integrated into their community, and personal life choices are respected and honored.

DDSD is the host for Region One, a five-county regional crisis diversion program for people with developmental disabilities who meet certain crisis criteria. The program provides crisis residential placement, but is primarily focused on providing behavioral and situational assessment and support so people can continue to be served in their current home. The partner counties are Clackamas, Clatsop, Columbia and Washington.

DDSD will continue in FY 2012 to do outreach to the under represented and marginalized families and consumers with developmental disabilities. The importance of case management in assisting these families continues to be the subject of research (National Association of Social Workers) and cannot be over stated. Case management is the cornerstone for change as it links families to community advocates, food banks, legal support, and Medicaid services.

### Significant Changes

Significant Changes include:

A 10% reduction in our state local administration funds, a 10% reduction in regional crisis funds, a 13% reduction in case management funding and elimination of all quality assurance funds. This resulted in a reduction of 19.90 FTE (refer to significant program changes in program offers 25010, 25012, 25013, 25014, 25015, 25016). The impact is a reduced level of administrative support to case management, an increase in case loads by 10 clients per case manager, limited ability to monitor contracted services, and reduction of clients accessing behavioral consultation to 60 clients.

Additionally, Family Support services were eliminated, and there were reductions to the following client services: a reduction of 15% in monthly service rate for Children In-Home-Services, and a 6% reduction in service rates for 24 hour residential, supported living, child foster care, transportation and vocational/alternative to employment. There was also a 3.5% service rate reduction in crisis service rates. This has impacted client services by diminishing the level of staffing contracted agencies provide, limited access to crisis services and reduction in families access to respite care and behavior consultation.



### Aging and Disability Services

Aging and Disability Services Division (ADS), the county's Area Agency on Aging and Disability, helps the county's 200,000 older adults and people with disabilities to live as independently as possible by linking them to a wide range of quality services that meet diverse needs and preferences. ADS assists an increasing number of veterans with disabilities and helps family caregivers obtain the resources they need. The division is now seeing the predicted increase in the aging population, particularly the over-65 cohort and seniors over 85, in need of long term care supports to remain independent.

A key goal is to reach seniors and people with disabilities and their families as early as possible to help them plan for their changing needs to maintain the best health and independence possible. National studies have shown that assuring easy access to information and options, as early as possible, allows seniors and people with disabilities to stay independent and/or transition to community settings more quickly avoiding prolonged nursing facility stays.

ADS complete the transformation of the information and assistance services in accordance with the Aging and Disability Resource Center (ADRC) model, a national best practice. ADS was awarded grants to implement a number of evidence based practices that emphasize prevention and promote healthy aging. The division was selected to participate in a national technical assistance training on strategic, business and resource development that will help develop an equity framework as a foundation for ADS operations.

### Significant Changes

Our Aging and Disability Resource Center (ADRC) is entering the implementation phase and corresponding organizational transformation is scheduled for completion within two years in alignment with the upcoming statewide Department of Human Service (DHS) mandate. The ADRC is a highly visible, trusted source for unbiased information and assistance and offers decision support for seniors and people with physical disabilities, their families and caregivers to assist them in determining what care options best fit their needs and preferences.

Service delivery for program offer 25021 Multnomah Project Independence (MPI) is being restructured to consolidate case management within the division and integrate more closely with other county programs to achieve better connections to benefits and services available. Programmatic efficiencies and focus on short-term intensive case management and greater self-management will provide county General Fund savings.

Over the coming year, ADS will complete implementation of the Community Living Program serving non-Medicaid clients and the Veterans Home and Community Based Services program which will give veterans new benefits and community based care options.

### Domestic Violence

The Multnomah County Domestic Violence Coordination Office (DVCO) provides leadership, consultation and technical assistance in the development of effective, state-of-the-art responses to domestic violence (DV). DVCO manages county, state and federal funds for victim services, leads, facilitates the development and implementation of collaborative projects, and assists in the procurement of resources for those projects. Collaborative projects led by DVCO include DV Enhanced Response Team (DVERT), assistance to victims and their children involved in the Child Welfare system (Safe Start), transitional housing projects and the Defending Childhood Initiative to develop a strategic plan for responding to children exposed to violence.

The County has built a multi-disciplinary, multi-jurisdiction, coordinated system that responds to victims and perpetrators: 5,000 victims receive community-based in-person services, 2,000 receive District Attorney-based services, and 30,000 receive assistance by phone. Over 4,000 offenders are jailed, 1,400 are prosecuted, and 1,000 are supervised by Department of Community Justice.

Despite these efforts, DV remains a significant and growing problem: in 2010, DV-related homicides doubled compared to 2009 and there were significant increases in the number of calls to crisis lines and shelters in 2010. Coordinated and collaborative efforts to more effectively respond to the highest risk cases continue throughout the system.

### Significant Changes

There are no significant programmatic or budget changes in the FY 2012. However, two events occurred in 2011 which will impact the division going forward:

1. The DV Coordinator announced her retirement (as of March 2011) and her replacement should be in place by the end of FY 2011.
2. DCHS received a Defending Childhood Grant from the Department of Justice, one of eight demonstration projects nationally. This collaborative effort will complete strategic planning in FY 2011. It is expected that additional federal funding will be awarded to Multnomah County in FY 2012 to continue implementation of the strategic plan. DVCO has engaged a wide range of community partners and county programs including schools, culturally specific community providers, law enforcement, state child welfare, Mental Health and Addiction Services (MHASD), and other agencies that serve children.

## Mental Health and Addiction Services

The Mental Health and Addiction Services Division's (MHASD) mission is to build and maintain high quality, accessible and culturally competent systems of care for children, youth and adults with a mental illness or addiction. Our continuum of services ranges from prevention in early childhood settings to treatment for school-aged and transition-age youth as well as adults and seniors.

Multnomah County serves both a large population base and a large proportion of individuals with a severe mental illness, including a higher proportion of individuals with schizophrenia and other psychotic disorders (21% of mental health services) than the state average (17%). Multnomah County also serves a disproportionately large number of adults whose mental illness is severe enough to require residential care in the county's 45 residential treatment homes and licensed facilities, for a total of 390 beds. According to the State of Oregon Data Book, 11% of adults and 18% of youth in our county reported having a major depressive episode in the past year. The percentage of county residents aged 12 or older abusing alcohol is higher than the state percentage.

MHASD has built a system of care that all of our citizens can access whether they are uninsured or are one of the 100,000 enrolled in Verity, the county's mental health organization for Oregon Health Plan (OHP) members. Our 24/7 crisis services are available to anyone in our community in need of assistance.

## Significant Changes

The Early Assessment and Support Alliance (EASA), in its third year of operation, has shown a 90% reduction in hospitalization for youth and young adults, aged 15 to 25, enrolled in this innovative prevention program. EASA graduated its first class in summer 2010.

Multnomah County accepted responsibility for operating School-Aged Wraparound as of July 1, 2010. In December 2010, MHASD procured a provider to operate the Crisis Assessment and Treatment Center. Telecare Corporation was selected and the center will open in late spring 2011.

The State of Oregon implemented the Adult Mental Health Initiative (AMHI) state-wide. The goal of this initiative is to move individuals with severe mental illness from structured and long-term care, such as state hospital and residential facilities, to independent community settings with appropriate wraparound supports.

In accord with federal and state health care reform, MHASD is working with the county Health Department, OHP physical health plans and community treatment providers to continue building the infrastructure necessary to deliver integrated health care that meets the needs of those we serve.

In 2010, Multnomah County piloted a client survey tool that allows us to measure and compare client treatment outcomes system-wide. We can make improvements to our system of care based on these outcome data: one of the goals of state and federal health care reform.

### Community Services Division

The Community Services Division's mission is to align services in order to create systems of support that impact poverty and increase academic success. Services are organized into three areas: Energy; Homelessness and Housing; and Anti-Poverty/Prosperity. A variety of services and supports are provided to 27,555 of the approximately 70,000 county households who meet 200% of 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 and cross-jurisdictional initiatives. The division is the Community Action Agency for Multnomah County.

Forty-five percent of Portland households pay more than 30% of their monthly income for housing - are cost burdened. Workers with a full-time, minimum wage job cannot afford apartments of any size at fair market rates in the metro area without being cost burdened. County unemployment rates continue to remain high. Twenty-five percent of county children under the age of 5 live in poverty, with children of color represented at three times the rate of Caucasian children. This is the environment in which the division works and current need for services far outstrips available resources. The division's mission is to provide innovative and strategic thinking, leadership, action, and investment in economic development if our ability to exist and prosper as a caring community is to be preserved.

### Significant Changes

Systems Alignment include: beginning the next phase of Action for Prosperity II; continuing work on the 10 Year Plan to End Homelessness in collaboration with Portland Housing Bureau and HAP; reorganizing a number of Division program offers related to housing and homelessness in order to more clearly portray identified systems of care.

Innovations include: expanding the 30 Families in 30 Days pilot into the Rapid Rehousing Initiative which has been funded to serve 70 families in FY 2012; developing a full system of care for commercially sexually exploited children; implementing the Promise Neighborhood model for African-American and Latino youth as a part of the youth gang violence prevention.

Efficiencies included: reduction of 5.00 FTE through job reassignments to improve Weatherization Program client service; reduction of approximately \$250,000 in general fund supported IT costs by accessing grant funds; reduction of approximately \$112,000 in costs to the Multnomah Treatment Fund (MTF) through the Homeless Benefits Recovery Project, allowing MTF to serve additional uninsured members of the community living with mental illness.

Additional funding for Short-Term Rent Assistance provided to match increased HAP funding and leverage city general funding; to meet county commitment, Bridges to Housing services fully funded to serve 139 homeless families.

### SUN Service System

The SUN Service System Division has three main areas of effort: contracting for services that promote academic success and family self sufficiency through the SUN Service System; program delivery and service coordination through the Bienestar Social Service program at the Baltazar Ortiz Center; and management of data collection, reporting and evaluation activities.

As a service delivery system, the division contracts for a continuum of school-based and community-sited services that support student success and family self-sufficiency. Services include 64 SUN Community Schools, youth case management, early childhood supports and anti-poverty/prosperity services for families. An important emphasis in the SUN SS is on partnership development and collaboration; administrative staff engage in many such activities in order to align services, build partnerships and strengthen the system. Staffing for the SUN Service System Coordinating Council, its workgroups, and program development in four key program areas are examples of these efforts. The Bienestar Social Service program is an important gateway into an array of services for Multnomah County's Latino community. Staff at Bienestar 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 SUN SS and the Community Services divisions.

### Significant Changes

The SUN SS has not undergone any major changes in the past year; likewise, none are planned for FY 2012. A few new or redesigned efforts of note:

1. In FY 2011, the new Child and Family Hunger Relief Program is allowing SUN Community Schools to significantly decrease hunger and food insecurity in over 20 SUN neighborhoods. 58,000 additional meals will be provided in FY 2011 through extended summer lunch days, non-school days and weekend food pantries. In FY 2012, we estimate that the project will provide over 100,000 meals. The project leverages approximately \$300,000 of federal nutrition dollars through 6 school district partners.
2. In the past year, in coordination with Mental Health and Addiction Services Division, SUN SS shifted the focus of its Alcohol, Tobacco and Other Drug services for youth to increase prevention services. This focus complements the treatment services newly available through Oregon Health Plan and contracted treatment beds available through Addictions.
3. In FY 2012 the program anticipates beginning a SUN Community School at David Douglas High School - the largest high school in the state. Anticipated funding is as follows: the City of Portland is planning to contribute \$100,000, the County \$25,000 and the School District \$10,000. This layered funding contribution reflects the commitment from SUN's system partners to jointly expand SUNCS.

### Department of County Human Services

The following table shows the programs that make up the departments total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>					
25000	Director's Office	\$628,925	\$441,875	\$1,070,800	4.00
25001	Human Resources	386,034	368,636	754,670	6.00
25002	Business Services Unit	2,055,731	1,080,782	3,136,513	21.50
25003	Contracts	907,826	92,766	1,000,592	10.00
<b>Developmental Disabilities Services</b>					
25010	DD Administration and Support	686,461	1,574,398	2,260,859	14.00
25011	DD Systems, Contracts and Budget	432,189	8,312,166	8,744,355	8.00
25012	DD Services for Adults	0	2,595,243	2,595,243	26.00
25013	DD Services for Children	320,021	3,219,948	3,539,969	34.80
25014	DD Abuse Investigations	235,309	479,603	714,912	7.00
25015	DD Monitoring and Crisis Services Unit	0	5,129,427	5,129,427	14.10
25016	DD Eligibility and Intake Services	443,982	236,297	680,279	6.00
<b>Aging and Disability Services</b>					
25020A	ADS Access and Early Intervention Services	3,062,779	6,236,424	9,299,203	23.85
25021	Multnomah Project Independence - Restructure	294,805	0	294,805	1.00
25022A	ADS Adult Care Home Program	66,639	1,630,367	1,697,006	12.80
25022B	Continuing Service Level for FY 2012 (ACHP)	0	35,201	35,201	0.20
25023A	ADS Long Term Care	1,747,400	21,385,548	23,132,948	205.30
25023B	Adopted FY 2011 Service Level (LTC)	0	818,143	818,143	10.50
25023C	Continuing Service Level for FY 2012 (LTC)	0	229,854	229,854	3.00
25024A	ADS Adult Protective Services	864,132	3,852,056	4,716,188	34.60
25024B	Adopted FY 2011 Service Level (APS)	0	203,236	203,236	2.00
25024C	Continuing Service Level for FY 2012 (APS)	0	77,097	77,097	1.00
25026	ADS Public Guardian/Conservator	1,132,802	0	1,132,802	10.00
25027A	ADS Administration	344,183	876,330	1,220,513	5.80
25027B	Continuing Service Level for FY 2012 (Admin)	0	92,268	92,268	0.00
25028	Bed Bug Eviction Mitigation	102,053	0	102,053	0.40

# County Human Services

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
25030	ADS Elders in Action Commission and Personal Advocacy	161,160	0	161,160	0.00
25032	Gatekeeper Outreach - Identifying Vulnerable Adults	43,827	0	43,827	0.00
<b>Domestic Violence</b>					
25040A	Domestic Violence Victims Services and Coordination	2,155,225	1,244,688	3,399,913	7.50
25040B	Domestic Violence Safe Start Collaboration	44,083	0	44,083	0.00
25040C	Prosperity and Stability for Domestic Violence Survivors	53,600	0	53,600	0.00
<b>Mental Health and Addictions Services</b>					
25050	MHASD Administration	139,462	830,148	969,610	5.50
25052	Medical Records for MHASD	703,010	0	703,010	8.00
25053	Mental Health Quality Management and Protective Services	461,615	1,302,199	1,763,814	14.10
25054	MHASD Business and Finance	369,848	1,536,609	1,906,457	7.85
25055	Behavioral Health Crisis Services	1,073,345	5,599,659	6,673,004	20.76
25056	Mental Health Subacute Facility - Operating	597,500	2,902,548	3,500,048	0.00
25057	Inpatient, Subacute and Residential Mental Health Services for Children	0	3,564,843	3,564,843	0.00
25058	Mental Health Commitment Services	1,125,224	4,200,584	5,325,808	30.10
25060A	Mental Health Residential Services	945,746	9,188,028	10,133,774	7.80
25060B	Adult Mental Health Initiative: Residential	0	1,744,520	1,744,520	5.25
25062	Mental Health Services for Adults	284,000	20,590,019	20,874,019	0.50
25063	Mental Health Treatment and Medications for the Uninsured	1,351,826	316,150	1,667,976	0.00
25064A	Early Assessment and Support Alliance	0	1,099,592	1,099,592	7.20
25065	Victims and Survivors of Domestic Violence	32,000	0	32,000	0.00
25066	Mental Health Organization Provider Tax	0	465,000	465,000	0.00
25067	Community Based Mental Health Services for Children and Families	1,541,007	11,776,566	13,317,573	18.85
25068	Children's Mental Health Wraparound	0	1,710,621	1,710,621	9.70
25069	Wraparound ASO	0	289,278	289,278	3.50
25070	Bienestar Mental Health and Addictions Services	268,231	0	268,231	2.10
25075	School Based Mental Health Services	534,920	1,057,960	1,592,880	13.84

# County Human Services

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
25078	Culturally Specific Mental Health Services	1,292,239	0	1,292,239	0.00
25080	Adult Addictions Treatment Continuum	2,832,257	8,476,779	11,309,036	6.70
25085	Addiction Services Gambling Treatment and Prevention	0	355,537	355,537	0.30
25086	Addiction Services Alcohol and Drug Prevention	0	194,259	194,259	0.00
25088	Coordinated Diversion for Persons with Mental Illness	235,433	645,612	881,045	8.00
25090	Addictions Detoxification and Post-Detoxification Housing	1,237,166	1,878,359	3,115,525	0.00
25091A	Sobering	627,722	0	627,722	0.00
25094	Family and Youth Addictions Treatment Continuum	272,941	785,602	1,058,543	0.00
25098	Family Involvement Team	0	1,537,746	1,537,746	0.00
<b>Community Services</b>					
25111A	Homeless Families' Shelter and Emergency Services	691,009	0	691,009	0.00
25111B	Winter Shelter for Homeless Families	60,000	0	60,000	0.00
25111C	Rapid Re-Housing Initiative	325,000	0	325,000	0.00
25114A	Bridges to Housing	467,516	0	467,516	0.00
25114B	B2H - Final Stabilization	480,000	0	480,000	0.00
25115	Homeless Benefit Recovery Project	401,265	0	401,265	0.00
25118	Community Services Administration	868,203	0	868,203	7.50
25119	Energy Assistance	90,280	10,282,112	10,372,392	5.03
25121	Weatherization	151,407	4,929,037	5,080,444	10.97
25123	Youth Gang Prevention	1,282,678	0	1,282,678	1.00
25127	Court Care	28,673	28,110	56,783	0.00
25133A	Housing Stabilization for Vulnerable Populations	1,282,604	627,277	1,909,881	4.00
25133C	East County Homeless Outreach	75,000	0	75,000	0.00
25133D	Streetroots - Rose City Resource Guide	20,000	0	20,000	0.00
25133E	Short-Term Rent Assistance System	500,000	0	500,000	0.00
25136A	Homeless Youth System	2,138,160	1,104,048	3,242,208	0.83



# County Human Services

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
25137	Native American Child Development Services	38,604	0	38,604	0.00
25138A	Runaway Youth Services	742,474	189,476	931,950	0.17
25138B	CCFC Reductions Backfill	204,000	0	204,000	0.00
25139A	Anti-Poverty Services	675,273	2,555,604	3,230,877	2.00
25139B	Action for Prosperity	195,000	0	195,000	0.00
25140	Community Development	67,592	624,881	692,473	1.00
25141	211 Info Line	48,462	0	48,462	0.00
25142	Family Economic Security Project	54,239	0	54,239	0.00
<b>SUN Service System</b>					
25143	SUN Service System Administration	914,694	0	914,694	7.53
25145A	SUN Community Schools	3,187,998	450,444	3,638,442	2.34
25145B	SUN Community Schools Scale	25,000	100,000	125,000	0.00
25145C	SUN Community Schools Scale C	150,000	0	150,000	0.00
25147	Child and Family Hunger Relief	125,000	66,000	191,000	0.80
25149	Social and Support Services for Education Success	1,910,724	326,264	2,236,988	1.00
25151A	Parent Child Development Services	1,296,922	147,961	1,444,883	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	461,488	0	461,488	3.80
<b>Total Department of County Human Services</b>		<b>\$51,363,863</b>	<b>\$163,691,785</b>	<b>\$215,055,628</b>	<b>688.37</b>

(this page intentionally left blank)

**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of formal communications to employees <sup>1</sup>	79	45	50	50
Outcome	Advisors agree/strongly agree w/statement: Overall, D.O. does its job well <sup>2</sup>	92.0%	0.0%	0.0%	92.0%
Output	Legislative contacts <sup>3</sup>	15	30	15	10

**Performance Measure - Description**

<sup>1</sup>Formal communications include 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>	2011	2011	2012	2012
Personnel	\$265,091	\$372,307	\$378,460	\$184,252
Contracts	\$266,723	\$149,417	\$207,733	\$69,625
Materials & Supplies	\$2,771	\$40,847	\$31,185	\$16,090
Internal Services	\$27,249	\$45,914	\$11,547	\$171,908
Total GF/non-GF:	<b>\$561,834</b>	<b>\$608,485</b>	<b>\$628,925</b>	<b>\$441,875</b>
Program Total:	<b>\$1,170,319</b>		<b>\$1,070,800</b>	
Program FTE	2.28	2.72	2.68	1.32
<b>Program Revenues</b>				
Fees, Permits & Charges	\$561,834	\$0	\$628,925	\$0
Intergovernmental	\$0	\$608,485	\$0	\$441,875
<b>Total Revenue:</b>	<b>\$561,834</b>	<b>\$608,485</b>	<b>\$628,925</b>	<b>\$441,875</b>

## Explanation of Revenues

\$397,570 - Title XIX: Based on FY11 Revised Budget

\$44,305 - State Mental Health Grant Local Admin: Based on FY11 Revised Budget

\$628,925 - County General Fund Department Indirect: Based on FY12 Dept Indirect Rate published by Central Finance

## Significant Program Changes

**Last year this program was:** #25000, DCHS Directors Office

Reduction of one FTE: Research and Evaluation Analyst 1. Department Indirect includes indirect allocation of Verity funding from Mental Health.

**Lead Agency:** County Human Services

**Program Contact:** Urmila Jhattu

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

DCHS Human Resources support nearly 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; 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. Organizational 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of recruitments conducted	104	105	105	110
Outcome	Management satisfaction with HR consultation and services <sup>1</sup>	18.0%	70.0%	60.0%	70.0%

**Performance Measure - Description**

<sup>1</sup>New HR manager hired in FY10; conducted satisfaction survey to determine baseline performance.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$231,273	\$392,529	\$375,579	\$298,395
Contracts	\$3,831	\$1,000	\$1,307	\$100
Materials & Supplies	\$2,006	\$13,314	\$2,540	\$17,302
Internal Services	\$9,357	\$67,282	\$6,608	\$52,839
<b>Total GF/non-GF:</b>	<b>\$246,467</b>	<b>\$474,125</b>	<b>\$386,034</b>	<b>\$368,636</b>
<b>Program Total:</b>	<b>\$720,592</b>		<b>\$754,670</b>	
Program FTE	2.05	3.45	3.36	2.64
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$0	\$96,722	\$0
Intergovernmental	\$0	\$474,125	\$0	\$368,636
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$474,125</b>	<b>\$96,722</b>	<b>\$368,636</b>

## Explanation of Revenues

\$320,411 - Title XIX: Based on FY11 revised budget

\$48,225 - State Mental Health Grant Local Admin: Based on FY11 revised budget

\$96,722 - County General Fund Department Indirect: Based on FY12 Dept Indirect Rate published by Central Finance

\$289,312 - County General Fund

## Significant Program Changes

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

Human Resources Analyst 2 position increased by .5 FTE to meet HR consultation and service demands. Department Indirect includes indirect allocation of Verity funding from Mental Health.

**Lead Agency:** County Human Services

**Program Contact:** Dana Lloyd

**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 140 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 represent 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Percent of invoices paid in 30 days or less	75.0%	81.0%	75.0%	77.0%
Outcome	Percent of grant financial reports submitted to the grantor error free	98.0%	99.0%	98.0%	98.0%

**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>	2011	2011	2012	2012
Personnel	\$860,816	\$1,018,968	\$1,160,328	\$728,346
Contracts	\$766,661	\$20,000	\$810,270	\$6,400
Materials & Supplies	\$2,200	\$44,334	\$35,864	\$22,514
Internal Services	\$11,000	\$536,118	\$49,269	\$323,522
<b>Total GF/non-GF:</b>	<b>\$1,640,677</b>	<b>\$1,619,420</b>	<b>\$2,055,731</b>	<b>\$1,080,782</b>
<b>Program Total:</b>	<b>\$3,260,097</b>		<b>\$3,136,513</b>	
Program FTE	10.05	11.45	13.30	8.20
<b>Program Revenues</b>				
Fees, Permits & Charges	\$203,753	\$0	\$621,324	\$0
Intergovernmental	\$0	\$1,619,420	\$0	\$1,080,782
<b>Total Revenue:</b>	<b>\$203,753</b>	<b>\$1,619,420</b>	<b>\$621,324</b>	<b>\$1,080,782</b>

## Explanation of Revenues

\$686,461 - Title XIX: Based on FY11 revised budget

\$394,321 - State Mental Health Grant, Local Admin: Based on FY11 revised budget

\$621,324 - County General Fund Department Indirect: Based on FY12 Dept Indirect Rate published by Central Finance

\$688,641 - County General Fund Match

\$745,766 - County General Fund

## Significant Program Changes

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

Department Indirect includes indirect allocation of Verity funding from Mental Health.



**Lead Agency:** County Human Services

**Program Contact:** Dana Lloyd

**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 Purchasing. 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.

In FY12, the Contracts Unit will continue to take a lead role in the implementation of the January 2009 Contract Action Team Report recommendations through the Contract Redesign process. It will also actively participate in the implementation of Procurement for Public Sector (PPS).

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of executed contracts and amendments <sup>1</sup>	450	600	600	400
Outcome	Percent of annual contract renewals executed prior to July 1st <sup>2</sup>	96.0%	80.0%	70.0%	80.0%

**Performance Measure - Description**

<sup>1</sup>Fewer new contracts will be written for FY12 due to the five (5) year contracts in place. Consequently, the heavy workload will be shifted to the updating internal SAP contract documents.

<sup>2</sup>Due to timing of Contract Services Redesign and PPS implementation, overall outcome for FY11 may be impacted.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$667,147	\$234,403	\$888,541	\$22,043
Contracts	\$5,056	\$500	\$5,056	\$0
Materials & Supplies	\$10,202	\$6,941	\$3,604	\$18,271
Internal Services	\$67,024	\$28,687	\$10,625	\$52,452
<b>Total GF/non-GF:</b>	<b>\$749,429</b>	<b>\$270,531</b>	<b>\$907,826</b>	<b>\$92,766</b>
<b>Program Total:</b>	<b>\$1,019,960</b>		<b>\$1,000,592</b>	
Program FTE	7.35	2.65	9.79	0.21
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$0	\$172,915	\$0
Intergovernmental	\$0	\$270,531	\$0	\$92,766
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$270,531</b>	<b>\$172,915</b>	<b>\$92,766</b>

## Explanation of Revenues

\$92,766 - State Mental Health Grant Local Admin: Based on FY11 revised budget

\$172,915 - County General Fund Department Indirect: Based on FY12 Dept Indirect Rate published by Central Finance

\$734,911 - County General Fund

## Significant Program Changes

**Last year this program was:** #25003, DCHS Contracts

Department Indirect includes indirect allocation of Verify funding from Mental Health.

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Administration provides oversight and assures Medicaid status of the Developmental Disabilities Services Division. This unit ensures more than 4,200 people are provided quality case management, and, where eligible, provided employment supports in the community, and residential services. Administration leads the agency in continuous quality performance improvement through records management; monthly quality assurance activities that include comprehensive file reviews, staff training and site visits; and strategic analysis of DDSD business functions.

**Program Description**

Developmental Disabilities Administration oversees all programs and partners, and seeks resolution on complaints and grievances. In addition, 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 of leadership, resource management and performance-based outcomes. Outreach is extended to diverse under-represented populations. The division leverages federal match for administrative services using county funds to provide administrative tracking and oversight required by the state.

In an effort to shift towards industry best practices there have been some significant changes to the methodology used for quality assurance in the division. In this new methodology, DD management review client records using a stratified sampling method with a more focused review that is statistically valid, and is in compliance with federal and state requirements and the most recent Oregon Administrative Rule changes. Along with these changes, the division has also improved its performance outcome measures as a result of consultation with the Federal Centers for Medicare and Medicaid Services Technical Assistance contractor.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of client records audited annually for compliance <sup>1</sup>	0	4,240	4,281	3,900
Outcome	% of records audited that are Medicaid Compliant.	0.0%	65.0%	60.0%	65.0%

**Performance Measure - Description**

<sup>1</sup> Output measure includes Serious Event Review Team (SERT) audits done by SERT committee monthly. Last year the audits were based on a monthly average of 200 per month, it is closer to 300 per month for FY11.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$1,257,416	\$0	\$1,288,762
Contracts	\$540,998	\$55,000	\$686,461	\$52,195
Materials & Supplies	\$25,576	\$23,965	\$0	\$28,114
Internal Services	\$0	\$132,455	\$0	\$205,327
<b>Total GF/non-GF:</b>	<b>\$566,574</b>	<b>\$1,468,836</b>	<b>\$686,461</b>	<b>\$1,574,398</b>
<b>Program Total:</b>	<b>\$2,035,410</b>		<b>\$2,260,859</b>	
Program FTE	0.00	13.59	0.00	14.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,468,836	\$0	\$1,354,264
Other / Miscellaneous	\$0	\$0	\$0	\$220,134
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,468,836</b>	<b>\$0</b>	<b>\$1,574,398</b>

## Explanation of Revenues

\$1,347,069 - State Mental Health Grant Local Admin: Based on FY11 revised budget  
 \$7,195 - State Mental Health Grant Case Management: Based on FY11 revised budget and FY10 Accepted Match Application  
 \$220,134 - Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover  
 \$686,461 - County General Fund Match - Based on FY10 Accepted Match Application

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

Elimination of 0.59 FTE Program Manager 2 in November budget modification.  
 Moved .50 FTE OA 2 from PO 25012.

**Lead Agency:** County Human Services

**Program Contact:** Leslie Goodlow Baldwin

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Developmental Disabilities Systems, Contracts and Budget unit provides oversight for the division's budget, client systems for enrolling clients into services, and procurements and contracts. The unit is responsible for managing funding for comprehensive services to clients. Unit staff track and verify revenue, ensure the funds are applied to appropriate cost centers, oversee expenses and changes that are incurred. The unit conducts monthly review of each service element to ensure they balance to the State CPMS system for those services paid by the county and to eXPRS for those services paid directly by the state. The unit is responsible for submitting all required forms to the State for client service changes, monitoring funding for services and ensuring appropriate application of waived services. In addition, the unit ensures availability of State funded services to clients by managing and monitoring provider contracts.

**Program Description**

In maintaining and managing the personnel budget the division works with the Department Administration and Business Services to identify revenue versus positions and costs to develop an annual budget for the division. This also includes processing budget modifications and providing budget analysis as needed. The unit is responsible for management of 75-80 service contracts with providers per year which involves determination of regulatory requirements; initiation of appropriate contracts, amendments and negotiation of contract terms and conditions; as well as following and implementing county administrative process. The unit is responsible for tracking and verifying revenue for 24 hour residential, foster care and employment which are direct pay to providers from the state; transportation, rent subsidy, county crisis funds, family support funds, kids long-term diversion and adult in-home services which are paid through the county to providers; and targeted case management and LA02(local admin funds) which are for personnel and operating expenses. This includes the ongoing review and reporting of funding allocations, service expenditures, completing and securing budget approval, and verifying client enrollment in the service. In managing the revenue and expenditures, the unit tracks all employee costs for 130 employees and approximately 2,000 clients in comprehensive services.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of 0337 forms accurately processed monthly.(1)	0.0%	0.0%	0.0%	80.0%
Outcome	% of errors noted in monthly CPMS reconciliation.(2)	0.0%	0.0%	0.0%	20.0%

**Performance Measure - Description**

1) The 0337 form is the mechanism in which clients are entered into and exited from services. This program is responsible for ensuring accurate completion and data entry into the State eXPRS system.

2) This unit is responsible for reconciling expenditures to funds received from Seniors & People with Disabilities for support services. In order to ensure our information matches what the State CPMS system has.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$32,729	\$864,325	\$0	\$757,273
Contracts	\$401,851	\$41	\$420,189	\$44
Materials & Supplies	\$4,965	\$8,262,708	\$12,000	\$7,437,519
Internal Services	\$5,960	\$134,112	\$0	\$117,330
<b>Total GF/non-GF:</b>	<b>\$445,505</b>	<b>\$9,261,186</b>	<b>\$432,189</b>	<b>\$8,312,166</b>
<b>Program Total:</b>	<b>\$9,706,691</b>		<b>\$8,744,355</b>	
Program FTE	0.00	8.00	0.00	8.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$9,261,187	\$0	\$8,186,375
Other / Miscellaneous	\$0	\$0	\$0	\$125,791
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$9,261,187</b>	<b>\$0</b>	<b>\$8,312,166</b>

## Explanation of Revenues

\$3,984 – Housing Authority of Portland: Based on FY11 revised budget  
 \$24,498 – Housing Authority of Portland, ARRA: Based on FY11 award  
 \$764,811 – State Mental Health Grant Local Admin: Based on FY11 revised budget \$7,393,021 – State Mental Health Grant: Based on FY11 revised budget  
 \$125,791 – Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover  
 \$383,322 – County General Fund Match - Based on FY10 Accepted Match Application  
 \$40,653 - County General Fund

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

This program was included in 25015 DD Coordination, Monitoring and Crisis Services. It was moved into a separate program offer in order to distinguish between client services and operational services.

FTE moved from 25015 include: 1.0 FTE PM1, 3.0 FTE PDS Sr, 1.0 FTE OA sr, 1.0 FTE Data Tech, 1.0 FTE Admin Analyst, 1.0 FTE PDS.

The funding for client services which this program oversees was also moved to this PO:

SE County 44 (Crisis), 53 (transportation), 56 (rent subsidy), 45 (nursing home), 150 (family support), 151 (kids long-term diversion), and 49 (adult in-home comp). Also added is DD58 which is replacing 57 for 'special projects'.

**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 customers, approximately 1,178 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, 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. We assist in developing skills, confidence, self-worth and independence in order to assist adults with developmental disabilities in the areas of self-care, behavior and resource coordination. 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 and/or neglect are more likely to be detected and investigated. The importance of monitoring will increase as financial cuts are made to long-term residential and vocational services for adults.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total number of adults served.	2,300	2,300	2,300	2,300
Outcome	Total monitoring visits for residential sites <sup>1</sup>	8,649	7,980	7,280	4,850

**Performance Measure - Description**

<sup>1</sup> On December 1, 2010 an emergency rule change was made to the OAR related to required monitoring actions at residential sites. The rule change was made to accommodate the funding cuts to programs serving people with developmental disabilities. The frequency of required monitoring is changing from 11 times per fiscal year to 5 times per fiscal year. Although fewer visits will be required, the rule change will increase the importance of monitoring visits. On-site visits will meet more than minimum expectations in the event of findings of health and/or safety risk.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$2,251,786	\$0	\$2,176,794
Contracts	\$0	\$0	\$0	\$5,000
Materials & Supplies	\$0	\$48,035	\$0	\$118,877
Internal Services	\$0	\$438,328	\$0	\$294,572
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$2,738,149</b>	<b>\$0</b>	<b>\$2,595,243</b>
<b>Program Total:</b>	<b>\$2,738,149</b>		<b>\$2,595,243</b>	
Program FTE	0.00	27.41	0.00	26.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,738,149	\$0	\$2,571,654
Other / Miscellaneous	\$0	\$0	\$0	\$23,589
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,738,149</b>	<b>\$0</b>	<b>\$2,595,243</b>

## Explanation of Revenues

\$150,151 – State Mental Health Grant Local Admin: Based on FY11 revised budget

\$2,421,503 – State Mental Health Grant Case Management: Based on FY11 revised budget and FY10 Match Application

\$23,589 – Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

Elimination of 1.0 FTE Case Manager senior and 0.41 FTE Program Manager 2 in November State reduction.

Moved .50 FTE OA 2 to PO 25010.



**Lead Agency:** County Human Services

**Program Contact:** Jeanne Wheaton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program serves approximately 1,800 children (birth to 21) who have been determined by the Developmental Disabilities Services Division to have a developmental disability. Of these, approximately 880 children aged birth through age 17 are actively enrolled in the Family Support Program. 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 to prevent placement in child foster care and residential sites.

**Program Description**

Services for children and young adults are person-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. Funding for the Family Support Program was eliminated effective February 28, 2011. Person-centered planning helps to identify the customer's interests, focuses on strengths, promotes independence and self worth, and maps out family, friends and community members as potential resources. 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 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 remain in their family homes. Resource referrals increase in importance due to the budget cuts in programs for children.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of children served.	1,880	1,900	1,900	1,900
Outcome	Total children enrolled in and accessing family support services <sup>1</sup>	785	850	850	0
Outcome	# of resource referrals to families with children enrolled in family support <sup>2</sup>	0	0	5,300	5,350

**Performance Measure - Description**

<sup>1</sup> Focus on FY 11-12 will return to resource referrals, with funding cuts resource referrals increase in importance. Discontinue this outcome measure for FY 11-12.

<sup>2</sup> Outcome changed to reflect focus to assure all children not in comprehensive services were enrolled in Family Support Program.

The Family Support Program is for children who are not enrolled in a paid comprehensive service. The funding to assist families with respite and unpaid medical expenses was eliminated in March 2011. These children will continue to receive case management services only. There is no associated FTE reduction with the elimination of this program funds.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$27,830	\$3,137,664	\$0	\$2,959,608
Contracts	\$24,140	\$0	\$24,140	\$0
Materials & Supplies	\$178	\$68,530	\$0	\$54,955
Internal Services	\$1,656	\$587,774	\$295,881	\$205,385
<b>Total GF/non-GF:</b>	<b>\$53,804</b>	<b>\$3,793,968</b>	<b>\$320,021</b>	<b>\$3,219,948</b>
<b>Program Total:</b>	<b>\$3,847,772</b>		<b>\$3,539,969</b>	
Program FTE	0.10	38.50	0.00	34.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$2,298	\$0
Intergovernmental	\$0	\$3,793,968	\$0	\$3,127,536
Other / Miscellaneous	\$0	\$0	\$0	\$92,412
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$3,793,968</b>	<b>\$2,298</b>	<b>\$3,219,948</b>

## Explanation of Revenues

\$246,832 – State Mental Health Grant Local Admin: Based on FY11 revised budget

\$2,880,704 – State Mental Health Grant Case Management: Based on FY11 revised budget and FY10 Match Application

\$92,412 – Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover

\$320,021 – County General Fund

## Significant Program Changes

### Last year this program was:

Elimination of 2.0 FTE vacant Case Manager 2 positions in November state reduction.

Elimination of 1.7 FTE Case Manager 2, .10 FTE Psychiatrist for FY12.

**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 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 over 4,000 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 facilitates the District Attorney’s Multi-Disciplinary Team as legislated in House Bill 2442.

**Program Description**

The Abuse Investigations Team screened 4,108 serious incident reports in Fiscal Year 09-10 and is projected to screen nearly 4,200 in Fiscal Year 10-11. 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. Investigators perform these duties as the designee of the State of Oregon and under the oversight of the Office of Investigations and Training.

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 county 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 2010, 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 in accordance with HB 2442.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of Investigations <sup>1</sup>	267	300	275	300
Outcome	Investigations completed within 45 days per OAR <sup>2</sup>	94.0%	85.0%	95.0%	85.0%

**Performance Measure - Description**

<sup>1</sup> Number of abuse investigations refers to the number of investigations opened and closed during the fiscal year or the number of investigations opened during the fiscal year that have current extensions approved by OIT. Expansion of the abuse definitions in accordance with HB 2442 in January 2010 resulted in most investigations requiring one or more approved extensions.

<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**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$428,088	\$579,788	\$198,274	\$402,532
Contracts	\$16,200	\$0	\$0	\$0
Materials & Supplies	\$8,536	\$11,375	\$3,786	\$10,291
Internal Services	\$78,947	\$69,458	\$33,249	\$66,780
<b>Total GF/non-GF:</b>	<b>\$531,771</b>	<b>\$660,621</b>	<b>\$235,309</b>	<b>\$479,603</b>
<b>Program Total:</b>	<b>\$1,192,392</b>		<b>\$714,912</b>	
Program FTE	5.16	7.84	2.33	4.67
<b>Program Revenues</b>				
Intergovernmental	\$0	\$660,623	\$0	\$355,170
Other / Miscellaneous	\$0	\$0	\$0	\$124,433
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$660,623</b>	<b>\$0</b>	<b>\$479,603</b>

**Explanation of Revenues**

\$59,723 – State Mental Health Grant Local Admin: Based on FY11 revised budget  
 \$295,447 – State Mental Health Grant: Based on FY11 revised budget  
 \$124,433 – Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover  
 \$235,309 – County General Fund

**Significant Program Changes**

 **Significantly Changed**

**Last year this program was:**

This program was combined with Eligibility and Intake for FY 10-11. This FY we have separated them into two program offers.

Moved PO 25016 1.0 FTE Program Supervisor, 4.0 FTE Clinical Services Specialists (formerly Social Workers), 1.0 FTE Office Assistant Sr.

Elimination of 3.0 FTE Human Services Investigators, 1.0 FTE Program Supervisor, and 1.0 FTE Case Manager 1 for FY12.

**Lead Agency:** County Human Services

**Program Contact:** Leslie Goodlow Baldwin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Developmental Disabilities Monitoring and Crisis Services Unit has oversight of 24-hour comprehensive and employment programs, transportation and support services, and provides 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, and monitoring services provided by contracted agencies and/or families. These supports are accessed through the crisis system when the client is at risk for civil commitment, out of home placement, and/or when health and safety are at risk.

**Program Description**

To access comprehensive and support services the individual must meet the criteria for crisis services. Supports can include: accessing a crisis bed, behavior consultation, nursing support, respite and other supports needed to stabilize the client; and long-term supports including residential placement, supported living, in-home supports and employment/alternatives to employment.

The unit also completes programmatic monitoring to ensure compliance with county contracts, Oregon Administrative Rules and Oregon Statutes. They participate in on-site licensing reviews conducted by Seniors & People with Disabilities and provide contractors with technical assistance to support them in meeting requirements. The unit monitors health and safety issues that are programmatic as opposed to client-specific concerns. They work with the Abuse Investigations team to ensure required actions are completed and ongoing issues are addressed.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of programmatic monitoring visits performed by the unit.	375	400	409	415
Outcome	% of clients receiving crisis services, who are stable at 6 months post-crisis <sup>1</sup>	0.0%	0.0%	93.0%	93.0%

**Performance Measure - Description**

<sup>1</sup> This is a new measure. Stable is defined as not having a new crisis case opened at Region 1 to request crisis diversion services within 6 months of closure of the previous case.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$58,185	\$1,836,613	\$0	\$1,333,717
Contracts	\$18,338	\$419,565	\$0	\$224,135
Materials & Supplies	\$8,825	\$1,540,419	\$0	\$3,314,343
Internal Services	\$10,597	\$360,750	\$0	\$257,232
Total GF/non-GF:	<b>\$95,945</b>	<b>\$4,157,347</b>	<b>\$0</b>	<b>\$5,129,427</b>
Program Total:	<b>\$4,253,292</b>		<b>\$5,129,427</b>	
Program FTE	1.00	21.80	0.00	14.10
<b>Program Revenues</b>				
Indirect for dep't Admin	\$48,567	\$0	\$0	\$0
Fees, Permits & Charges	\$0	\$9,000	\$0	\$5,000
Intergovernmental	\$0	\$4,148,346	\$0	\$4,846,757
Other / Miscellaneous	\$0	\$0	\$0	\$277,670
<b>Total Revenue:</b>	<b>\$48,567</b>	<b>\$4,157,346</b>	<b>\$0</b>	<b>\$5,129,427</b>

## Explanation of Revenues

\$5,000 – Fees: Based on historical average  
 \$282,791 – State Mental Health Grant Local Admin: Based on FY11 revised budget  
 \$3,246,995 – State Mental Health Grant: Based on FY11 revised budget  
 \$1,174,244 – State Mental Health Grant Regional Funding: Based on FY11 revised budget  
 \$142,727 – State Mental Health Grant Case Management: Based on FY11 revised budget  
 \$277,670 – Beginning Working Capital State Mental Health Grant: Based on FY11 estimated carryover

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

Last year this program offer include coordination and business services. That unit has been moved into a separate program offer 25011.

FTE moved from this PO to 25011 include: 1.0 FTE PM1, 3.0 FTE PDS Sr, 1.0 FTE Data Tech, 1.0 FTE Admin Analyst, 1.0 FTE PDS, 1.0 FTE OA 2

Elimination of 2.7 FTE PDS, .5 FTE OA Sr, in November 2010 state reduction.

Elimination of 1.0 FTE OA Sr, 2.0 FTE PDS, 1.0 FTE PDT, 1.0 FTE Project Manager for FY12. Reclass of Program Supervisor to Sr. PDS submitted to Class/comp.

The funding for client services was also moved from 25015 to 25011:

**Lead Agency:** County Human Services

**Program Contact:** Leslie Goodlow Baldwin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Eligibility is the entryway to developmental disabilities services and introduces potential clients to county services. Intakes average 62 per month with a total of approximately 752 per year. In addition, this team re-evaluates approximately 264 clients per year to determine continuing eligibility for developmental disabilities services.

**Program Description**

Eligibility/Intake is the single point of access to services for persons with developmental disabilities. The Eligibility and Intake unit ensures that eligible clients gain access to services and redetermines eligibility of existing clients to ensure their continued appropriateness for ongoing services. Once eligible, Intake transfers 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 clients who have developmental disabilities other than mental retardation by age 22.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of Intake eligibility referrals	898	950	752	828
Outcome	% of referrals made eligible for DD services <sup>1</sup>	0.0%	0.0%	0.0%	71.0%
Outcome	# of Inservice Determinations <sup>2</sup>	0	0	204	225

**Performance Measure - Description**

<sup>1</sup> New outcome measure for this program offer for FY 11-12.

<sup>2</sup> New output measure for this program offer for FY 11-12. Inservice determinations refer to mandated evaluations of all clients at age 7, 18 & 22 to determine ongoing disability.

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$364,668	\$246,813	\$350,402	\$197,553
Contracts	\$13,800	\$0	\$30,000	\$0
Materials & Supplies	\$7,270	\$4,736	\$6,500	\$6,671
Internal Services	\$67,252	\$13,329	\$57,080	\$32,073
<b>Total GF/non-GF:</b>	<b>\$452,990</b>	<b>\$264,878</b>	<b>\$443,982</b>	<b>\$236,297</b>
<b>Program Total:</b>	<b>\$717,868</b>		<b>\$680,279</b>	
Program FTE	4.00	2.00	4.00	2.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$264,876	\$0	\$96,096
Other / Miscellaneous	\$0	\$0	\$0	\$140,201
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$264,876</b>	<b>\$0</b>	<b>\$236,297</b>

**Explanation of Revenues**

\$96,096 – State Mental Health Grant Local Admin: Based on FY11 revised budget  
 \$140,021 – Beginning Work Capital State Mental Health Grant: Based on FY11 estimated carryover  
 \$443,982 – County General Fund

**Significant Program Changes**

 **Significantly Changed**

**Last year this program was:**

Last year this program was combined with 25014 Abuse Investigations and Eligibility.

Staff moved from 25014 to this PO include:

1.0 FTE Program Supervisor, 4.0 FTE Clinical Services Specialists (formerly Social Workers), 1.0 FTE Office Assistant Sr.



**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:** 25021

**Program Characteristics:** One-Time-Only Request

**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, 71,292 callers receive information and assistance and 11,357 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. ADSD, together with contracted partners, provide case management and in-home services to more than 3,360 seniors and their families. These services are funded through Oregon Project Independence, Older Americans Act and County General Fund.

Transportation is provided to 1,096 individuals so they can access medical, nutrition and social supports. District Senior Centers provide 2,720 health, wellness and recreation activities to 25,988 seniors.

We provided 657,936 congregate and home delivered meals in the last fiscal year, reducing nutritional risk for over 80% of individuals after 6 months of service. Ethnic-specific community organizations provide targeted outreach and nutrition services to 969 ethnic and racial minority elders.

Veterans Services Officers counsel 1,290 individuals and file claims for over 480 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 551 individuals, emergency prescription assistance to 149 individuals and special medical assistance to 227 individuals. Almost 90% of people receiving housing assistance retained their housing after 6 months.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Individuals receiving in-home, community and emergency services <sup>1</sup>	0	0	13,500	13,000
Outcome	Clients served that are ethnic/racial minorities (% of overall elders served) <sup>1</sup>	0.0%	0.0%	26.0%	25.0%
Output	Helpline and District Senior Center Assistance calls	71,292	76,000	80,050	78,000

**Performance Measure - Description**

 **Measure Changed**

<sup>1</sup>Individuals receiving services and percent of ethnic/racial minorities served are new performance measures this year. In past years we have included an outcome measure for Assistance calls that was an aggregate satisfaction rate of consumers collected in a bi-annual survey from Portland State University Institute on Aging. Due to budget constraints, this study was not conducted in 2010 and the data cannot be provided for the current purchased year.

## 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
Program Expenses	2011	2011	2012	2012
Personnel	\$550,444	\$1,525,530	\$730,272	\$1,328,191
Contracts	\$1,218,871	\$4,054,179	\$1,226,750	\$4,143,738
Materials & Supplies	\$675,624	\$299,667	\$631,588	\$198,732
Internal Services	\$479,651	\$515,969	\$474,169	\$565,763
Total GF/non-GF:	<b>\$2,924,590</b>	<b>\$6,395,345</b>	<b>\$3,062,779</b>	<b>\$6,236,424</b>
Program Total:	<b>\$9,319,935</b>		<b>\$9,299,203</b>	
Program FTE	6.31	18.05	8.37	15.48
Program Revenues				
Indirect for dep't Admin	\$23,069	\$0	\$25,034	\$0
Fees, Permits & Charges	\$0	\$183,945	\$0	\$145,290
Intergovernmental	\$0	\$5,980,300	\$0	\$5,917,423
Other / Miscellaneous	\$0	\$231,100	\$0	\$173,711
<b>Total Revenue:</b>	<b>\$23,069</b>	<b>\$6,395,345</b>	<b>\$25,034</b>	<b>\$6,236,424</b>

## Explanation of Revenues

\$2,847,946 - Older Americans Act federal funds; \$522,093 - Oregon Project Independence; \$173,297 - Oregon Dept of Veterans Affairs; \$735,508 - Title XIX; and \$793,572 Various Smaller Federal/State grants: All based on FY11 revised budget or current award

\$83,330 - CDS American Reinvestment Recovery Act funding: Based on current grant award

\$514,044 - City of Portland; \$3,000 - City of Fairview; \$1,850 - City of Troutdale: All based on FY11 revised budget

\$198,803 - Fees & Donations: Based on FY11 adopted budget or current award

\$242,783 - Corporation of National & Community Foster Grandparent Program: Based on FY11 revised budget

\$120,198 - Beginning Working Capital: Based on Current Year Estimated Carryover

\$39,040 - County General Fund (CGF) Match; \$46,182 - OTO CGF; \$3,016,597 - CGF

## Significant Program Changes

✔ Significantly Changed

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

Last year this program was: #25020A, B & C ADS Access & Early Intervention Services and Multnomah Project Independence. Multnomah Project Independence will be included in PO #25021 as a program restructure option for FY12. Other significant changes include the addition of the Veterans Directed Home and Community Based Services Program, which will include an additional 0.5 FTE Case Management 2 position.

This Program Offer reduces FTE by 1.01 FTE: Reductions due to grant funds ending include .5 Community Information Specialist, .5 Program Development Specialist Senior, .26 Volunteer Coordinator, and .25 Health Educator. Other changes include additions of .5 Case Manager 2 to staff new Veterans Directed Home and Community Based Services program, .5 Veterans Services Officer to serve veterans incarcerated in Multnomah County jails, and the reclassification of a Program Development Specialist Senior position to a Program Supervisor.

**Lead Agency:** County Human Services  
**Program Offer Type:** Program Alternative /  
**Related Programs:** 25020A

**Program Contact:** Lee Girard

**Program Characteristics:**

**Executive Summary**

Multnomah Project Independence (MPI) 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. MPI served 115 people in FY10. This restructured offer would serve approximately 165 people. Case management services will be refocused towards triage assessment and short-term intensive supports with the goal of supporting clients' self direction and self management.

**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. This program offer to restructure would reduce funding to the program by \$167,607 to meet the County constraint budget. The program would be restructured to consolidate case management within the Division and integrate it more closely with ADS Adult Protective Services, Emergency Services and Long Term Care Service Intake. The program will be re-focused on short-term intensive case management to support stabilization and self-management by clients. Services will be prioritized to individuals who are not eligible for other publicly funded case management support and meet the risk criteria listed above.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Clients receiving MPI case management and in-home services	0	0	0	165
Outcome	Clients with improved risk assessment scores after six months of intervention	0.0%	0.0%	0.0%	85.0%

**Performance Measure - Description**

New performance measures reflect program restructure.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$0	\$74,488	\$0
Contracts	\$435,145	\$0	\$181,581	\$0
Materials & Supplies	\$27,268	\$0	\$28,801	\$0
Internal Services	\$0	\$0	\$9,935	\$0
Total GF/non-GF:	<b>\$462,413</b>	<b>\$0</b>	<b>\$294,805</b>	<b>\$0</b>
Program Total:	<b>\$462,413</b>		<b>\$294,805</b>	
Program FTE	0.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

\$294,805 - County General Fund

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25020C, Multnomah Project Independence

This program offer presents a reduced and restructured program to meet County constraint budget limits. The restructure adds 1.0 FTE Case Manager 2 and eliminates community contract for case management. New ADS Case Manager 2 position will be integrated with ADS Adult Protective Services, Emergency Services and Long Term Care Service Intake to promote integration and coordination.

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25022B

**Program Contact:** Felicia Akubuiro

**Program Characteristics:**

**Executive Summary**

The Adult Care Home Program (ACHP) licenses and monitors Adult Care Homes in Multnomah County. Currently there are 593 licensed Adult Care Homes in the county. These homes offer affordable, quality care in a safe and culturally appropriate setting. Adult Care homes are licensed under state and local laws and provide 24-hour care and supervision. The program licenses approximately 2,645 beds, available to elderly and disabled individuals, offering a less expensive, homelike alternative to an institutional nursing home setting. The program also licenses 11 Room and Board facilities that offer low cost housing to elderly and disabled residents, who need a supportive living environment but are not eligible for long term care services. At this time The ACHP Program licenses 66 Room and Board beds in Multnomah County.

**Program Description**

The Adult Care Home Program (ACHP) is charged with ensuring that vulnerable residents are cared for in a culturally-appropriate, homelike environment that is friendly, safe and secure. All Adult Care Home operators are trained on and required to follow Multnomah County Administrative Rules. ACHP's guiding principles are that every individual living in an Adult Care Home is to be treated respectfully and receive quality care. A program licensor visits 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. In addition, program monitors observe interactions in the home, review records, and check to ensure residents are provided with social and recreational activities and cared for in a safe environment. When monitors find problems, the program takes corrective action. Regular, unannounced monitoring reduces the risk of abuse and neglect in adult care homes. Program staff provide technical assistance to Adult Care Home operators and issue and enforce written warnings, sanctions or fines when there are serious deficits. All homes are inspected and licensed annually.

In FY11 the program will focus on evaluating limited English speaking residents' satisfaction with services. Our goal is to improve the services being provided to this under-represented population by identifying areas that need improvement and developing a plan to meet any unmet needs.

Adult Care Homes provide a quality long term care option for elderly and people with disabilities desiring to live in the community. ACHP serves 1,143 Medicaid and 1,422 private pay residents while saving taxpayers thousands of dollars a year. The average monthly Medicaid cost in an adult care home is \$2,127, one-third the cost of the average Medicaid nursing home placement (\$6,560). Without this option, our private pay residents would have to rely on more costly and restrictive alternatives and might be forced on to Medicaid for lack of affordable care options. 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total number of Adult Care Homes licensed and inspected yearly.	585	596	593	590
Outcome	Adult Care Homes with one or more monitoring visits in a year. <sup>1</sup>	0.0%	0.0%	97.0%	99.0%
Quality	Adult Care Home/Nursing Home cost efficiency ratio. <sup>2</sup>	28.0%	32.2%	32.4%	32.4%

**Performance Measure - Description**

 **Measure Changed**

<sup>1</sup> New measure: ACHP has increased their monitoring program to ensure safety and quality of services delivered; does not include the yearly licensing visit.

<sup>2</sup>Ratio = Adult Care Home cost as a % of Nursing Home cost. As Adult Care Homes serve increasingly more clients with complex care needs the average cost of care increases relative to the average cost of care in a Nursing Home.

## Legal/Contractual Obligation

Multnomah County has a contract with the State of Oregon to administer the licensing, monitoring and training functions of Adult Care Homes. The Board of County Commissioners passed Multnomah County Resolution §23.66 - §223.999 establishing the Adult Care Home Program.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$22,435	\$1,099,348	\$22,623	\$1,078,848
Contracts	\$67,945	\$323,830	\$39,556	\$305,814
Materials & Supplies	\$644	\$31,681	\$1,007	\$48,094
Internal Services	\$3,109	\$174,728	\$3,453	\$197,611
Total GF/non-GF:	<b>\$94,133</b>	<b>\$1,629,587</b>	<b>\$66,639</b>	<b>\$1,630,367</b>
Program Total:	<b>\$1,723,720</b>		<b>\$1,697,006</b>	
Program FTE	0.26	12.74	0.26	12.54
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$291,000	\$0	\$269,300
Intergovernmental	\$0	\$1,338,587	\$0	\$1,339,367
Other / Miscellaneous	\$0	\$0	\$0	\$21,700
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,629,587</b>	<b>\$0</b>	<b>\$1,630,367</b>

## Explanation of Revenues

\$1,339,367 - Title XIX: Based on FY11 revised budget  
 \$291,000 - Fees & Fines: Based on FY11 revised budget  
 \$39,245 - County General Fund Match  
 \$27,394 - County General Fund

## Significant Program Changes

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

This program offer reduces FTE by .2 Office Assistant Senior position. This FTE is added back in scaled offer #25022B.

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25022A

**Program Contact:** Felicia Akubuiro

**Program Characteristics:**

**Executive Summary**

This program offer provides additional Medicaid funding to cover cost increases and maintain continuing staffing and service levels pending final legislative outcome and agency allocation for the Adult Care Home Program.

**Program Description**

Adult Care Home Program has submitted a base budget (Program Offer #25022A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to reduce staffing and services in FY12 before the outcome of the legislature. Due to significant caseload growth projections for the state in Long Term Care, ADS anticipates earning new funding associated with caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential impact to staffing until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25022B Continuing Service Level for FY12, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in DHS's continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts. This offer also covers cost increases related to COLAs and increases in central indirect and internal service charges.

Specifically, this program offer maintains support capacity, contracted RN consultative services and Adult Care Home Food Sanitation Inspections at full staffing and service levels.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for staffing and contracted services to maintain current service levels; because service capacity is not increased, measures are unchanged and reflected in base program offer #25022A.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$14,836
Contracts	\$0	\$0	\$0	\$19,500
Internal Services	\$0	\$0	\$0	\$865
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$35,201</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$35,201</b>	
Program FTE	0.00	0.00	0.00	0.20
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$35,201
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$35,201</b>

## Explanation of Revenues

\$35,201 - Title XIX: Based on increased Caseload

## Significant Program Changes

Last year this program was:



**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25023B

**Program Contact:** Cathy Clay-Eckton

**Program Characteristics:**

**Executive Summary**

Aging and Disability Services (ADS) Long Term Care program determines eligibility for financial, nutritional, medical and case management services for 37,470 low-income seniors and persons with disabilities. Intensive case management is provided to about 6,400 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 5,200 clients in community-based settings and 1,200 clients in nursing facilities. This program offer brings more than \$30.5 million into the local economy through SNAP (Supplemental Nutrition Assistance Program, formerly food stamps), and 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 also 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 6,400 nursing home eligible clients; about 5,200 clients (or about 81%) receive community based services that promote or support their independence outside of a nursing home, while an additional 1,200 (19%) 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Avg monthly # of nursing home eligible clients receiving long term care asst.	6,422	6,590	6,792	7,162
Outcome	Ratio of nursing home eligible clients served in the community vs. nursing home <sup>1</sup>	81.0%	80.0%	81.5%	80.0%

**Performance Measure - Description**

<sup>1</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 (SNAP); 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
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$17,830,339	\$0	\$16,790,372
Contracts	\$1,712,471	\$130,968	\$1,747,400	\$128,985
Materials & Supplies	\$0	\$314,481	\$0	\$503,688
Internal Services	\$0	\$3,709,839	\$0	\$3,962,503
Total GF/non-GF:	<b>\$1,712,471</b>	<b>\$21,985,627</b>	<b>\$1,747,400</b>	<b>\$21,385,548</b>
Program Total:	<b>\$23,698,098</b>		<b>\$23,132,948</b>	
Program FTE	0.00	222.80	0.00	205.30
Program Revenues				
Indirect for dep't Admin	\$6,354	\$0	\$5,231	\$0
Fees, Permits & Charges	\$0	\$146,692	\$0	\$143,316
Intergovernmental	\$0	\$21,736,939	\$0	\$21,139,609
Other / Miscellaneous	\$0	\$101,996	\$0	\$102,623
<b>Total Revenue:</b>	<b>\$6,354</b>	<b>\$21,985,627</b>	<b>\$5,231</b>	<b>\$21,385,548</b>

## Explanation of Revenues

\$21,139,609 - Title XIX: Based on FY11 revised budget  
 \$122,373 - Providence Medical Center: Based on FY11 grant award  
 \$102,623 - OHSU: Based on FY11 grant award  
 \$20,943 - Fees: Based on FY11 Projected Revenue Y-T-D  
 \$1,747,400 - County General Fund Match

## Significant Program Changes

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

This program offer reduces FTE by 17.5 FTE, 4 positions eliminated during FY11 biennial state cuts and 13.5 positions reflected in two scaled offers to balance the budget to FY11 Revised revenue levels. 10.5 positions are moved from this program offer and to scaled offer #25023B: .5 Eligibility Specialist position, 1 Program Coordinator position, 2 Case Manager 2 positions, 5 Case Management Assistant positions, 2 Case Manager Senior positions; 3 vacant positions are moved from this program offer to scaled offer #25023C: 1 Office Assistant 2 position, 1 Eligibility Specialist position, and 1 Case Manager Senior position.

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25023A

**Program Contact:** Cathy Clay-Eckton

**Program Characteristics:**

**Executive Summary**

This program offer provides Medicaid funding consistent with the overall ADS FY11 Adopted Budget and allows this program to minimize the impact of staffing reductions pending final legislative outcome and agency allocation.

**Program Description**

Long Term Care has submitted a base budget (Program Offer #25023A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to make significant staffing reductions in FY12 before the outcome of the legislative session. Due to significant caseload growth projections for the state in SNAP, OHP and Long Term Care, ADS anticipates earning new funding associated with caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential impact to staffing until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25023B Adopted FY11 Service Level, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in DHS's continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts.

Specifically, this program offer maintains efficiencies that were implemented to improve outcomes and provide support and workload relief to case managers that carry very high caseloads. 10.5 FTE are maintained through this program offer: 5 Case Management Assistant positions, .5 Eligibility Specialist position, 2 Case Manager 2 positions, 2 Case Manager Seniors positions, and 1 Program Coordinator position.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for staffing however service levels remain unchanged therefore performance measures are also unchanged and are reflected in base program offer #25023A.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$798,033
Internal Services	\$0	\$0	\$0	\$20,110
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$818,143</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$818,143</b>	
Program FTE	0.00	0.00	0.00	10.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$818,143
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$818,143</b>

**Explanation of Revenues**

\$818,143 - Title XIX: Based on FY11 adopted budget

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25023A

**Program Contact:** Cathy Clay-Eckton

**Program Characteristics:**

**Executive Summary**

This program offer provides additional Medicaid funding to cover cost increases and maintain continuing staffing levels pending final legislative outcome and agency allocation.

**Program Description**

Long Term Care has submitted a base budget (Program Offer #25023A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to make significant staffing reductions in FY12 before the outcome of the legislative session. Due to significant caseload growth projections for the state in SNAP, OHP and Long Term Care, ADS anticipates earning new funding associated with caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential impact to staffing until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25023C Continuing Service Level for FY12, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in DHS's continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts. This offer also covers cost increases related to COLAs and increases in central indirect and internal service charges.

Specifically, this program offer maintains 2 vacant direct service positions (1 Case Manager 2 and 1 Eligibility Specialist), one vacant support position and security services for one office location.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for staffing and contracted services to maintain current service levels; because service capacity is not increased, measures are unchanged and reflected in base program offer #25023A.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$204,237
Contracts	\$0	\$0	\$0	\$19,967
Internal Services	\$0	\$0	\$0	\$5,650
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$229,854</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$229,854</b>	
Program FTE	0.00	0.00	0.00	3.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$229,854
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$229,854</b>

## Explanation of Revenues

\$229,854 - Title XIX: Based on projected funding due to increased caseload

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Existing Operating

**Related Programs:** 25024B

**Program Characteristics:**

**Executive Summary**

Adult Protective Services (APS) is responsible for protecting 200,000 seniors, people with disabilities and veterans 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 7,868 abuse calls in FY10. 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 2,973 client contacts with 586 clients with mental health needs, and provided 3060 hours of nursing clinical supports to 1,150 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Protective Services investigations completed	2,738	3,000	2,706	3,000
Outcome	Reabuse rate for elderly and people with disabilities <sup>1</sup>	3.3%	4.0%	2.6%	3.0%
Outcome	Clients with improved living situation after 90 days of MDT intervention	89.0%	85.0%	89.9%	90.0%

**Performance Measure - Description**

<sup>1</sup>Current reabuse rate estimate is based on modified State of Oregon figures. The program has also reduced the reabuse rate by almost 20% from the previous year.

## 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>	2011	2011	2012	2012
Personnel	\$325,160	\$3,407,802	\$306,707	\$3,143,466
Contracts	\$525,691	\$168,166	\$511,520	\$146,303
Materials & Supplies	\$5,355	\$56,733	\$6,677	\$90,059
Internal Services	\$36,587	\$449,714	\$39,228	\$472,228
<b>Total GF/non-GF:</b>	<b>\$892,793</b>	<b>\$4,082,415</b>	<b>\$864,132</b>	<b>\$3,852,056</b>
<b>Program Total:</b>	<b>\$4,975,208</b>		<b>\$4,716,188</b>	
Program FTE	2.99	35.61	2.86	31.74
<b>Program Revenues</b>				
Indirect for dep't Admin	\$515	\$0	\$354	\$0
Intergovernmental	\$0	\$4,082,415	\$0	\$3,852,056
<b>Total Revenue:</b>	<b>\$515</b>	<b>\$4,082,415</b>	<b>\$354</b>	<b>\$3,852,056</b>

## Explanation of Revenues

\$3,706,033 - Title XIX: Based on FY11 revised budget

\$15,247 - Various Smaller Federal/State grants: Based on FY11 revised budget

\$130,776 - State Mental Health Grant Older/Disabled Mental Health Services: Based on FY11 revised budget

\$328,014 - County General Fund Match

\$536,118 - County General Fund

## Significant Program Changes

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

This program offer reduces FTE by 4 FTE; 1 Clinical Services Specialist (Social Worker) position was eliminated during FY11 mid biennial state cuts and 3 positions reflected in two scaled offers to balance the budget to FY11 Revised revenue levels.

Two positions are moved from this program offer to scaled offer 25024B: 2.0 Human Services Investigator positions; 1.0

Office Assistant Senior position moved from this program offer to scaled offer 25024C.



**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25024A

**Program Contact:** Mohammad Bader

**Program Characteristics:**

**Executive Summary**

This program offer provides Medicaid funding consistent with the overall ADS FY11 Adopted Budget and allows this program to minimize the impact of staffing reductions pending final legislative outcome and agency allocation.

**Program Description**

Adult Protective Services has submitted a base budget (Program Offer #25024A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to make staffing reductions in FY12 before the outcome of the legislative session. Due to significant caseload growth projections for state Senior and Disabled Services programs, ADS anticipates earning new funding associated caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential impact to staffing until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25024B Adopted FY11 Service Level, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in DHS's continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts.

Specifically, this program offer maintains 2 Financial Abuse Team Investigators, who provide specialized expertise to improve outcomes for victims of financial abuse.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for staffing however service levels remain unchanged; performance measures are also unchanged and are reflected in base program offer #25024A.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$198,240
Internal Services	\$0	\$0	\$0	\$4,996
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$203,236</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$203,236</b>	
Program FTE	0.00	0.00	0.00	2.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$203,236
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$203,236</b>

**Explanation of Revenues**

\$203,236 - Title XIX: Based on FY11 adopted budget

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25024A

**Program Contact:** Mohammad Bader

**Program Characteristics:**

**Executive Summary**

This program offer provides additional Medicaid funding to cover cost increases and maintain continuing staffing levels pending final legislative outcome and agency allocation.

**Program Description**

Adult Protective Services has submitted a base budget (Program Offer #25024A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to make staffing reductions in FY12 before the outcome of the legislative session. Due to significant caseload growth projections for state Senior and Disabled Services programs, ADS anticipates earning new funding associated with caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential impact to staffing until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25024C Continuing Service Level for FY12, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in DHS's continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts. This offer also covers cost increases related to COLAs and increases in central indirect and internal service charges.

Specifically, this program offer maintains current program support capacity.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for staffing to maintain current service levels; because it does not increase service capacity, measures are unchanged and reflected in base program offer #25024A.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$75,202
Internal Services	\$0	\$0	\$0	\$1,895
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$77,097</b>
Program Total:	<b>\$0</b>		<b>\$77,097</b>	
Program FTE	0.00	0.00	0.00	1.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$77,097
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$77,097</b>

**Explanation of Revenues**

\$77,097 - Title XIX: Based on project funding due to increased caseload

**Significant Program Changes**

Last year this program was:

**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 162 mentally incapacitated, functionally dependent 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. Of those 200 diversions, about 125 required significant involvement by deputies to reach stabilization; the remainder were stabilized through less intensive services.

### 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, and 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Referrals appropriately diverted to less costly resources <sup>1</sup>	125	200	200	0
Outcome	Urgent client needs addressed within five days after court appointment <sup>2</sup>	88.0%	90.0%	90.0%	90.0%
Output	Referrals diverted to less costly resources through intensive management <sup>3</sup>	0	0	150	175

### Performance Measure - Description

<sup>1</sup> This measure is being discontinued in favor of the new output which includes only diversions requiring significant intervention by staff.

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

<sup>3</sup> This performance measure is new and better demonstrates the impact and cost-effectiveness of intensive interventions.

### 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
Program Expenses	2011	2011	2012	2012
Personnel	\$925,439	\$0	\$947,660	\$0
Contracts	\$50,000	\$0	\$27,440	\$0
Materials & Supplies	\$19,117	\$0	\$22,679	\$0
Internal Services	\$120,083	\$0	\$135,023	\$0
<b>Total GF/non-GF:</b>	<b>\$1,114,639</b>	<b>\$0</b>	<b>\$1,132,802</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,114,639</b>		<b>\$1,132,802</b>	
Program FTE	10.00	0.00	10.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$90,000	\$0	\$90,000	\$0
<b>Total Revenue:</b>	<b>\$90,000</b>	<b>\$0</b>	<b>\$90,000</b>	<b>\$0</b>

### Explanation of Revenues

\$90,000 - Fees: Based on FY11 budget  
 \$1,042,802 - County General Fund

### Significant Program Changes

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

**Lead Agency:** County Human Services  
**Program Offer Type:** Administration  
**Related Programs:** 25027B

**Program Contact:** Mary Shortall

**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. ADS 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. ADS Administration influences rules, priorities and funding formulas to promote effective services for Multnomah County seniors and people with disabilities. Administration is responsible for policy, planning, evaluation, advocacy and staff development for the division, which serves more than 50,000 people and employs 310 staff.

ADS 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.

ADS 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. ADS 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	ADS sponsored opportunities for consumer education and/or input <sup>1</sup>	80	69	92	67
Outcome	Advisors agree/strongly agree w/the statement: Overall, ADS does its job well <sup>2</sup>	89.0%	90.0%	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; 35 CFR 1321.83.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$67,534	\$682,847	\$61,083	\$617,620
Contracts	\$252,428	\$124,869	\$267,253	\$53,921
Materials & Supplies	\$12,771	\$132,890	\$8,876	\$114,481
Internal Services	\$6,759	\$84,405	\$6,971	\$90,308
Total GF/non-GF:	<b>\$339,492</b>	<b>\$1,025,011</b>	<b>\$344,183</b>	<b>\$876,330</b>
Program Total:	<b>\$1,364,503</b>		<b>\$1,220,513</b>	
Program FTE	0.61	6.19	0.53	5.27
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,021,211	\$0	\$868,330
Other / Miscellaneous	\$0	\$3,800	\$0	\$8,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,025,011</b>	<b>\$0</b>	<b>\$876,330</b>

## Explanation of Revenues

\$62,490 - Older Americans Act: Based on FY11 revised budget  
\$805,840 - Title XIX: Based on FY11 revised budget  
\$3,000 - Donations: Based on FY11 projected revenue Y-T-D  
\$5,000 - Beginning Working Capital: Based on estimated current year carryover  
\$185,802 - County General Fund Match  
\$158,381 - County General Fund

## Significant Program Changes

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

This program offer reduces FTE by 1.0 Program Coordinator position (Division training position) which was eliminated during FY11 mid biennial state cuts.



**Lead Agency:** County Human Services  
**Program Offer Type:** Administration  
**Related Programs:** 25027A

**Program Contact:** Mary Shortall

**Program Characteristics:**

**Executive Summary**

This program offer provides additional Medicaid funding to cover cost increases and maintain continuing staffing levels pending final legislative outcome and agency allocation.

**Program Description**

ADS Administration has submitted a base budget (Program Offer #25027A) consistent with the FY11 Revised Medicaid Budget. This level of funding would require the program to significantly reduce the professional services budget in FY12 before the outcome of the legislature. Due to significant caseload growth projections for State Senior and Disabled Services Medicaid programs, ADS anticipates earning new funding associated with caseload growth. For this reason ADS has requested to assume additional funding in the budget to minimize potential reductions to staffing and other budget reductions until after the legislature passes the DHS budget and the real impact for position cuts or additions is known.

This scaled offer, #25027B Continuing Service Level for FY12, assumes additional Medicaid funding from the state based on the addition of staff COLAs and caseload growth in Seniors and People with Disabilities continuing service level budget. Caseload growth typically adds funds for staffing and in the past has offset program cuts. This offer also covers additional cost increases associated with central indirect and internal service charges.

Specifically, this program offer maintains the professional services budget to continue program evaluation, demographic and census projections, and organizational development.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

Program offer adds revenue for professional services however service levels remain unchanged therefore performance measures are also unchanged and are reflected in base program offer #25027A.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$0	\$90,000
Internal Services	\$0	\$0	\$0	\$2,268
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$92,268</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$92,268</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$92,268
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$92,268</b>

**Explanation of Revenues**

\$92,268 - Title XIX: Based on FY11 adopted budget

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

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

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Aging and Disability Services Division (ADS) is requesting one-time funding in our Emergency Housing program to increase assistance to low-income seniors and people with disabilities living in low-income housing to prepare their apartments for pest treatment. ADS is estimating that we will assist 75 individuals in FY 11 and with additional funding would propose to serve an additional 120 individuals for a total of 195 people served.

**Program Description**

Aging and Disability Services Division (ADS) currently provides financial and service assistance to low-income seniors and people with disabilities who are experiencing or at risk of homelessness. Multnomah County is experiencing rapidly increasing incidents of bed bug infestations. Landlord/property managers of multi-family dwellings provide for the treatment of infestations but people with physical and/or mental disabilities are often not capable of preparing their apartments for treatment. This puts them at risk for eviction. Over the past 2 years ADS has seen a significant increase in requests for assistance to prepare for treatment. Preparation for treatment may include: cleaning and packing belongings; laundering all clothes and linen; moving furniture; and disposing of and delivering furniture. We are not able to meet the level of demand within our current budget. The ability to assist more individuals in preparing for treatment of their apartments will result in reducing their risk for eviction and reduction in the spread of bed bugs in low-income housing.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Seniors and people with disabilities receiving assistance	0	0	0	195
Outcome	Individuals retain housing after receiving assistance <sup>1</sup>	0.0%	0.0%	0.0%	85.0%

**Performance Measure - Description**

<sup>1</sup> Housing retention is measured as an individual remaining in housing 6 months after service/assistance has been provided.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$0	\$26,166	\$0
Contracts	\$0	\$0	\$75,887	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$102,053</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$102,053</b>	
Program FTE	0.00	0.00	0.40	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$102,053 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Mary Shortall

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Elders in Action Commission is the federally mandated advisory council to Aging and Disability Services (ADS). Elders in Action personal advocate volunteers provide individual help to seniors who face complex problems in their lives. While the services complement the ADS case management system, they do not duplicate the technical work of a case manager. Personal advocates are peer volunteers who provide assistance on issues that are often time-consuming to solve and would be difficult or impossible for a frail person to deal with alone. Elders in Action supports a network of 150 volunteers and serves 2,782 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 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 more accessible and senior-friendly. Utilizing results of local and national studies in addition to the tools of the nationally recognized Elder Friendly® Certification program, EIA has assessed 215 businesses in Multnomah County over two years to evaluate the quality and accessibility of their services and provided technical assistance aimed at improving the experience of senior consumers in the community.

EIA Personal Advocate Volunteers work one-on-one to solve problems and support seniors who are facing difficult circumstances such as 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. New services created in FY11 include regular assistance to clients in the Multnomah County Public Guardian program and follow up contact to people in the Voluntary Emergency Registry. 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 volunteers work to insure the quality of life for the county's 102,000 seniors. Last year about 150 EIA volunteers provided 7,981 service hours, working as advisors to local government, as personal advocates for at-risk seniors and as community educators.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Hours of service provided by volunteers	7,981	9,800	9,800	10,000
Outcome	Value of volunteer hours (\$) <sup>1</sup>	142,860	175,420	180,026	183,700

**Performance Measure - Description**

<sup>1</sup> The hourly rate calculation is drawn from Independent Sector, a national organization for volunteerism; the rates used here are tailored specifically for the state of Oregon. For the FY09-10 actual and FY10-11 purchased figures, the 2008 rate of \$17.90 was used. For the FY10-11 estimate and FY11-12 offered figures, the 2009 rate of \$18.37 was used.

## 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
Program Expenses	2011	2011	2012	2012
Contracts	\$161,160	\$0	\$161,160	\$0
Total GF/non-GF:	<b>\$161,160</b>	<b>\$0</b>	<b>\$161,160</b>	<b>\$0</b>
Program Total:	<b>\$161,160</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, ADS Elders in Action Commission and Personal Advocacy

In line with the Task Force on Vital Aging, EIA has improved volunteer training and recruitment, resulting in expanded professional-level volunteer opportunities. As a consequence, EIA has needed to increase funding for direct volunteer expenses.

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

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

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Aging and Disability Services Division (ADS) is proposing to expand the Gatekeeper Program to train community businesses and organizations to identify and report older adults who may be at risk for abuse, financial exploitation or self-neglect. Volunteer trainers will be used to expand the availability of community training. ADS is proposing to increase Gatekeeper referrals to the agency to 700.

**Program Description**

Aging and Disability Services Division (ADS) is proposing to expand the Gatekeeper Program, a national best practice model that identifies at-risk older adults and people with disabilities living in our community and links them to critical social and health services. The program identifies individuals who may be isolated from their support networks and being experiencing financial, physical or sexual abuse. Gatekeepers are not mandatory reporters. These are nontraditional referral sources who come into contact with older adults through their everyday work activities, such as meter readers, bank tellers, letter carriers, etc. They are trained to identify signs and symptoms that would indicate a need for assistance for a vulnerable adult, including confusion, depression, poor health, functional disability, financial difficulties, or home in disrepair.

Trained Gatekeepers make a referral to Multnomah County Aging & Disability Services' 24-Hour Helpline for follow-up assessment and service delivery. Skilled volunteers will be used to expand the availability of community training, Helpline staff triage referrals, and send a detailed report to the appropriate social service worker or to Adult Protective Services (APS). Follow-up procedures ensure that action has been taken and assistance has been offered.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of trainings provided to develop gatekeepers	0	0	0	50
Outcome	Number of Gatekeeper referrals	0	0	0	700

**Performance Measure - Description**

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$0	\$43,827	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$43,827</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$43,827</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**

\$43,827 - County General Fund

**Significant Program Changes**

Last year this program was:



**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Domestic Violence (DV) Victim Services & Coordination provides in-person services for 7,000 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) and \$2.5 million in victim services annually. These services increase employment, income, quality of life; decrease the level of danger and of assault, PTSD, depression, alcohol & drug abuse; and improve the health of victims and their children. DV costs the community another \$10 million in lost wages, health care and other costs. The number of individuals served in FY10 increased by almost 30% compared to FY09 and is expected to increase by 25% in 2011 compared to FY10.

Victim services funded in this offer include: centralized access and crisis response; safe emergency shelter and supportive services (300 victims and 300 children in shelter + 400 victims and 500 children through short-term rent assistance and motel vouchers); civil legal advocacy ensuring safety after separation (2,980 victims); mobile advocacy and rent assistance with supportive services (300 victims and 400 children); and culturally-specific services for Latinas, Russians, African Americans, Native Americans, immigrants/refugees and sexual minorities (500 victims and 800 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 which provides 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 and partially staff the county DV Fatality Review Process meetings. 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 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of clients and their children served in person <sup>1</sup>	6,574	5,100	8,000	6,000
Outcome	% in stable housing six months after close of services <sup>2</sup>	68.0%	70.0%	75.0%	70.0%

**Performance Measure - Description**

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: The current year estimate for number of clients served is noticeably higher than in previous years. It now includes the DVERT (235) and Safe Start (260) clients and their children, and also reflects a much higher level of need than in previous years due to increased need and increased family size, with many more children accompanying victims than in previous years. Data also indicate that the length of shelter stay has decreased, possibly due to additional rent assistance funds, which has led to more survivors able to access shelter.

## 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, transitional housing/economic empowerment, and HUD Horizon. HUD funding requires a \$51,240 cash match and database specifications, included in this offer.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$451,685	\$180,088	\$527,452	\$177,805
Contracts	\$1,464,322	\$630,861	\$1,398,001	\$633,210
Materials & Supplies	\$162,741	\$470,827	\$150,134	\$405,392
Internal Services	\$79,626	\$30,639	\$79,638	\$28,281
Total GF/non-GF:	<b>\$2,158,374</b>	<b>\$1,312,415</b>	<b>\$2,155,225</b>	<b>\$1,244,688</b>
Program Total:	<b>\$3,470,789</b>		<b>\$3,399,913</b>	
Program FTE	4.62	1.80	5.75	1.75
Program Revenues				
Indirect for dep't Admin	\$16,401	\$0	\$13,776	\$0
Fees, Permits & Charges	\$0	\$1,140	\$0	\$0
Intergovernmental	\$0	\$1,310,400	\$0	\$1,243,488
Other / Miscellaneous	\$0	\$875	\$0	\$1,200
<b>Total Revenue:</b>	<b>\$16,401</b>	<b>\$1,312,415</b>	<b>\$13,776</b>	<b>\$1,244,688</b>

## Explanation of Revenues

\$462,083 – HUD Horizons Grant: Based on FY11 revised budget  
 \$193,724 – Oregon Housing and Community Service SHAP Grant: Based on current grant award  
 \$50,000 – City of Portland GF – Based on FY11 revised budget  
 \$100 – United Way – Based current year projected estimates  
 \$291,556 – Department of Justice-DVERT; \$44,143 – DOJ – OJJDP; \$41,804 OVW Transitional Housing; \$160,078 - OVW-ARRA: Based on FY11 estimated carryover  
 \$1,200 – Domestic Partnership Fees: Based on FY11 current registration level  
 \$51,480 – County General Fund Match  
 \$2,103,745 – County General Fund

## Significant Program Changes

**Last year this program was:** #25040A, Domestic Violence Victims Svcs & Coord

This program offer now includes funding from 25040B and 25040C, which were funded by the Board last year. 25040B provided 6 months of funding for the DVERT project to backfill the federal grant slated to end 12/31/10; 25040C funded 9 months of the Safe Start project which ended 9/30/10. The DVERT project was refunded by DOJ for another two years. Part of the CGF allocated in 25040B from FY11 has been retained for the DVERT project (.5 FTE DVERT Coordinator); the remaining funds have been used to meet the 2% constraint level, to provide funds for African immigrant survivors, to defray increased personnel and internal services costs, to keep current service level, and to support a 1.0 FTE OA2. In addition, it includes 3 months of a DOJ/OJJDP grant to develop and begin implementation of a strategic plan on preventing and intervening in children's exposure to violence in general.

**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:**

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

**Executive Summary**

Safe Start Collaboration program offer provides three months of domestic violence (DV) victim services to families involved with Child Welfare. For FY11, the Board allocated nine months of contracted services and backfill the federal grant which ended 9/30/10. Safe Start provides consultation to Gresham Child Welfare staff, direct services to 100 families each year, and reduces foster care placement.

**Program Description**

Safe Start is well-established and respected at the local, state and federal level. Its national stature led to the county receiving the prestigious Defending Childhood Initiative grant.

Safe Start'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 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. With the grant ending on 9/30/10, the Board funded 9 months of services. Funding for these 9 months of services is included in 25040A. This offer requests funding for the remaining 3 months of FY12.

Gresham child welfare staff 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total families served <sup>1</sup>	0	0	30	30
Outcome	Victims will report increased safety <sup>2</sup>	0.0%	0.0%	75.0%	75.0%

**Performance Measure - Description**

<sup>1</sup> Families will receive ongoing advocacy or parent-child services. This represents new clients for the last quarter of the year.

<sup>2</sup> Victims will report increased safety

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$41,533	\$0
Materials & Supplies	\$0	\$0	\$2,550	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$44,083</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$44,083</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**

\$44,083 – County General Fund

**Significant Program Changes****Last year this program was:** #25040C, Domestic Violence Safe Start Collaboration

This offer backfills funds lost through the end of the federal Safe Start Collaboration. This grant ended 9/30/10.

**Lead Agency:** County Human Services

**Program Contact:** Chiquita Rollins

**Program Offer Type:** Existing Operating

**Related Programs:**

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

### Executive Summary

The Prosperity and Stability program offer supports the most critical, needed and effective parts of two federal transitional housing grants: Economic Education Program, Housing Assistance for Russian-Speaking Survivors, and WorkSource Navigator. These elements are core to prosperity and stability, are not funded by other sources, and leverage significant WorkSource funding.

### Program Description

Assistance in gaining long-term prosperity, income and stability will require focused services: domestic violence (DV) survivors who have accessed DV services reported that 18 months after accessing housing-related services, they have difficulty paying or are unable to pay for housing (48.5%); are living below poverty line (74.2%); or are unemployed (62.3%).

The Domestic Violence Coordinator's Office has two federal Office Violence Against Women (OVW) grants, slated to end in FY12, intended to increase survivors' prosperity and long-term stability through job training and linkages to employment resources. This offer seeks to backfill only the most critical and effective activities funded by these grants:

**MOBIS:** (Multnomah County Overcoming Barriers to Independence and Safety, funded through 2/12). This grant provides assistance to survivors living in transitional housing in navigating/overcoming barriers and obtaining maximum benefits and resources through WorkSource (local Work Force Investment Act program). The full-time "Navigator" is an aligned partner, co-located at WorkSource and assists 50-75 domestic violence (DV) survivors to safely and successful access WorkSource system programs annually. Clients of an aligned partner are eligible to receive \$5,000 for on-the-job-training and educational opportunities that are not available to individuals seeking WorkSource assistance. Without this Navigator these opportunities will be lost to DV survivors accessing Work Source. The ultimate goal of these activities is to increase the ability of victims to obtain and maintain living wage jobs necessary for independence and safety. Client assistance is required to assure that the participants have the financial resources to complete the training components at WorkSource through support of childcare, transportation, and housing stabilization.

**Family Strengths (Funded through 10/11):** This grant project provides housing assistance and support (.4 FTE advocate) for Russian-speaking victims and makes HUD leasing dollars available to this population. This is the only Russian speaking housing program in Multnomah County. In addition, it supports approximately 20% of the Bradley Angle Economic Education program, which includes a full time economic advocate, provides fiscal education classes and advocacy to address credit repair for over 50 DV participants, and includes an Independent Development Account (IDA) and micro loan program to assist participants. IDA saving can be used for housing, education, or starting a business. Micro loans can be used for deposits for housing, starting a business, paying off bad debt that might be keeping them from getting a job or housing, and other uses. The program is open to all DV survivors throughout the community and has been replicated at other agencies because of its high success.

The ultimate goal of these activities is to increase the ability of victims to obtain and maintain living wage jobs necessary for independence and safety. Although there are other aspects to these grants, the three listed above (Economic Education Program, Housing Assistance for Russian-Speaking Survivors, and WorkSource Navigator) are core to prosperity and stability for survivors and are not funded by any other sources.

This program offer provides services similar to those requested in Community Services 25139B Action for Prosperity; and leverages funding from HUD, WorkSource Systems and Bradley-Angle House.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# participants receiving prosperity and stability services <sup>1</sup>	0	0	80	80
Outcome	% of participants who report increased prosperity <sup>2</sup>	0.0%	0.0%	75.0%	75.0%

### Performance Measure - Description

<sup>1</sup> This measure includes: all MOBIS and Family Strength clients, with 75 MOBIS Navigator clients, 40 Economic Education clients, and 5 Russian-speaking clients.

<sup>2</sup> This measure uses the "Action for Prosperity Matrix" which includes measures for safety, financial management, housing, employment life skills, education/training, and employment. Development of the Matrix was supported by Grant No. 2009-EH-S6-0074 awarded by the Office on Violence Against Women, U.S. Department of Justice.

**Legal/Contractual Obligation**

None

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$31,000	\$0
Materials & Supplies	\$0	\$0	\$22,600	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$53,600</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$53,600</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**

\$53,600 – County General Fund

**Significant Program Changes**

**Last year this program was:** #25040A, Domestic Violence Victims Svcs & Coord  
 Partial year federal funding for MOBIS and Family Strengths is included in 25040A

**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

**Program Offer Type:** Administration

**Related Programs:**

**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 29,000 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 county's 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 builds and maintains 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.

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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total Adult/Child MHASD Advisory Meetings <sup>1</sup>	19	20	24	26
Outcome	Advisors agree with the statement: Overall, MHASD does its job well <sup>2</sup>	82.0%	0.0%	0.0%	80.0%

**Performance Measure - Description**

<sup>1</sup>Total number of MHASD AMHSA, CMHSAC, and Childrens Collaborative Partnership Council meetings during the measurement period.

<sup>2</sup> This survey will be conducted every 2 years and will be repeated in FY2012.

## 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.  
Mental Health Organization contract

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$166,263	\$666,823	\$137,517	\$616,415
Contracts	\$0	\$52,550	\$0	\$52,500
Materials & Supplies	\$0	\$16,097	\$1,945	\$80,406
Internal Services	\$0	\$71,513	\$0	\$80,827
Total GF/non-GF:	<b>\$166,263</b>	<b>\$806,983</b>	<b>\$139,462</b>	<b>\$830,148</b>
Program Total:	<b>\$973,246</b>		<b>\$969,610</b>	
Program FTE	0.75	5.75	0.62	4.88
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$13,372	\$0
Intergovernmental	\$0	\$806,983	\$0	\$794,093
Other / Miscellaneous	\$0	\$0	\$0	\$36,055
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$806,983</b>	<b>\$13,372</b>	<b>\$830,148</b>

## Explanation of Revenues

\$218,873 - State Mental Health Grant Local Admin: Based on FY11 revised budget  
\$36,055 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover  
\$575,220 - Oregon Health Plan Premium: Based on FY11 Rate per client times number of clients as of 12/31/10  
\$139,462 - County General Fund

## Significant Program Changes

### Last year this program was:

A vacant 1.0 FTE OA2 position has been eliminated for FY12 to meet budget constraint.



**Lead Agency:** County Human Services  
**Program Offer Type:** Administration  
**Related Programs:** 25053

**Program Contact:** Joan Rice

**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 75,000 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. The Commitment Services program is now storing reports electronically which decreases their need to retrieve a medical record to access the report again. As a result, the number of requests for records retrieval has declined and, in FY12, anticipated volume is more than 8,000 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 FY12, 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 1,400 individuals, each requiring a medical record. The medical records unit is responsible for these.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Count of clinical and managed care record items processed annually <sup>1</sup>	20,378	27,175	24,704	25,340
Outcome	Total MHASD medical records reviewed for completeness <sup>2</sup>	6,380	6,278	6,533	6,710

**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, School based and Early Childhood/Cares, Family Care Coordinators and Alcohol and Drug. Note: An error was detected during the development of the FY10-11 Program Offer: the count for the SOCCF program had been omitted from the total. This resulted in an undercounting of the number of client records opened annually and reviewed by 715. The correct count (6278) is included here rather than the 5563 included last year.

## 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
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$578,544	\$0	\$593,554	\$0
Materials & Supplies	\$15,128	\$0	\$19,966	\$0
Internal Services	\$101,944	\$0	\$89,490	\$0
<b>Total GF/non-GF:</b>	<b>\$695,616</b>	<b>\$0</b>	<b>\$703,010</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$695,616</b>		<b>\$703,010</b>	
Program FTE	8.00	0.00	8.00	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

\$703,010 - County General Fund

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25052

**Program Contact:** Joan Rice

**Program Characteristics:**

**Executive Summary**

Quality Management works to assure quality of contracted providers through mental health agency audits and monitoring mental health contract performance. The program serves approximately 100,000 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 5,000 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total clinical reviews/protective service investigations/incidents reviewed <sup>1</sup>	7,117	6,600	7,200	7,200
Outcome	Percent of certification reviews conducted within 3 year maximum OAR mandate <sup>2</sup>	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

<sup>1</sup>Residential critical incidents + total protective service investigations/screenings + total clinical reviews (treatment records reviewed for mental health agency certification or Verity compliance)

<sup>2</sup>Percentage of reviews conducted within a 3 year period does not include Oregon Addiction and Mental Health Services Division authorized extensions

## 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
Program Expenses	2011	2011	2012	2012
Personnel	\$491,401	\$900,326	\$430,141	\$1,007,576
Contracts	\$0	\$75,000	\$0	\$81,250
Materials & Supplies	\$31,474	\$0	\$31,474	\$35,948
Internal Services	\$0	\$194,723	\$0	\$177,425
<b>Total GF/non-GF:</b>	<b>\$522,875</b>	<b>\$1,170,049</b>	<b>\$461,615</b>	<b>\$1,302,199</b>
<b>Program Total:</b>	<b>\$1,692,924</b>		<b>\$1,763,814</b>	
Program FTE	5.20	8.80	4.60	9.50
Program Revenues				
Indirect for dep't Admin	\$0	\$0	\$22,876	\$0
Intergovernmental	\$0	\$1,170,049	\$0	\$1,302,199
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,170,049</b>	<b>\$22,876</b>	<b>\$1,302,199</b>

## Explanation of Revenues

\$984,039 - Oregon Health Plan Premium: Based on FY11 Rate per client times number of clients as of 12/31/10  
 \$318,160 - State Mental Health Grant: Based on FY11 revised budget  
 \$461,615 - County General Fund

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Carol Matteson

**Program Offer Type:** Administration

**Related Programs:** 25050

**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 29,000 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 if services are to continue at the same level. 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Keep MHASD programs within authorized appropriations	100.0%	100.0%	100.0%	100.0%
Outcome	Exceptions noted by independent auditor annually*	0	0	0	0

**Performance Measure - Description**

\*Business and Finance's goal is zero exceptions noted by independent auditor.

## 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>	2011	2011	2012	2012
Personnel	\$226,036	\$369,290	\$255,609	\$433,226
Contracts	\$60,600	\$768,507	\$61,650	\$800,000
Materials & Supplies	\$0	\$15,128	\$34,904	\$180,507
Internal Services	\$83,212	\$31,828	\$17,685	\$122,876
<b>Total GF/non-GF:</b>	<b>\$369,848</b>	<b>\$1,184,753</b>	<b>\$369,848</b>	<b>\$1,536,609</b>
<b>Program Total:</b>	<b>\$1,554,601</b>		<b>\$1,906,457</b>	
Program FTE	3.00	4.00	3.10	4.75
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$35,721	\$0
Intergovernmental	\$0	\$1,184,753	\$0	\$1,536,609
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,184,753</b>	<b>\$35,721</b>	<b>\$1,536,609</b>

## Explanation of Revenues

\$1,536,609 - Oregon Health Plan Premium: Based on FY11 Rate per client times number of clients as of 12/31/10  
\$369,848 - County General Fund

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**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 FY10 was 61,561.

**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. Interpretation services are available for callers when needed. It also provides the following services: deploys 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 was 50,848 for FY10.

**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 2,466 in FY10.

**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 5,071 in FY10.

**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 contacts was 3,176 in FY10.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total Crisis System Contacts <sup>1</sup>	61,561	62,000	62,000	62,000
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ER <sup>2</sup>	97.0%	97.0%	97.0%	97.0%

**Performance Measure - Description**

<sup>1</sup>Total crisis system contacts actuals for FY10 = call center contacts (50,848), project respond contacts (2,466), urgent walk-in clinics contacts (5,071) and utilization reviews (3,176).

<sup>2</sup>The outcome measure shows the percentage 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>	2011	2011	2012	2012
Personnel	\$0	\$2,448,887	\$0	\$2,256,384
Contracts	\$1,073,345	\$3,036,662	\$1,073,345	\$2,957,413
Materials & Supplies	\$0	\$25,540	\$0	\$104,763
Internal Services	\$0	\$313,437	\$0	\$281,099
Total GF/non-GF:	<b>\$1,073,345</b>	<b>\$5,824,526</b>	<b>\$1,073,345</b>	<b>\$5,599,659</b>
Program Total:	<b>\$6,897,871</b>		<b>\$6,673,004</b>	
Program FTE	0.00	21.41	0.00	20.76
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$35,057	\$0
Intergovernmental	\$0	\$5,818,526	\$0	\$5,505,659
Other / Miscellaneous	\$0	\$6,000	\$0	\$94,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$5,824,526</b>	<b>\$35,057</b>	<b>\$5,599,659</b>

## Explanation of Revenues

\$159,015 - State Mental Health Grant Local Admin; \$1,720,504 - State Mental Health Grant Non Residential; \$2,118,115 - State Mental Health Grant Community Crisis Services: Based on FY11 revised budget  
\$88,000 - State Mental Health Grant Beginning Working Capital: Based on estimated FY11 carryover  
\$1,508,025 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10  
\$6,000 - Fees: Based on FY11 received Y-T-D Revenue projections  
\$1,073,345 - County General Fund

## Significant Program Changes

Last year this program was:



**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:** 25055

**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.

**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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# persons admitted who would otherwise have been hospitalized or jailed <sup>1</sup>	0	150	100	700
Outcome	A low readmission rate to acute care <sup>1</sup>	0.0%	14.0%	14.0%	14.0%

**Performance Measure - Description**

<sup>1</sup>This performance measure represents the first year of sub-acute facility operations.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$200,000	\$175,000	\$597,500	\$2,646,295
Internal Services	\$0	\$0	\$0	\$256,253
<b>Total GF/non-GF:</b>	<b>\$200,000</b>	<b>\$175,000</b>	<b>\$597,500</b>	<b>\$2,902,548</b>
<b>Program Total:</b>	<b>\$375,000</b>		<b>\$3,500,048</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$44,287	\$0
Intergovernmental	\$0	\$937,750	\$0	\$2,902,548
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$937,750</b>	<b>\$44,287</b>	<b>\$2,902,548</b>

**Explanation of Revenues**

\$400,000 - State Mental Health Grant: Based on FY11 revised budget  
 \$1,905,048 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10  
 \$597,500 - City of Portland General Fund  
 \$597,500 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**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 163 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total unduplicated children receiving inpatient, subacute & residential care <sup>1</sup>	163	668	163	183
Outcome	Average length of stay in psychiatric residential treatment <sup>2</sup>	97	82	91	85

**Performance Measure - Description**

<sup>1</sup>Total unduplicated children receiving inpatient, subacute, and residential psychiatric care. The difference between the FY10-11 current year estimate and FY10-11 current year purchased is due to a correction of the calculation methodology for this output, which had inadvertently been including adults in the count.

<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
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$2,800,000	\$0	\$3,396,382
Internal Services	\$0	\$47,600	\$0	\$168,461
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$2,847,600</b>	<b>\$0</b>	<b>\$3,564,843</b>
<b>Program Total:</b>	<b>\$2,847,600</b>		<b>\$3,564,843</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$82,872	\$0
Intergovernmental	\$0	\$2,084,850	\$0	\$3,564,843
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,084,850</b>	<b>\$82,872</b>	<b>\$3,564,843</b>

**Explanation of Revenues**

\$3,564,843 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

**Significant Program Changes**

Last year this program was:

**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 payer 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 FY10 ICP investigated 1,143 E-Holds for indigent residents and 4,401 total holds; commitment staff monitored 493 patients and 143 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 pay for 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):** Funding provides for Intensive Case Management (ICM) for patients discharging from the State Hospital and acute care hospitals, and for four Emergency Department Liaisons. ICM and transition planning prevent relapses into hospital care and reduce the county's burden as the payer 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. Commitment 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of E-Holds for indigent County residents	1,143	1,100	1,100	1,100
Outcome	% of total E-Holds that went to Court hearing	7.4%	7.4%	8.4%	8.4%
Output	# of commitments monitored	636	750	650	650
Outcome	% of total E-Holds with a hearing that resulted in commitment	78.2%	73.0%	80.0%	80.0%

**Performance Measure - Description**

Outcomes measure staff effectiveness in applying ORS 426

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**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$898,489	\$2,056,968	\$925,224	\$2,155,638
Contracts	\$200,000	\$2,098,071	\$200,000	\$1,698,071
Materials & Supplies	\$0	\$51,950	\$0	\$70,342
Internal Services	\$0	\$370,101	\$0	\$276,533
<b>Total GF/non-GF:</b>	<b>\$1,098,489</b>	<b>\$4,577,090</b>	<b>\$1,125,224</b>	<b>\$4,200,584</b>
<b>Program Total:</b>	<b>\$5,675,579</b>		<b>\$5,325,808</b>	
Program FTE	9.00	20.30	9.00	21.10
<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,577,090	\$0	\$4,112,069
Other / Miscellaneous	\$0	\$0	\$0	\$88,515
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$4,577,090</b>	<b>\$0</b>	<b>\$4,200,584</b>

**Explanation of Revenues**

\$523,028 - State Mental Health Grant Non Residential: Based on FY11 revised budget  
 \$2,249,670 - State Mental Health Grant Regional Acute Inpatient Facility: Based on FY11 revised budget  
 \$1,339,371 - State Mental Health Grant Community Crisis Services: Based on FY11 revised budget  
 \$88,515 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover  
 \$1,125,224 - County General Fund

**Significant Program Changes**

**Last year this program was:**  
 Last year this program was #25058

**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 who require 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 367 referrals in FY10, with 39.8% 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. This is 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 93 clients in FY10. Bridgeview provides 39 transitional, Single Room Occupancy units and 9 permanent, supported housing 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 transitional clients and 9 permanent clients in FY10.

Residential Services and Transitional Housing link mental health treatment to stable, short term and long term housing. Programs provide intervention and service coordination in the provision of housing and comprehensive community supports and services. Staff 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of new Residential Services referrals	367	350	370	380
Outcome	% of Residential Services clients placed in housing <sup>1</sup>	39.8%	40.0%	40.0%	45.0%
Output	# of residents served by Bridgeview	94	100	95	95

**Performance Measure - Description**

<sup>1</sup> This measure assesses the percentage of clients referred placed 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 309-032-0450, Adult Foster Care 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
Program Expenses	2011	2011	2012	2012
Personnel	\$465,394	\$311,486	\$468,275	\$296,710
Contracts	\$565,722	\$7,513,741	\$399,799	\$8,851,054
Materials & Supplies	\$12,292	\$0	\$16,224	\$29,000
Internal Services	\$70,571	\$12,260	\$61,448	\$11,264
<b>Total GF/non-GF:</b>	<b>\$1,113,979</b>	<b>\$7,837,487</b>	<b>\$945,746</b>	<b>\$9,188,028</b>
<b>Program Total:</b>	<b>\$8,951,466</b>		<b>\$10,133,774</b>	
Program FTE	4.50	6.65	4.50	3.30
<b>Program Revenues</b>				
Intergovernmental	\$0	\$7,837,487	\$0	\$8,861,919
Other / Miscellaneous	\$0	\$0	\$0	\$326,109
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$7,837,487</b>	<b>\$0</b>	<b>\$9,188,028</b>

## Explanation of Revenues

\$307,974 - State Mental Health Grant Local Admin; \$2,731,327 - State Mental Health Grant Non Residential; \$2,559,036 - State Mental Health Grant Residential Treatment Services; \$1,898,959 - State Mental Health Grant Non Res Support; \$1,083,907 - State Mental Health Grant: Based on FY11 revised budget  
 \$326,109 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover  
 \$280,716 - City of Portland: Based on FY11 revised budget  
 \$945,746 - County General Fund

## Significant Program Changes

### Last year this program was:

Last year this was program offer 25060

The number served by the Bridgeview was slightly lower than expected due to the change of 9 transitional units to permanent supported housing, limiting the number of units available for multiple occupancy during a year.



**Lead Agency:** County Human Services

**Program Contact:** Sandy Haffey

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Adult Mental Health Initiative (AMHI) coordinates the care and housing of individuals who are leaving Oregon State Hospital (OSH) and/or residing primarily in licensed residential facilities within the community. The goals are to expedite safe discharges from the state hospital, move individuals into the least restrictive housing possible, and develop supports to maximize independent living. This is a state-wide initiative.

**Program Description**

Mental Health and Addiction Services (MHASD) staff work with OSH, Addictions and Mental Health (AMH), Mental Health Organizations (MHOs) and other counties to coordinate the placement and movement of individuals primarily within a statewide network of licensed housing providers. New or enhanced services offered by AMHI include: (1) supported housing development and rental assistance to increase housing options matched to client need; (2) Exceptional Needs Care Coordination to assure access to appropriate housing placements and the development of supports to increase success in the community; (3) Supported Employment and Assertive Community Treatment to help move clients towards greater independence; and (4) transition planning management to assure the most efficient utilization of the licensed residential housing stock within the community.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of Multnomah Co. residents accepted to Oregon State Hospital	0	0	145	145
Outcome	% of clients discharged from Oregon State Hospital waiting list to residential	0.0%	0.0%	55.0%	55.0%
Outcome	% of clients diverted off of Oregon State Hospital wait list to community	0.0%	0.0%	47.0%	55.0%

**Performance Measure - Description**

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization contract

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$517,486
Contracts	\$0	\$0	\$0	\$1,126,223
Internal Services	\$0	\$0	\$0	\$100,811
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,744,520</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,744,520</b>	
Program FTE	0.00	0.00	0.00	5.25
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$25,547	\$0
Intergovernmental	\$0	\$0	\$0	\$1,098,943
Other / Miscellaneous	\$0	\$0	\$0	\$645,577
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$25,547</b>	<b>\$1,744,520</b>

**Explanation of Revenues**

\$1,098,943 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

\$645,577 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer describes the existing continuum of adult mental health care funded by Oregon Health Plan and managed by Verity, the county's mental health organization. The continuum addresses the needs of adults at emergent (most acute), urgent and routine (least acute) levels of care. 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 8,000 adults annually.

**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. The call center coordinated these services for 1,331 inpatient discharges in FY10.

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.

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 to lessen the need for more acute services. An average of 3,805 adults receive outpatient services each month, with many remaining in treatment for several months.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total adults receiving outpatient mental health services <sup>1</sup>	7,766	6,813	8,015	8,977
Outcome	Percent of adults readmitted to inpatient within 30 days of discharge <sup>2</sup>	20.5%	19.4%	17.4%	17.4%

**Performance Measure - Description**

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

<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**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$240,877	\$0	\$70,880
Contracts	\$0	\$20,900,000	\$284,000	\$19,525,000
Materials & Supplies	\$0	\$1,891	\$0	\$2,569
Internal Services	\$0	\$383,818	\$0	\$991,570
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$21,526,586</b>	<b>\$284,000</b>	<b>\$20,590,019</b>
<b>Program Total:</b>	<b>\$21,526,586</b>		<b>\$20,874,019</b>	
Program FTE	0.00	1.00	0.00	0.50
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$477,260	\$0
Intergovernmental	\$0	\$21,526,586	\$0	\$20,530,019
Other / Miscellaneous	\$0	\$0	\$0	\$60,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$21,526,586</b>	<b>\$477,260</b>	<b>\$20,590,019</b>

**Explanation of Revenues**

\$60,000 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover

\$20,530,019 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

\$284,000 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**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 928 adults.

**Program Description**

These funds will support an array of services for the over 900 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 the 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 DCHS 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total # of adults who received County funded outpatient services or medication <sup>1</sup>	836	800	829	928
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	1	0	1	1

**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> Total number of emergency holds for uninsured adults divided by the number of unduplicated uninsured adults identified in item #1 (above).

## Legal/Contractual Obligation

Multnomah Treatment Fund was initiated by the Board of County Commissioners.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$1,177,976	\$260,000	\$1,351,826	\$316,150
Total GF/non-GF:	<b>\$1,177,976</b>	<b>\$260,000</b>	<b>\$1,351,826</b>	<b>\$316,150</b>
Program Total:	<b>\$1,437,976</b>		<b>\$1,667,976</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$260,000	\$0	\$260,000
Other / Miscellaneous	\$0	\$0	\$0	\$56,150
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$260,000</b>	<b>\$0</b>	<b>\$316,150</b>

## Explanation of Revenues

\$56,150 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover  
\$260,000 - State Mental Health Grant Non-Residential Services: Based on FY11 revised budget  
\$1,351,826 - County General Fund

## Significant Program Changes

Last year this program was:

**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 aged 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 77 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total individuals enrolled in program receiving ongoing services	60	80	77	77
Outcome	Percent reduction in hospitalization rate 6 months pre and post enrollment <sup>1</sup>	90.0%	82.0%	85.0%	85.0%

**Performance Measure - Description**

<sup>1</sup> This measure compares the hospitalization rate for the 6 months prior to services with the rate for the 6 months post EASA service enrollment which is an indication of the stabilization of the individual.

**Legal/Contractual Obligation**

County Financial Assistance Agreement

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$692,820	\$0	\$684,741
Contracts	\$0	\$246,900	\$0	\$305,960
Materials & Supplies	\$0	\$16,565	\$0	\$26,416
Internal Services	\$0	\$91,995	\$0	\$82,475
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,048,280</b>	<b>\$0</b>	<b>\$1,099,592</b>
<b>Program Total:</b>	<b>\$1,048,280</b>		<b>\$1,099,592</b>	
Program FTE	0.00	11.15	0.00	7.20
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$1,220	\$0
Intergovernmental	\$0	\$1,048,280	\$0	\$810,770
Other / Miscellaneous	\$0	\$0	\$0	\$288,822
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,048,280</b>	<b>\$1,220</b>	<b>\$1,099,592</b>

**Explanation of Revenues**

\$758,290 - State Mental Health Grant Non-Residential Services: Based on FY11 revised budget

\$288,822 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover

\$52,480- Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

**Significant Program Changes**

Last year this program was:



**Lead Agency:** County Human Services

**Program Contact:** Karl Brimmer

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

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

LifeWorks NW performs mental health assessments of individuals receiving domestic violence-related services in Multnomah County, including the four domestic violence shelters and the Gateway Center. This program offer would continue the funding for one clinician that began as a result of a pharmacy settlement.

**Program Description**

A LifeWorks NW clinician performs mental health assessments to individuals who are receiving domestic violence-related services in Multnomah County, including the four domestic violence shelters and the Gateway Center. This position is filled by a clinician who serves as a liaison between domestic violence and mental health and addiction providers. The clinician travels to each of the shelters on a regular basis and also spends approximately two-thirds of her time at the Gateway Center. She attends the appropriate domestic violence community meetings and events (such as the monthly Family Violence Coordinating Council meetings) and provides training to facilitate increased knowledge and understanding between the mental health and domestic violence providers. The clinician also carries a small caseload of uninsured clients and provides group services such as Seeking Safety and a domestic violence process group that supplements what is offered within the domestic violence agency settings.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of unique clients served annually	0	0	0	250
Outcome	Percentage of clients reporting they are 'better able to make informed decisions	0.0%	0.0%	0.0%	95.0%

**Performance Measure - Description**

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Materials & Supplies	\$0	\$0	\$32,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$32,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$32,000</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**

\$32,000 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Carol Matteson

**Program Offer Type:** Administration

**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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
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>	2011	2011	2012	2012
Contracts	\$0	\$420,965	\$0	\$465,000
Internal Services	\$0	\$7,156	\$0	\$0
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$428,121</b>	<b>\$0</b>	<b>\$465,000</b>
<b>Program Total:</b>	<b>\$428,121</b>		<b>\$465,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$428,121	\$0	\$465,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$428,121</b>	<b>\$0</b>	<b>\$465,000</b>

## Explanation of Revenues

\$465,000 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**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 4,498 children annually, to a comprehensive outpatient service system that successfully maintains over 4,500 children in their homes, schools, and community.

**Program Description**

This array provides a continuum of services for over 8,900 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total children receiving outpatient services <sup>1</sup>	4,553	4,142	4,556	5,103
Outcome	Percent children with improved behavior in school <sup>2</sup>	80.0%	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.

<sup>2</sup> Percentage of children with improved behavior in school as reported in state 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>	2011	2011	2012	2012
Personnel	\$1,044,007	\$928,666	\$1,114,131	\$900,205
Contracts	\$135,264	\$11,668,873	\$135,164	\$10,328,189
Materials & Supplies	\$1,305	\$38,406	\$43,458	\$9,169
Internal Services	\$275,910	\$241,403	\$248,254	\$539,003
Total GF/non-GF:	<b>\$1,456,486</b>	<b>\$12,877,348</b>	<b>\$1,541,007</b>	<b>\$11,776,566</b>
Program Total:	<b>\$14,333,834</b>		<b>\$13,317,573</b>	
Program FTE	9.90	8.35	10.50	8.35
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$247,253	\$0
Intergovernmental	\$0	\$12,877,348	\$0	\$11,776,566
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$12,877,348</b>	<b>\$247,253</b>	<b>\$11,776,566</b>

## Explanation of Revenues

\$522,941 - State Mental Health Grant Child/Adolescent Mental Health Services: Based on FY11 revised budget

\$304,560 - Title XIX-OMAP payments: Based on FY11 revised budget

\$58,238 - FFS Service Receipts: Based on FY11 revised budget

\$148,092 - Head Start Contracts: Based on FY11 grant award

\$106,823 - FQHC: Based on FY11 revised budget

\$10,635,912 - Oregon Health Plan Premium: Based on FY11 Rate per Client times number of clients as of 12/31/10

\$1,541,007 - County General Fund

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25069

**Program Contact:** Ebony Clarke

**Program Characteristics:**

**Executive Summary**

This Care Management Organization (CMO) has oversight of Integrated Service Array (ISA) intake, screening and eligibility determination for children/youth identified as needing the most intensive mental health services and Wraparound Facilitation. These at-risk children have multiple system involvement. The CMO is a combination of funding from partnering entities such as child welfare, MESD, school districts, juvenile justice and mental health. The Wraparound ASO (Administrative Services Organization) is the infrastructure that supports sharing of integrated dollars. The ASO supports child-serving systems and their community partners in developing strategic relationships to attract additional federal and private resources.

**Program Description**

Wraparound Facilitation, as administered by the Care Management Organization (CMO), involves forming and facilitating Child and Family Teams to develop a single plan of care with blended resources to serve these at-risk children. Each child referred for facilitation gets a plan of care. Wraparound Facilitation was previously known as Family Care Coordination last year. The Wraparound CMO provides the following for up to 100 children/youth with severe mental health needs who are involved in at least two other systems: 1) Facilitate the Wraparound Child and Family Team to develop a single plan of care for delivering services to individual children and families 2) A plan of care that is family-guided, culturally competent, multidisciplinary and naturally supported to help children stay with family, in the community, in school and out of trouble. 3) An environment in which children, youth and families are heard and respected, promoting an equal role in developing and managing the plan of care 4) Assurance that appropriate authorizations are in place and service effectiveness is monitored through data collection and outcome measurement 5) Manage flexible fund expenditure.

Multnomah Wraparound intake 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 Teams for children. Multnomah Wraparound is charged with monitoring placement of all ISA children/youth in services and their discharge from the ISA level of care.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of unduplicated children served through wraparound	0	0	100	100
Outcome	% of caregivers that have social networks to help raise the child <sup>1</sup>	0.0%	0.0%	86.0%	86.0%

**Performance Measure - Description**

<sup>1</sup>Outcome measure data will be collected on a monthly basis during FY12 at Wraparound Child and Family team meetings. The question: "Caregiver's social network in the past 30 days" is a state required question on the ISA Progress Review form (Q15) and is answered with a 5-point Likert scale by the caregiver.

## Legal/Contractual Obligation

Mental Health Organization contract

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$830,853	\$0	\$966,573
Contracts	\$0	\$96,000	\$0	\$306,347
Materials & Supplies	\$0	\$16,074	\$0	\$299,589
Internal Services	\$0	\$124,496	\$0	\$138,112
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,067,423</b>	<b>\$0</b>	<b>\$1,710,621</b>
<b>Program Total:</b>	<b>\$1,067,423</b>		<b>\$1,710,621</b>	
Program FTE	0.00	8.50	0.00	9.70
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$29,193	\$0
Intergovernmental	\$0	\$1,067,423	\$0	\$1,624,621
Other / Miscellaneous	\$0	\$0	\$0	\$86,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,067,423</b>	<b>\$29,193</b>	<b>\$1,710,621</b>

## Explanation of Revenues

\$1,255,798 - OHP Premium: Based on FY11 Rate per client times number of clients as of 12/31/10  
 \$106,823 - State Mental Health Grant Child/Adolescent MH Svcs: Based on FY11 revised budget  
 \$86,000 - State Mental Health Grant Beginning Working Capital: Based on FY11 estimated carryover  
 \$25,000 - Barlow School District; \$10,000 - Centennial School District; \$10,000 - David Douglas School District; \$75,000 - Multnomah ESD; \$10,000 - Parkrose School District; \$50,000 - Portland Public School District; \$25,000 - Reynolds School District: Based on FY11 revised budget  
 \$57,000 - Oregon Youth Authority Based on FY11 revised budget

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25068, Family Care Coordinators

This program was initiated after the adoption of the FY11 budget, so this is a new program offer.



**Lead Agency:** County Human Services

**Program Contact:** Ebony Clarke

**Program Offer Type:** Administration

**Related Programs:** 25068

**Program Characteristics:**

**Executive Summary**

This Administrative Services Organization (ASO) oversees a blended funding pool as specified by the State of Oregon Wraparound Initiative implementation. It combines funding from partnering entities such as Child Welfare, Oregon Youth Authority, Multnomah Education Service District (MESD), school districts, juvenile justice and mental health. The ASO is the infrastructure for sharing integrated funding. It works with child-serving systems and community partners to form the strategic relationships that result in additional funding. The primary goal of the ASO is to maximize available resources for approximately 100 children, youth and families served by multiple systems.

**Program Description**

The Wraparound Administrative Services Organization (ASO) has oversight of the Wraparound CMO (offer 25068) as it coordinates the care of approximately 100 children involved with multiple systems. Coordination, as administered by the CMO, includes forming and facilitating Child and Family Teams to develop a single plan of care with blended resources. Pooling resources to serve clients involved in more than one system reduces duplication and fragmentation of services. It also reduces cost shifting.

The ASO addresses system issues by identifying trends and establishing success indicators. It builds partnerships to facilitate planning, decision making and oversight. It supports family and youth involvement as primary decision makers in the development, implementation and modification of the system of care for children and families. The ASO coordinates and sustains funding, ensures quality assurance and utilization management, access to information technology systems, and evaluates effectiveness.

The ASO implements a governance structure to oversee the full implementation of the respective systems responsibilities as outlined in an intergovernmental agreement. The ASO will ensure that the policies and procedures are culturally competent and that services provided are compatible with the families' cultural beliefs, practices, literacy skills and language.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of children completing the survey for at least nine months of the year <sup>1</sup>	0.0%	0.0%	0.0%	75.0%
Outcome	Percentage of children who are meeting goals on wraparound service plan <sup>2</sup>	0.0%	0.0%	65.0%	65.0%
Outcome		0	0	0	0

**Performance Measure - Description**

<sup>1</sup>The survey questions correspond with National Wraparound measure outcomes related to staying in school, at home and out of trouble.

<sup>2</sup>Data for the outcome measure is taken from question 7 on the monthly Child and Family Team survey form (form mentioned in the output measure)

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$0	\$0	\$275,608
Internal Services	\$0	\$0	\$0	\$13,670
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$289,278</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$289,278</b>	
Program FTE	0.00	0.00	0.00	3.50
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$6,725	\$0
Intergovernmental	\$0	\$0	\$0	\$289,278
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,725</b>	<b>\$289,278</b>

**Explanation of Revenues**

\$289,278 OHP Premium: Based on FY11 Rate per client times number of clients as of 12/31/10

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**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 568 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 93% 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.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total unduplicated children, families and adults served <sup>1</sup>	568	550	550	550
Outcome	% of uninsured children and families receiving services in Spanish <sup>2</sup>	90.0%	93.0%	93.0%	93.0%

**Performance Measure - Description**

<sup>1</sup> Total unduplicated child, families and adults identified as receiving formal and informal mental health services.

<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>	2011	2011	2012	2012
Personnel	\$252,607	\$0	\$206,168	\$0
Materials & Supplies	\$4,363	\$0	\$5,776	\$0
Internal Services	\$62,577	\$0	\$56,287	\$0
<b>Total GF/non-GF:</b>	<b>\$319,547</b>	<b>\$0</b>	<b>\$268,231</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$319,547</b>		<b>\$268,231</b>	
Program FTE	2.80	0.00	2.10	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**

\$268,231 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Betty Schallberger

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

School Based Mental Health is an essential component of the mental health system of care for children and families. This program serves 1,021 children and teens with serious mental health disorders in over 92 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 11,512 preventative consultation contacts with school based health center staff and others that averted need for higher level of care. Sustainability efforts have been focused on improving the program's OHP billing reimbursement, which increased 21% in the last year.

**Program Description**

Mental health treatment is provided in schools to decrease barriers such as stigma, cost and transportation for 1,008 underserved families. This program reaches youth who have not accessed services in a mental health center and 51% of those served were children of color. Approximately 97% 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 Centers when possible to provide seamless services. About 71% 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total unduplicated children receiving mental health services.	1,000	950	1,008	1,050
Outcome	% of children receiving services showing improved school behavior & attendance <sup>1</sup>	88.0%	80.0%	86.0%	86.0%

**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

School districts contract with MHASD for school-based mental health staff to serve their students.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$437,529	\$912,485	\$440,734	\$991,724
Materials & Supplies	\$6,565	\$25,008	\$14,556	\$29,667
Internal Services	\$87,820	\$45,947	\$79,630	\$36,569
Total GF/non-GF:	<b>\$531,914</b>	<b>\$983,440</b>	<b>\$534,920</b>	<b>\$1,057,960</b>
Program Total:	<b>\$1,515,354</b>		<b>\$1,592,880</b>	
Program FTE	4.02	9.22	4.12	9.72
<b>Program Revenues</b>				
Intergovernmental	\$0	\$983,440	\$0	\$1,057,960
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$983,440</b>	<b>\$0</b>	<b>\$1,057,960</b>

## Explanation of Revenues

\$620,775 - State Mental Health Grant Child/Adolescent MH Services: Based on FY11 revised budget

\$157,029 - FQHC: Based on FY11 revised budget

\$10,000 - Parkrose School District; \$75,000 - Centennial School District; \$26,497 - Roosevelt High School: Based on FY11 revised budget

\$168,659 - Fee for Service Insurance Receipts: Based on current year projections

\$534,920 - County General Fund

## Significant Program Changes

### Last year this program was:

Longstanding revenue contracts with Parkrose School District for \$10,000 and with Centennial School District for \$75,000 continued for this school year. A new revenue contract with Portland Public School District was initiated for \$26,497 to fund .5FTE Mental Health Consultant at Roosevelt High School from 9-1-10 through 6-30-11. This contract will continue into FY12-03 and into FY13-04 due to a three year state school improvement grant that Roosevelt High received in FY11.

**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 330 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.

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, have a relationship of trust with the communities they serve, and 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total Culturally Diverse Individuals Receiving Services <sup>1</sup>	336	400	333	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**

Board of County Commissioners' initiative

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$1,292,239	\$0	\$1,292,239	\$0
Total GF/non-GF:	<b>\$1,292,239</b>	<b>\$0</b>	<b>\$1,292,239</b>	<b>\$0</b>
Program Total:	<b>\$1,292,239</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:



**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 multidagnosed homeless clients. The continuum will serve about 5,500 clients. 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, 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number served in treatment (all levels)	5,500	5,500	5,500	5,200
Outcome	Percentage of clients who successful complete treatment <sup>1</sup> (Outpatient)	55.0%	60.0%	60.0%	58.0%

**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
Program Expenses	2011	2011	2012	2012
Personnel	\$270,204	\$422,421	\$280,485	\$429,808
Contracts	\$2,612,974	\$8,037,682	\$2,484,047	\$8,037,682
Materials & Supplies	\$83,150	\$0	\$16,213	\$840
Internal Services	\$59,842	\$9,243	\$51,512	\$8,449
Total GF/non-GF:	<b>\$3,026,170</b>	<b>\$8,469,346</b>	<b>\$2,832,257</b>	<b>\$8,476,779</b>
Program Total:	<b>\$11,495,516</b>		<b>\$11,309,036</b>	
Program FTE	2.50	4.20	2.50	4.20
Program Revenues				
Intergovernmental	\$0	\$8,469,346	\$0	\$8,476,779
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$8,469,346</b>	<b>\$0</b>	<b>\$8,476,779</b>

## Explanation of Revenues

\$156,383 - Local 2145 Beer and Wine Tax Revenues: Based on FY11 revised budget

\$261,584 - State Mental Health Grant Local Admin; \$71,772 - 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 above revenues based on FY11 revised budget

\$2,832,257 - County General Fund

## Significant Program Changes

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

Reduced contracted funds in Program Offer 25080 - Adult Addictions Treatment Continuum by \$200,000; these funds will be re-programmed in Program Offer 25090 - Addictions Detoxification and Post-Detoxification Housing.

**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 rate 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Gamblers and family members accessing treatment annually <sup>1</sup>	356	500	350	356
Outcome	Gambler successful completion rate <sup>2</sup>	62.0%	34.0%	63.0%	63.0%

**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
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$33,818	\$0	\$34,653
Contracts	\$0	\$780,000	\$0	\$318,889
Internal Services	\$0	\$2,183	\$0	\$1,995
Total GF/non-GF:	<b>\$0</b>	<b>\$816,001</b>	<b>\$0</b>	<b>\$355,537</b>
Program Total:	<b>\$816,001</b>		<b>\$355,537</b>	
Program FTE	0.00	0.30	0.00	0.30
<b>Program Revenues</b>				
Intergovernmental	\$0	\$816,001	\$0	\$355,537
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$816,001</b>	<b>\$0</b>	<b>\$355,537</b>

### Explanation of Revenues

\$36,648 - State Mental Health Grant Local Admin; \$25,000 - State Mental Health Grant Gambling Prevention; \$293,889- State Mental Health Grant Gambling Treatment Services: All based on FY11 revised budget

### Significant Program Changes

Last year this program was:

**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 prevention 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), individualized support for youth, and a family engagement/education program. 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 primarily focused on serving youth living in public housing, and is projected to provide over 1,500 prevention service contacts to more than 200 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 afternoon and evening services offering on-site homework help, socializing and skill building activities to 200 youth whose families live in public housing. The structured services at HAP housing sites also include tutoring, mentoring and family-support home visits.

While the overall aim of the HAP prevention program is to provide a range of services to the entire family, it is expected that most of the youth served by the structured after-school program will range from ages 4 to 17.

By directly addressing community risk factors, prevention reduces multiple problem behaviors and improves outcomes for children and families. The Multnomah County prevention program builds partnerships with collaborative community partners and local prevention coalitions, using natural helpers, volunteer organizations, professionals and cultural mentors to promote developmental assets and academic achievement.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Youth served at public housing sites <sup>1</sup>	107	200	200	200
Outcome	Core group <sup>2</sup> youth w/ improved behavior	85.0%	75.0%	75.0%	75.0%
Outcome	Core group youth w/ improved academic achievement	91.0%	75.0%	75.0%	75.0%

**Performance Measure - Description**

<sup>1</sup>Public Housing measures are for the entire collaborative after-school program serving youth in public housing, including all after-school activities. Current year and next year estimates are based on proposed measures developed by the HAP provider, which also include youth self-reports and parent feedback.

<sup>2</sup>Intensive core group services will be provided to 30 families with youth exhibiting behavioral and academic risk factors, based on youth self-reports, parent feedback and teacher observation. Outcomes of improved behavior (e.g., 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>	2011	2011	2012	2012
Contracts	\$0	\$194,259	\$0	\$194,259
Total GF/non-GF:	<b>\$0</b>	<b>\$194,259</b>	<b>\$0</b>	<b>\$194,259</b>
Program Total:	<b>\$194,259</b>		<b>\$194,259</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$194,259	\$0	\$194,259
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$194,259</b>	<b>\$0</b>	<b>\$194,259</b>

## Explanation of Revenues

\$194,259 State Mental Health Grant Prevention Services: Based on FY11 revised budget

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

#25086, Addiction Services Alcohol and Drug Prevention. The primary prevention program at the Housing Authority Program is maintained for FY2011-12. Two small culturally-specific programs will be discontinued as they no longer meet criteria as community coalitions, nor have they been able to sustain any recognized evidence-based prevention program.

**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 FY10 Community Court served 923 clients, Aid and Assist/Treat Until Fit served 251 clients, Mental Health Court opened 32 cases and served 52.

**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 52 in FY10.

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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of participants in Community Court	923	1,200	800	800
Outcome	% of participants in good standing or have successfully completed	59.0%	60.0%	59.0%	59.0%
Output	# of participants in Aid and Assist/Treat Until Fit	251	195	275	275
Outcome	% of participants discharged from hospital/jail to community placement	89.0%	70.0%	86.0%	86.0%

**Performance Measure - Description**

The outcomes measure staff effectiveness in diversion of clients from jail and hospital systems.

**Legal/Contractual Obligation**

State of Oregon Financial Assistance Agreement

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$208,528	\$583,334	\$213,647	\$575,377
Materials & Supplies	\$3,782	\$14,436	\$4,849	\$19,997
Internal Services	\$19,266	\$57,246	\$16,937	\$50,238
Total GF/non-GF:	<b>\$231,576</b>	<b>\$655,016</b>	<b>\$235,433</b>	<b>\$645,612</b>
Program Total:	<b>\$886,592</b>		<b>\$881,045</b>	
Program FTE	2.00	6.00	2.00	6.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$655,016	\$0	\$645,612
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$655,016</b>	<b>\$0</b>	<b>\$645,612</b>

**Explanation of Revenues**

\$546,067 - State Mental Health Grant Non-Residential Adult: Based on FY11 revised budget

\$99,545 - State Mental Health Grant Local Admin: Based on FY11 revised budget

\$235,433 - County General Fund

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

Last year this program was #25088

Measure #1 for # of Community Court participants has decreased due to budget cuts in the District Attorney's office and a change in the number and type of crimes that are processed. This change decreases the # of participants available to be referred to Community Court.



**Lead Agency:** County Human Services

**Program Contact:** Ray Hudson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**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. Benefiting from both clinical and housing support, clients move from active addiction, through treatment and into the recovery community; 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, health issues, etc. 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 (\$18 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 60 supportive housing units can house 2 to 3 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of admissions annually to detoxification <sup>1</sup>	2,364	2,201	2,560	2,600
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	94.0%	91.0%	95.0%	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, State/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>	2011	2011	2012	2012
Contracts	\$1,037,166	\$1,878,359	\$1,237,166	\$1,878,359
Total GF/non-GF:	<b>\$1,037,166</b>	<b>\$1,878,359</b>	<b>\$1,237,166</b>	<b>\$1,878,359</b>
Program Total:	<b>\$2,915,525</b>		<b>\$3,115,525</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 FY11 revised budget  
\$418,917 Local 2145 Beer & Wine Tax Revenues: Based on FY11 revised budget  
\$200,000 - OTO County General Fund  
\$1,037,166 - County General Fund

## Significant Program Changes

### Last year this program was:

\$200,000 contracted dollars from Program Offer # 25080 - Adult Addictions Treatment Continuum were re-programmed to Program Offer # 25090 - Addictions Detoxification and Post-Detoxification Housing.

**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 10,500 annual admissions.

**Program Description**

The Sobering program is a multi-jurisdictionally funded community resource that operates 24 hours per day, 7 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 10,500 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total Admissions	9,564	11,000	9,000	9,000
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 four 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	2011	2011	2012	2012
Contracts	\$627,722	\$0	\$627,722	\$0
Total GF/non-GF:	<b>\$627,722</b>	<b>\$0</b>	<b>\$627,722</b>	<b>\$0</b>
Program Total:	<b>\$627,722</b>		<b>\$627,722</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**

\$627,722 - County General Fund

**Significant Program Changes**

Last year this program was:

**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, including a culturally-specific outpatient service package for high-risk Latino youth. It also provides Alcohol and Drug Free housing resources for families in which the adult parent(s) are in early addiction recovery. In 2011-12, 215 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 a culturally-specific service package for Latino 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 Fund 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 youth residential treatment provider.

The Family Alcohol and Drug-Free Network (FAN), a collaboration of community providers, includes 88 units of Central City Concern 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Youth assessed and entered into treatment <sup>1</sup>	300	250	225	215
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	Families that move into long term permanent housing	75.0%	53.0%	75.0%	75.0%

**Performance Measure - Description**

<sup>1</sup>Continued reduction in numbers of youth in outpatient treatment reflects continuing successful increase in Medicaid OHP enrollment of this targeted population and the resulting availability of OHP benefits to cover treatment costs, and the fact that there are increasingly fewer youth who require the bridge funding provided by this program in order to access outpatient treatment services.

<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>	2011	2011	2012	2012
Contracts	\$272,941	\$863,552	\$272,941	\$785,602
Total GF/non-GF:	<b>\$272,941</b>	<b>\$863,552</b>	<b>\$272,941</b>	<b>\$785,602</b>
Program Total:	<b>\$1,136,493</b>		<b>\$1,058,543</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$863,552	\$0	\$785,602
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$863,552</b>	<b>\$0</b>	<b>\$785,602</b>

## Explanation of Revenues

\$308,627 - State Mental Health Grant A&D Special Projects: Based on FY11 revised budget  
\$452,275 - State Mental Health Grant A&D Continuum of Care: Based on FY11 revised budget  
\$24,700 - Local 2145 Beer & Wine Tax Revenues: Based on FY11 revised budget  
\$272,941 County General Fund

## Significant Program Changes

### Last year this program was:

Please review comments under "Program Measure - Description" concerning reduced target numbers.

**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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Percent of eligible parents accepting FIT services <sup>1</sup>	70.0%	60.0%	87.0%	75.0%
Outcome	Average monthly number of clients in treatment <sup>2</sup>	0	0	243	245

**Performance Measure - Description**

✔ **Measure Changed**

<sup>1</sup>The percentage of eligible parents accepting FIT services starts in a month with the number of court petitions with an A&D allegation. From that beginning number the number of ineligible clients, and declined clients is subtracted. Then the percentage is calculated.

<sup>2</sup>The average monthly number of clients enrolled in treatment is a count by treatment provider of all clients as enrolled in that month and receiving treatment.

This is a new performance measure for FY 11-12. For this reason there is no "current year purchased".

## 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
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$25,000	\$0	\$20,500
Contracts	\$0	\$1,663,496	\$0	\$1,488,875
Materials & Supplies	\$0	\$0	\$0	\$1,500
Internal Services	\$0	\$35,675	\$0	\$26,871
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,724,171</b>	<b>\$0</b>	<b>\$1,537,746</b>
<b>Program Total:</b>	<b>\$1,724,171</b>		<b>\$1,537,746</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$18,285	\$0	\$13,219	\$0
Intergovernmental	\$0	\$1,724,171	\$0	\$1,537,746
<b>Total Revenue:</b>	<b>\$18,285</b>	<b>\$1,724,171</b>	<b>\$13,219</b>	<b>\$1,537,746</b>

## Explanation of Revenues

\$272,436 - State Mental Health Grant A&D Special Projects: Based on FY11 revised budget  
 \$723,560 - State Mental Health Grant A&D Continuum of Care: Based on FY11 revised budget  
 \$541,750 - Child & Family ACYF Federal Grant based on year 4/5 grant award

## 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**

Homeless Families' Shelter and Emergency Services provides year-round day and night shelter, access and referral to supportive services, housing placement and retention support, and increased winter capacity through the Warming Center to approximately 270 homeless households with children annually.

In partnership with faith-based congregations, non-profit providers, the City of Portland, and the community, the county's financial investment is leveraged, on average, \$2 for every \$1 provided.

60 households annually are placed into housing and provided with rent assistance, as well as placement retention support resulting in 85% remaining in permanent housing six months after exit.

**Program Description**

In FY 09-10, the Oregon Department of Human Services (DHS) documented 6,122 households with children, receiving food stamps in Multnomah County who self-reported that they were homeless. The majority of these families are largely invisible to the community because homeless family households are much more likely to be doubled up, couch surfing, or living in cars.

Leveraging new faith-based, non-profit, and jurisdictional partnerships put into action, in some cases for the first time in FY 09-10, the county has created a true year-round system of care for homeless families. Utilizing this base, the investment of general funds is leveraged and maximized. It is also anticipated that over time, 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served	289	270	270	270
Outcome	% of households who remain in permanent housing six months after exit <sup>1</sup>	85.0%	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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$433,000	\$0	\$691,009	\$0
Materials & Supplies	\$15,000	\$0	\$0	\$0
<b>Total GF/non-GF:</b>	<b>\$448,000</b>	<b>\$0</b>	<b>\$691,009</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$448,000</b>		<b>\$691,009</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**

\$691,009 - County General Fund

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

This program offer includes funding for existing services, in whole or in part, from the following FY11 program offers: 25120 Homeless Families Shelter (\$280,000) - entire offer, 25133 Housing Stabilization for Vulnerable Populations (\$62,285) - part of offer, 25134 Warming Center (\$153,000) - entire offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

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

**Executive Summary**

Based upon funder projections, approximately \$60,000 of current funding levels for Homeless Families Shelter and Emergency Services will be eliminated in FY 11-12.

\$25,000 of State Oregon Housing and Community Services funds was cut in FY 10-11 and managed through later implementation of year-round services. \$35,000 of City of Portland funds will not be allocated to support increased winter shelter capacity.

Approximately 12 homeless families with children will not receive housing placement, rent assistance, and retention support services, nor achieve an 85% permanent housing placement six months after exit - a 20% reduction from current year service levels.

**Program Description**

In FY 09-10, the Oregon State Department of Human Services (DHS) documented 6,122 households with children, receiving food stamps in Multnomah County who self-reported that they were homeless. The majority of these families are largely invisible to the community because homeless family households are much more likely to be doubled up, couch surfing, or living in cars.

Leveraging new faith-based, non-profit, and jurisdictional partnerships put into action, in some cases for the first time in FY 09-10, the county has created a true year-round system of care for homeless families. Utilizing this base, the investment of general funds is leveraged and maximized. It is also anticipated that over time, 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households to be served	0	0	0	12
Outcome	% of households that remain in permanent housing six 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
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$0	\$0	\$60,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$60,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$60,000</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

\$60,000 - County General Fund

## Significant Program Changes

**Last year this program was:** #25120, Homeless Family Shelter System

\$25,000 of State Oregon Housing and Community Services funds was cut in FY 10-11 and managed through later implementation of year-round services. \$35,000 of City of Portland funds will not be allocated to support increased winter shelter capacity.

**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**

The Rapid Re-Housing Initiative (RRI) provides flexible rent and other client assistance, housing placement, and placement retention support to approximately 70 homeless families with children who are living in the Homeless Families' Shelter System and the winter Warming Center, or in a domestic violence emergency shelter.

Services are currently funded through one-time-only contingency funds. This program offer requests to transition these services to ongoing funds.

In FY 10-11, 30 households will be placed using the highly successful 30 Families in 30 days model (30/30), 20 households into Oxford Houses, and 20 households fleeing domestic violence into permanent housing.

Over 90% of households served will remain in permanent housing six months after exit.

**Program Description**

The county and its service agencies continue to see an increase in homeless families due to the economy. This has not improved since last year, resulting in a demand for services that continues to exceed available funds in all areas, including rent assistance, energy assistance, food, and shelter space.

the Rapid Re-Housing Initiative (RRI) was developed and tested over the past two fiscal years with the goal of: taking proactive steps to mitigate some of the increased need seen in the community and avoid turning vulnerable families away from full shelters; building on what's been learned through the successful 30/30 pilot last year; trying new approaches believed to allow the Homeless Families' Shelter System to quickly serve some of the increase in families seeking shelter; and providing as much service as cost-effectively as possible, the Rapid Re-Housing Initiative (RRI) was developed and tested over the past two fiscal years.

Over 90% of families served through 30/30 have maintained their housing six months after exit.

The Oxford House model has developed as best practice within the addictions treatment field allowing individuals with addictions access to clean and sober permanent housing that emphasizes self empowerment and determination through democratically operated housing. Recently, the model has been used to operate a house for families fleeing domestic violence with good results – the opportunity to develop positive rental histories, receive intensive staff and peer support, share resources with other families, and increase incomes for a move into independent housing.

Oxford Houses are extremely cost-efficient options in comparison to other existing housing options in the current system of care for homeless families. For appropriate households, the Oxford House model offers promising potential to significantly increase the numbers of families rapidly re-housed.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served	34	70	70	70
Outcome	% of households that remain permanently housed six months after exit <sup>1</sup>	92.0%	90.0%	90.0%	90.0%

**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	2011	2011	2012	2012
Contracts	\$0	\$0	\$325,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$325,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$325,000</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**

\$325,000 - County General Fund

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

Because services have been funded for the past two years, mid fiscal year, with contingency funds, there is not an existing program offer number. Otherwise, there are no significant changes to this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Bridges to Housing (B2H) helps at least 70% of families served maintain their housing six months after exit, thus reducing their reliance on county services. B2H provides 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 B2H units 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 15 families at a time to move them into a B2H housing unit, prevent them from losing their housing, prevent the children from being removed into state custody, and help them obtain the services needed to achieve their goals.

County funds serve 139 B2H families currently in housing, leveraging: 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 from the Housing Authority of Portland; 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 children. 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 those services' efficiency and effectiveness.

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

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of high resource using homeless families served	80	80	80	80
Outcome	% of families served that remain in permanent housing 6 months after exit	92.0%	70.0%	70.0%	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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$467,516	\$0	\$467,516	\$0
Total GF/non-GF:	<b>\$467,516</b>	<b>\$0</b>	<b>\$467,516</b>	<b>\$0</b>
Program Total:	<b>\$467,516</b>		<b>\$467,516</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**

\$467,516 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25114A, Bridges to Housing  
 There are no significant changes to this program offer.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This offer makes the Bridges to Housing (B2H) program fully supported with ongoing funding. Ongoing county funds will provide the full package of B2H support services: intensive case management, permanently affordable housing, and childcare resources to a total 139 households currently enrolled.

This is the final anticipated request to build permanent, on-going funding for B2H following the initial, one-time-only investment of \$1 million dollars of County General Funds.

The total 139 B2H housing units 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% of families served 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 and ongoing 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 on an ongoing basis.

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

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of high resource using homeless families served	0	0	0	59
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**

<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	2011	2011	2012	2012
Contracts	\$0	\$0	\$480,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$480,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$480,000</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**

\$480,000 - County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25063

**Program Contact:** Mary Li

**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.

In FY 2010, HBR achieved a 72% success rate in gaining benefits for eligible individuals receiving services through the Multnomah Treatment Fund.

**Program Description**

Homeless Benefits Recovery (HBR) provides benefits eligibility determination, systems advocacy, and short-term case management to approximately 120 individuals annually who are served by the Multnomah Treatment Fund. The Multnomah Treatment Fund is a County General Fund 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 SSI/SSDI appeals process continues.

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 took an average of three months to secure benefits for enrolled clients which compares very favorably to the national average timeline of up to two years. At the start of services, HBR clients were earning an average of \$143 per month and at exit, they were earning \$705 per month. 86% of clients had no primary health care option at the start of services and are now covered through Medicaid.

During the year prior to services, HBR clients now receiving federal benefits used \$35,585 in mental health services from the Treatment Fund; were put on emergency holds for a total of 94 days, the equivalent of \$75,200; and had 23 instances of mobile outreach with Project Respond, the equivalent of \$1,360.

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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of chronic homeless individuals with disabilities served	77	120	120	120
Outcome	% of individuals served who receive benefit	74.0%	50.0%	72.0%	75.0%

**Performance Measure - Description**

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$401,265	\$0	\$401,265	\$0
Total GF/non-GF:	<b>\$401,265</b>	<b>\$0</b>	<b>\$401,265</b>	<b>\$0</b>
Program Total:	<b>\$401,265</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:** #25115, Homeless Benefit Recovery Project  
 There are no significant changes to this program offer.

**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 27,555 Multnomah County households annually.

The division also functions as the county's legislatively mandated Community Action Office.

**Program Description**

45% of Portland households pay more than 30% for housing (cost burdened). Workers with a full-time, minimum wage job cannot afford apartments of any size at fair market rate in the metro area without being cost burdened. County unemployment rates continue to stay in double digits. Twenty-five percent of county children under the age of 5 live in poverty, with children of color represented at three times the rate of Caucasian children.

This is the environment in which the Community Services Division conducts its work. Current need for services far outstrips available resources. The Division is called to provide innovative and strategic thinking, leadership, action, and investment in economic development related to human capital if the ability to exist and prosper as a community that cares for all its members is to be preserved.

Managing the work of 32.5 FTE, CSA effectively administers a package of direct services, contract services, and community initiatives representing more than \$29 million dollars investment of county, state, and federal funds.

As the county's Community Action Office, CSA provides leadership for cross-jurisdictional homelessness and housing, and anti-poverty/prosperity efforts, including Action for Prosperity, the 10 Year Plan to End Homelessness, the Greater Portland Indicator Project, and Oregon Thrives. CSA works to create prosperity for all county citizens through key partnerships and collaborations with local, regional, and statewide public, private and community stakeholders including consumer, business, faith, jurisdictional and other partners.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of staff attending at least 10 hours of skill bldg/pro development training <sup>1</sup>	0.0%	70.0%	81.0%	85.0%
Outcome	% of stakeholders expressing satisfaction with services received	51.0%	60.0%	55.0%	60.0%

**Performance Measure - Description**

<sup>1</sup> This was a new measure last year- so there are no data for the previous year.

**Legal/Contractual Obligation**

Federal Community Action Act, State Administrative rule, County Ordinance

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$653,867	\$0	\$756,004	\$0
Contracts	\$3,000	\$0	\$3,000	\$0
Materials & Supplies	\$24,359	\$0	\$19,547	\$0
Internal Services	\$128,346	\$0	\$89,652	\$0
Total GF/non-GF:	<b>\$809,572</b>	<b>\$0</b>	<b>\$868,203</b>	<b>\$0</b>
Program Total:	<b>\$809,572</b>		<b>\$868,203</b>	
Program FTE	6.50	0.00	7.50	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$868,203 - County General Fund

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

**Last year this program was:** #25118, Community Services Division Administration  
 Increased 1.0 FTE Research Evaluation Analyst Senior

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25121

**Program Contact:** Mary Li

**Program Characteristics:**

**Executive Summary**

Energy Services (ES) ensures that approximately 19,000 fixed and low-income households have financial assistance to help meet their energy costs, avoiding shut off and potential loss of housing.

Direct utility payments to approximately 19,000 households, along with energy education, case management, and other services 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.

**Program Description**

Energy bill payment assistance works through nine community agencies to make utility payments for fixed and low-income households. In FY 09-10 more than 70,000 households were income eligible for service; of those, 19,292 were served.

Services are delivered through the SUN Service System (SUNSS) Anti-Poverty System, a countywide integrated and coordinated system of care for schoolage youth and their families.

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

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% of total monthly expenses.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served <sup>1</sup>	19,292	18,000	10,000	10,000
Outcome	% of households w/shutoff notices served that avoid shutoff	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

<sup>1</sup> Fewer families were served last year than was estimated because of reductions in federal funding.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$658,410	\$0	\$371,296
Contracts	\$6,200	\$1,582,941	\$6,200	\$1,269,349
Materials & Supplies	\$35,475	\$9,999,831	\$14,183	\$8,143,479
Internal Services	\$290,310	\$562,846	\$69,897	\$497,988
<b>Total GF/non-GF:</b>	<b>\$331,985</b>	<b>\$12,804,028</b>	<b>\$90,280</b>	<b>\$10,282,112</b>
<b>Program Total:</b>	<b>\$13,136,013</b>		<b>\$10,372,392</b>	
Program FTE	0.00	7.03	0.00	5.03
<b>Program Revenues</b>				
Indirect for dep't Admin	\$358,485	\$0	\$243,098	\$0
Intergovernmental	\$0	\$12,804,028	\$0	\$10,282,112
<b>Total Revenue:</b>	<b>\$358,485</b>	<b>\$12,804,028</b>	<b>\$243,098</b>	<b>\$10,282,112</b>

**Explanation of Revenues**

\$6,382,227 - LIEAP Leverage Energy Grant: Based on current grant award  
 \$3,747,385 - OEAP-Energy Grant: Based on current grant award  
 \$152,500- PDX Water/Sewer: Based on FY11 revised budget  
 \$90,280 - County General Fund

**Significant Program Changes** **Significantly Changed****Last year this program was:** #25119, Energy Services

This program offer separates bill payment assistance services from weatherization services, previously combined in FY11 program offer 25119 Energy Services. Weatherization services have been moved to program offer 25121.

2 FTE Family Intervention Specialist positions are eliminated from this program offer due to lack of grant funds. Case management services will no longer be provided.



**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25119

**Program Contact:** Mary Li

**Program Characteristics:**

**Executive Summary**

Weatherization (WX) provides repair and replacement to approximately 1,000 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 (WX) repairs and replacements 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 09-10, more than 70,000 households were income eligible for service; of those, 1,040 were served.

Weatherization contributes 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% of total monthly expenses. DOE estimates WX households save an average \$274 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served <sup>1</sup>	0	0	1,000	750
Outcome	# of affordable housing units maintained for 10 years	1,040	600	750	500

**Performance Measure - Description**

<sup>1</sup> This measure is new.

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. Fluctuation in service levels reflects ARRA funding.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$988,459	\$0	\$884,526
Contracts	\$0	\$60,078	\$0	\$49,700
Materials & Supplies	\$0	\$5,524,220	\$101,258	\$3,232,316
Internal Services	\$0	\$369,148	\$50,149	\$762,495
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$6,941,905</b>	<b>\$151,407</b>	<b>\$4,929,037</b>
<b>Program Total:</b>	<b>\$6,941,905</b>		<b>\$5,080,444</b>	
Program FTE	0.00	13.43	0.00	10.97
<b>Program Revenues</b>				
Indirect for dep't Admin	\$176,426	\$0	\$105,751	\$0
Intergovernmental	\$0	\$6,541,905	\$0	\$4,529,037
Other / Miscellaneous	\$0	\$400,000	\$0	\$400,000
<b>Total Revenue:</b>	<b>\$176,426</b>	<b>\$6,941,905</b>	<b>\$105,751</b>	<b>\$4,929,037</b>

**Explanation of Revenues**

\$597,875 - LIEAP Weatherization: Based on current grant award  
 \$275,469 - DOE Weatherization: Based on current grant award  
 \$1,430,579 - ECHO Grant: Based on current grant award  
 \$2,200,114 - DOE American Reinvestment Recovery Act: Based on FY11 estimated carryover  
 \$25,000 - Energy Show Rebates: Based on current year income projections  
 \$400,000 County Weatherization Rebates: Based on FY11 revised budget  
 \$151,407 - County General Fund

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

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

This program offer separates weatherization services from bill payment assistance services, previously combined in FY11 program offer 25119 Energy Services.

2 FTE Weatherization Inspector positions and a .5 FTE Program Development Specialist, Senior position have been eliminated and lower expected service delivery levels have been projected due to decreasing ARRA funding. Stimulus funding ends March 2012.

**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, by Multnomah County's Local Public Safety Coordinating Council (LPSCC).

Approximately 600 young people and their families will be served. It is expected that 90% of youth served increase their academic achievement, and avoid or reduce subsequent juvenile justice system involvement.

**Program Description**

Youth Gang Prevention (YGP) will serve approximately 600 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; academic failure; and lack of social and economic opportunities.

In response to the LPSCC systems redesign, a procurement process was 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 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 specific population in relationship to gang involvement, youth violence and juvenile delinquency.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of youth served	550	600	600	600
Outcome	% of youth served who avoid/reduce juvenile justice system involvement	95.0%	90.0%	90.0%	90.0%

**Performance Measure - Description**

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$96,498	\$0	\$98,917	\$0
Contracts	\$1,170,663	\$51,923	\$1,170,663	\$0
Materials & Supplies	\$3,049	\$0	\$2,551	\$0
Internal Services	\$2,069	\$0	\$10,547	\$0
<b>Total GF/non-GF:</b>	<b>\$1,272,279</b>	<b>\$51,923</b>	<b>\$1,282,678</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,324,202</b>		<b>\$1,282,678</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$51,923	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$51,923</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$1,282,678 - County General Fund

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

There are no significant changes to this program offer.

**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 ongoing 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of children served	995	800	900	900
Outcome	% of parents expressing satisfaction with services received	100.0%	95.0%	100.0%	100.0%

**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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$28,673	\$28,110	\$28,673	\$28,110
<b>Total GF/non-GF:</b>	<b>\$28,673</b>	<b>\$28,110</b>	<b>\$28,673</b>	<b>\$28,110</b>
<b>Program Total:</b>	<b>\$56,783</b>		<b>\$56,783</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$28,110	\$0	\$28,110
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$28,110</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: Based on FY11 revised budget

\$28,673 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25127, Court Care

There are no significant changes to this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Housing Stabilization for Vulnerable Populations provides rent assistance, transitional housing, and homeless children's education to more than 887 homeless households with children a year.

These services help our most vulnerable homeless and marginally housed families with children maintain their housing and avoid homelessness; once homeless find homes and receive long-term support; and, keep children who are homeless in school and progressing, working with them on the path to self-sufficiency.

The County's Housing Team is also supported in this program offer.

**Program Description**

The unified Short Term Rent Assistance (STRA) System serves 634 households with rent assistance, mortgage payment, and emergency shelter vouchers annually. Approximately 97% of those placed in housing remain housed six months after exit.

Three facilities-based transition housing sites house approximately 64 households for up to two years.

Approximately 39 children living in homeless families receive alternative education and support services. 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 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. The county's Housing Team - representing all county departments and divisions - determines opportunities for collaboration or potential efficiencies across programs, and to share best practice, results and innovation.

Cross-jurisdictional work with the City of Portland, the City of Gresham, and the Housing Authority of Portland is also supported - especially with the 10 Year Plan to End Homelessness.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households receiving rent assistance or housing <sup>1</sup>	926	1,200	887	489
Outcome	% of households served that remain in permanent housing six months after exit	89.0%	90.0%	73.0%	80.0%

**Performance Measure - Description**

<sup>1</sup> This offer only includes a subset of services included in the offer last year, because of restructuring of program offers. Therefore, fewer households will be served through this offer next year.

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

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$352,331	\$52,932	\$380,188	\$45,165
Contracts	\$1,068,032	\$548,661	\$850,023	\$554,597
Materials & Supplies	\$12,196	\$0	\$10,205	\$0
Internal Services	\$71,179	\$24,968	\$42,188	\$27,515
<b>Total GF/non-GF:</b>	<b>\$1,503,738</b>	<b>\$626,561</b>	<b>\$1,282,604</b>	<b>\$627,277</b>
<b>Program Total:</b>	<b>\$2,130,299</b>		<b>\$1,909,881</b>	
Program FTE	3.46	0.54	3.54	0.46
<b>Program Revenues</b>				
Indirect for dep't Admin	\$15,897	\$0	\$13,640	\$0
Intergovernmental	\$0	\$626,561	\$0	\$627,277
<b>Total Revenue:</b>	<b>\$15,897</b>	<b>\$626,561</b>	<b>\$13,640</b>	<b>\$627,277</b>

**Explanation of Revenues**

\$278,736 HUD Home Safe: Based on FY11 revised budget  
 \$313,541 OHCSH HSP,LIRHF,SHAP,EHA: Based on FY11 revised budget  
 \$35,000 PDX General Fund: Based on current grant award  
 \$1,282,604 County General Fund

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

**Last year this program was:** #25133, Housing Stabilization for Vulnerable Populations

The following services have been removed from this program offer: interfaith initiative and winter shelter.

The Interfaith Initiative (1 FTE Program Development Specialist, Senior position), has been moved to program offer 25139A Anti-Poverty Services.

Winter Shelter (\$62,285) has been moved to program offer 25111A Homeless Families' Shelter and Emergency Services.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

East County Homeless Outreach provides on-going assessment of, and response to the outreach needs of homeless populations currently camping in East County cities. In collaboration with the Sheriff's Office, and other east county city police departments, \$75,000 of one-time-only funding was provided in FY 10-11 that leveraged existing outreach staffing capacity funded by the City of Portland and provided flexible rent assistance and other support services.

This program offer requests on-going funding for services. Approximately 60 individuals or households will be served annually.

**Program Description**

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. When these activities occur, there is no outreach mechanism available to assist individuals in mitigating the impact of these events.

Using the existing successful collaboration between law enforcement and homeless outreach providers in the City of Portland as the model, the program has created capacity for response to the outreach needs of the Sheriff and East County cities' law enforcement agencies during FY 10-11.

Initial data and narrative reports point to strong relationships having been built among homeless outreach providers and law enforcement, resulting in 10 households having been placed in permanent housing with rent assistance.

When law enforcement schedules 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.

In addition, Sheriff's deputies and outreach staff are able to collaborate when law enforcement comes across a homeless individual or family where there is concern for their well-being.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of homeless households contacted	0	60	60	60
Outcome	# of households placed in housing	0	20	15	12

**Performance Measure - Description**

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$75,000	\$0	\$75,000	\$0
Total GF/non-GF:	<b>\$75,000</b>	<b>\$0</b>	<b>\$75,000</b>	<b>\$0</b>
Program Total:	<b>\$75,000</b>		<b>\$75,000</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**

\$75,000 - OTO County General Fund

**Significant Program Changes**

**Last year this program was:** #25124, East County Homeless Outreach  
 There are no significant changes to this program offer.

**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**

This program offer requests funding for the Rose City Resource Guide, a pocket guide to health and human services in the metro area. Streetroots, in collaboration with 211info, publishes the guide annually. County departments - Health, the Sheriff, County Human Services, and Community Justice all distribute the guides to clients.

Funds will leverage City of Portland funding to ensure availability of guides for use by county staff and programs.

**Program Description**

The Rose City Resource Guide is recognized and used by homeless and low-income individuals across the metropolitan area. Streetroots, a small grassroots newspaper by, for, and about issues of concern to homeless and low-income people, produces the guide annually. The guide is made available at no cost to those using it.

County departments provide the guide to clients and members of the public entering county buildings and service sites. While many departments are dues-paying members of Streetroots, this contribution does not cover the cost of the guides being used by them.

This program offer leverages current investment by the City of Portland in order to pay for the County's use of the guides.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of guides produced	0	0	0	45,000
Outcome	% of guides distributed	0.0%	0.0%	0.0%	100.0%

**Performance Measure - Description**

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$20,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$20,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$20,000</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**

\$20,000 - County General Fund

**Significant Program Changes**

Last year this program was:

**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**

The Short-Term Rent Assistance System (STRA) provides rent assistance, limited mortgage assistance, and emergency motel vouchers to individual and family households at risk of or experiencing homelessness.

STRA is a collaboration among the county, the City of Portland, and the Housing Authority of Portland (HAP) as a key strategy of the 10 Year Plan to End Homelessness.

This program offer requests new county investment to match increased funding by HAP (\$500,000) and leverage continued funding from city general funds currently allocated out of ARRA funds (\$1 million).

Approximately 500 additional households will be served and expected to maintain a 97% rate of permanent housing six months after exit.

**Program Description**

Research shows that prevention of homelessness is a much more effective and efficient use of community resources than intervention once a household has entered homelessness. Local data reinforces this, with exceedingly high housing stability after six months achieved by households who have often accessed less than three months of assistance.

Through the 10 Year Plan to End Homelessness, the county, the City of Portland, and HAP have integrated the majority of each jurisdiction's rent assistance funding into a single system. The Short-Term Rent Assistance System, managed by HAP on behalf of all partners, executes and manages one contract per provider, and collects one set of data and seeks one set of outcomes - rather than the three or more that used to exist.

Access to services is maintained for both single and family households, as well as culturally specific services for racial/ethnic communities, domestic violence victims, homeless youth, and others.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served	0	0	0	500
Outcome	% of households served that remain in permanent housing six months after exit <sup>1</sup>	0.0%	0.0%	0.0%	80.0%

**Performance Measure - Description**

<sup>1</sup> The city-wide permanent housing rate is 80%, which is our 'next year offer' but our providers consistently report a much higher rate of 97% of households in permanent housing at six months after exit.

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	2011	2011	2012	2012
Contracts	\$0	\$0	\$500,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$500,000</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**

\$500,000 - 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**

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 of Oregon, 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; alcohol, tobacco and other drugs intervention and treatment; and, mental and other health services.

Housing, services, and support to teen parents - both homeless and not - are also provided.

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 HYS continues to move forward continued implementation of the Positive Youth Development Assertive Engagement model, evaluating the Logic Model, Fidelity Scale, and data collection metrics.

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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of homeless youth served	1,059	1,000	1,000	1,000
Outcome	% of youth served that remain in permanent housing six months after exit	76.0%	75.0%	75.0%	75.0%

**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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$121,170	\$456	\$82,102	\$59
Contracts	\$1,997,544	\$1,094,645	\$2,039,336	\$1,094,645
Materials & Supplies	\$4,054	\$0	\$2,695	\$0
Internal Services	\$19,395	\$8,947	\$14,027	\$9,344
<b>Total GF/non-GF:</b>	<b>\$2,142,163</b>	<b>\$1,104,048</b>	<b>\$2,138,160</b>	<b>\$1,104,048</b>
<b>Program Total:</b>	<b>\$3,246,211</b>		<b>\$3,242,208</b>	
Program FTE	1.33	0.00	0.83	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$5,697	\$0	\$4,596	\$0
Intergovernmental	\$0	\$1,104,048	\$0	\$1,104,048
<b>Total Revenue:</b>	<b>\$5,697</b>	<b>\$1,104,048</b>	<b>\$4,596</b>	<b>\$1,104,048</b>

**Explanation of Revenues**

\$200,578 - HUD Horizons/Pathways: Based on FY11 revised budget

\$903,470 - PDX General Fund: Based on FY11 revised budget

\$2,138,160 - County General Fund

**Significant Program Changes**Last year this program was: #25136A, Homeless Youth System



**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**

Native American 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 developmentally 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 09-10 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of families served	40	50	50	40
Outcome	% of children screened who are at appropriate developmental stage at exit	80.0%	80.0%	80.0%	0.0%

**Performance Measure - Description**

The number of families to be served will change in FY 11-12 due to reprogramming of funds to support two beds of in-patient treatment at 100% utilization for approximately six month length of stay.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$38,604	\$0	\$38,604	\$0
Total GF/non-GF:	<b>\$38,604</b>	<b>\$0</b>	<b>\$38,604</b>	<b>\$0</b>
Program Total:	<b>\$38,604</b>		<b>\$38,604</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**

\$38,604 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25137, Native American Child Development Services  
 There are no significant changes to this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Runaway Youth Services provide a 24/7 Reception Center, crisis line, shelter, support services, family counseling and reunification services, and gender-specific transitional housing services for approximately 2,255 youth ages 12-17 who have run away, or who are at risk of running away, as well as their families.

This program is a collaboration among DCHS, DCJ and DHS. About 90% 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 a 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 an 11-bed, co-ed group home with services focused on family reunification. Youth receive food, safety from the street, 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 involvement in the child welfare system increases.

Support Services/Case Management includes: intake; assessment; individual service plans targeting family reunification; alcohol, tobacco and other drugs and mental health counseling; and family mediation. Gender Specific Transitional Housing provides 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of youth and families receiving intervention & services	2,255	2,250	2,250	2,000
Outcome	% of youth served who return home or exit to other stable housing	92.0%	85.0%	85.0%	85.0%

**Performance Measure - Description**

Stable housing can include being in DHS custody which could include foster or group home placements, but most youth are reunited with family.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$16,405	\$0	\$16,815	\$0
Contracts	\$723,432	\$189,475	\$723,432	\$189,476
Materials & Supplies	\$518	\$0	\$435	\$0
Internal Services	\$3,699	\$0	\$1,792	\$0
<b>Total GF/non-GF:</b>	<b>\$744,054</b>	<b>\$189,475</b>	<b>\$742,474</b>	<b>\$189,476</b>
<b>Program Total:</b>	<b>\$933,529</b>		<b>\$931,950</b>	
Program FTE	0.17	0.00	0.17	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$189,475	\$0	\$189,476
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$189,475</b>	<b>\$0</b>	<b>\$189,476</b>

**Explanation of Revenues**

\$189,476 - OCCF Youth Investment: Based on OCCF estimated funding  
 \$742,474 - County General Fund

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

**Last year this program was:** #25138, Runaway Youth Services

\$204,000 of State funds supporting current service levels will be reduced by the Commission on Children, Families, and Community. If implemented, operation of the entire set of runaway services will be eliminated or severely reduced due to economies of scale associated with shelter operations.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

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

**Executive Summary**

This program offer requests backfill of current Commission on Children, Families, and Community (CCFC) funding in order to preserve existing runaway youth services. Services are provided to approximately 2,000 youth annually, including children fleeing commercial sexual exploitation. Loss of CCFC funds (\$204,000) will mean the elimination or severe reduction in current service levels due to economies of scale related to shelter operations.

**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 a 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 an 11-bed, co-ed group home with services focused on family reunification. Youth receive food, safety from the street, 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 involvement in the child welfare system increases.

Support Services/Case Management includes intake; assessment; individual service plans targeting family reunification; alcohol, tobacco and other drugs and mental health counselin; and family mediation. Gender Specific Transitional Housing provides 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of youth and families receiving intervention & services	0	0	0	2,000
Outcome	% of youth served who return home or exit to other stable housing	0.0%	0.0%	0.0%	85.0%

**Performance Measure - Description**

Stable housing can include being in DHS custody which could include foster or group home placements, but most youth are reunited with family.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$204,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$204,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$204,000</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**

\$204,000 - 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**

Anti-Poverty Services (APS) contribute to the county's anti-poverty/prosperity system of care designed to assist low-income households to gain the skills necessary to achieve self-sufficiency and future prosperity, as well as address the root causes of societal poverty.

Services delivered through the SUNSS Anti-Poverty System, afterschool tutoring for children living in public housing, youth employment support services, and the County's Interfaith Initiative are funded in this offer.

Approximately 1,000 households receive assistance ranging in both length of service – immediate, short, and long-term - and in intensity of service provided.

**Program Description**

Four core services - Basic Needs, Anti-Poverty Education and Support, Housing, and System Collaboration - are delivered as part of the SUNSS Anti-Poverty System, a countywide integrated and coordinated system of care for school-age youth and their families. Services assist households seeking help and provide them with or make connections to meet their needs as they relate to food, housing, employment, and school success. Working with community-based providers and other stakeholders, services 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. 1,020 households were served last year.

In FY 10-11, 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.

40 children and their families receive afterschool tutoring and support, resulting in approximately 80% increasing their attendance.

25 low-income youth receive flexible client assistance funds to support their search for employment.

The Interfaith Initiative will provide staffing and support to the Interfaith Council as well as small grants to faith communities seeking to partner with the county in the delivery of social services.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households to receive case management	1,020	950	761	500
Outcome	% of households served that remain housed six months after exit <sup>1</sup>	95.0%	85.0%	85.0%	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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$39,403	\$57,093	\$141,104	\$40,002
Contracts	\$507,973	\$2,705,628	\$507,973	\$2,397,184
Materials & Supplies	\$2,979	\$70	\$5,102	\$0
Internal Services	\$22,015	\$125,215	\$21,094	\$118,418
<b>Total GF/non-GF:</b>	<b>\$572,370</b>	<b>\$2,888,006</b>	<b>\$675,273</b>	<b>\$2,555,604</b>
<b>Program Total:</b>	<b>\$3,460,376</b>		<b>\$3,230,877</b>	
Program FTE	0.41	0.59	1.60	0.40
<b>Program Revenues</b>				
Indirect for dep't Admin	\$79,739	\$0	\$58,985	\$0
Intergovernmental	\$0	\$2,888,006	\$0	\$2,555,604
<b>Total Revenue:</b>	<b>\$79,739</b>	<b>\$2,888,006</b>	<b>\$58,985</b>	<b>\$2,555,604</b>

**Explanation of Revenues**

\$1,150,995 - HUD Family Futures: Based on FY11 revised budget  
 \$1,404,609 - OHCSDB - CSDB,HSP,EHA: Based on FY11 revised budget  
 \$675,273 - County General Fund

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

**Last year this program was:** #25139, Anti-Poverty Services  
 Funding for the Interfaith Initiative (1 FTE Program Development Specialist), was moved from FY 11 program offer 25133 Housing Stabilization for Vulnerable Populations into this program offer.



**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**

Action for Prosperity (AFP) is a proven program focused on low-income households who are ready and motivated to take action to increase their self-sufficiency and create future prosperity by participating in assertive engagement, training and employment, and housing stability services.

Utilizing ARRA funds, a partnership among Multnomah County, Work Systems, Inc., and Housing Authority of Portland was developed in FY 09-10. Due to the success of the collaboration, the effort to refocus existing anti-poverty funds into alignment with the AFP model has occurred. The Oregon Department of Human Services has been added into the partnership.

This program offer requests additional funding to serve 50 additional low-income households with the Action for Prosperity model. Funding leverages additional funding for housing and workforce development services.

**Program Description**

Based in anti-poverty services currently provided within the SUNSS Anti-Poverty System, each partner has committed funding to provide services within their core mission and to align that funding with the other partners to provide AFP services across jurisdictions and organizational lines.

Services include: Multnomah County – assertive engagement, flexible client assistance, support for employment liaison; Work Systems, Inc. – dedicated workforce development products, support for employment liaison; Housing Authority of Portland – dedicated rent assistance; and Oregon Department of Human Services flexible client assistance.

The AFP goals are: Targeted assistance for low-income households that places them on the path towards self-sufficiency and future prosperity; alignment of existing service systems to build a comprehensive system of care for that maximizes resources and ensures success; and households have the necessary skills and experience to become self-sufficient and move successfully towards prosperity.

In FY 10-11, 287 households were served. 87% of those served were unemployed and had an income at or below 125% of Federal Poverty Guidelines. 49% of those served exited to full or part-time employment within 12-18 months.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of households served	0	0	0	50
Outcome	% of households served that increase their income at exit	0.0%	0.0%	0.0%	75.0%

**Performance Measure - Description**

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$195,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$195,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$195,000</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**

\$195,000 - 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**

Community Development 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, 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) deeds county foreclosed properties to non-profit community development corporations for affordable housing development and 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of public works projects completed	2	2	2	2
Outcome	# of affordable housing units preserved	53	50	50	60
Outcome	# of affordable housing units created	0	3	3	3

**Performance Measure - Description**

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**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$116,919	\$43,703	\$54,494	\$45,043
Contracts	\$0	\$451,275	\$0	\$564,140
Materials & Supplies	\$4,633	\$0	\$2,551	\$0
Internal Services	\$35,332	\$17,038	\$10,547	\$15,698
<b>Total GF/non-GF:</b>	<b>\$156,884</b>	<b>\$512,016</b>	<b>\$67,592</b>	<b>\$624,881</b>
<b>Program Total:</b>	<b>\$668,900</b>		<b>\$692,473</b>	
Program FTE	1.17	0.37	0.55	0.45
<b>Program Revenues</b>				
Indirect for dep't Admin	\$10,848	\$0	\$7,722	\$0
Intergovernmental	\$0	\$386,767	\$0	\$580,881
Other / Miscellaneous	\$0	\$125,249	\$0	\$44,000
<b>Total Revenue:</b>	<b>\$10,848</b>	<b>\$512,016</b>	<b>\$7,722</b>	<b>\$624,881</b>

**Explanation of Revenues**

\$580,881 - Multnomah County HUD CDBG: Based on current grant award  
 \$44,000 - Loan Repays: Based on current year projected income  
 \$67,592 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25140, Housing

This program offer is renamed from FY11 program offer 25140 Housing. Otherwise, there are no significant changes to this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

211info connects Multnomah County residents with the community services they need. 211info's vision is to make the 211 phone number a trusted and necessary component of society and ensure that 211info's core of information is dynamic and comprehensive. In the last 12 months 211info received 67,000 calls from Multnomah County residents. During that time, 211info had the capacity to assist 48,910 residents, which is about 73% of those asking for assistance.

**Program Description**

211info is a robust information hub built upon a 25-year history of getting people the answers they need. The 211info database houses more than 4,500 community resources including details about agencies and services. In addition to responding to calls for service, 211 provides the opportunity for people to search for assistance online and provides outreach to potential callers letting them know about the 211 resource. 211info coordinates with specialized services such as Multnomah County Aging and Disability Services, Portland Women's Crisis Line, Oregon Partnership, City/County I&R and other specialized help lines to ensure callers reach the most appropriate service for their need and to eliminate duplication. Specific activities include:

- 1) Answer calls Monday—Friday, 8 am—6 pm for Multnomah County residents who dial 211 or 503.222.5555.
- 2) Follow up with 2% of callers to determine if the service was effective and to identify if needs were met.
- 3) Manage an accurate, updated and indexed resource database.
- 4) Provide public access to the database on the Internet.
- 5) Track requests for service, referrals, demographic information.
- 6) Produce reports reflecting requests for service.

211info helps Multnomah County residents by:

- Providing intervention and coordination of services that meet basic needs
- Ensuring care for vulnerable members of the community
- Assisting in obtaining permanent and livable housing
- Providing access to income and food to every member of our community

211 is a nationally proven, standards-driven method of connecting people with help. 211info is the only nationally accredited provider of information and referral in Oregon. By dialing 211, callers are connected with a live, trained call center specialist who will assess the caller's situation, provide an understanding of resource offerings that fit a full spectrum of needs and assist in the identification of available public and private alternatives. 211info helps people in precarious situations find a path towards meaningful solutions.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Low-income callers speak w/live I & R Specialist to discuss needs	50,000	50,000	48,910	50,000
Outcome	Low-income callers receive accurate information on community resources	75.0%	75.0%	96.0%	85.0%
Outcome	Low-income callers increase their knowledge of how to access services	75.0%	75.0%	94.0%	75.0%
Quality	Callers report satisfaction with 211	90.0%	90.0%	98.0%	90.0%

**Performance Measure - Description**

The indicators reflect similar measurements currently reported to the United Way of the Columbia-Willamette. In addition, they reflect requirements identified in the national Standards for Information & Referral Service. Meeting these requirements is mandatory for I&R organizations to attain national accreditation (211info was accredited in May 2006). The agency is undergoing reaccreditation in 2011 slated to be complete by the end of the fiscal year.

### Legal/Contractual Obligation

ORS 401.286 creates 2-1-1 as the official state dialing code for public referral to and information about health and human services and services after an emergency, and designates the state Office of Emergency Management as the managing agency.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$48,462	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$48,462</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$48,462</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

\$48,462 - County General Fund

### Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10010A, 211 Info

In Fiscal Year 2011 this program was budgeted in Multnomah County Commission on Children, Families and Community (CCFC), Program Offer # 10010A - 211 Info. The agency launched a new website and migrated data to a new software program.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Family Economic Security Project helps working families claim the Earned Income Tax Credit (EITC) and other available state/federal tax credits. We also work with employers to provide free tax preparation assistance and financial literacy at the workplace. This project will involve 50 local employers, provide direct tax preparation assistance to 1000 employees and secure \$1.26 million in federal and state tax benefits for low- and moderate-income families.

**Program Description**

The EITC provides tax benefits to low- and moderate-income workers with children and has been called the nation's largest anti-poverty program. This proposal gives direct assistance to employers to set up workplace EITC campaigns, which includes free tax assistance for employees, tax credit information, and financial education resources. Specific activities under this proposal include:

- (a) County staff and a contracted provider working with local employers to provide information and support for company sponsored EITC campaigns, informing their employees about the program and helping with enrollment.
- (b) Employees access free tax preparation services, thus avoiding costly fees for tax preparation and predatory "refund anticipation loans."
- (c) Employees receive financial education through materials and workplace education sessions.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of employers participating	40	50	50	50
Outcome	Participants whose yearly income is lifted above FPI	700	700	680	750
Efficiency	Dollars leveraged per county dollar ratio	12	12	23	20

**Performance Measure - Description**

Outcome information is based on current FES Project data on average refund per household.  
 Percentage increase is based on IRS figures for number of households who utilized free tax preparation sites in Multnomah County in 2008.  
 New leverage ratio based on FES Project actual performance data.  
 FPIG= Federal Poverty Income Guidelines

## Legal/Contractual Obligation

Multnomah County's 6-Year Plan to Improve Outcomes for Children & Families prioritizes increasing low and moderate income families' income as 1 of 2 critical goals for Multnomah County for the planning period 2008-2014.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$41,522	\$0
Materials & Supplies	\$0	\$0	\$12,717	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$54,239</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$54,239</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

\$54,239 - County General Fund; The program offer is funded through County General Fund and leverages federal and state revenue through the increases in tax returns received by low and moderate income Multnomah County residents. Research shows that low and moderate income families and individuals are more likely to spend their tax refunds so this offer represents a significant investment in economic development.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10011A, Family Economic Security

In Fiscal Year 2011 this program was budgeted in Multnomah County Commission on Children, Families and Community (CCFC), Program Offer # 10011A - Family Economic Security.



**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Administration

**Related Programs:** 25145A, 25147, 25151A, 25154, 25155, 25145B, 25151B

**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. The 18 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 Baltazar Ortiz Center. Programs operated through this division serve more than 82,000 people annually.

**Program Description**

SUNSS administration staff has responsibility for leadership, partnership development, direct staff supervision and program oversight for the SUN Service System Division. 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, and maintaining communication internally and with the SUN Service System and partner communities. Oversight for contract management functions 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 to funders 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of times school district and System partners meet to align and monitor service	23	16	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, High School Work Groups, and grant, policy and sustainability groups.

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$739,726	\$0	\$762,499	\$0
Contracts	\$49,880	\$0	\$49,880	\$0
Materials & Supplies	\$13,881	\$0	\$22,332	\$0
Internal Services	\$150,234	\$0	\$79,983	\$0
Total GF/non-GF:	<b>\$953,721</b>	<b>\$0</b>	<b>\$914,694</b>	<b>\$0</b>
Program Total:	<b>\$953,721</b>		<b>\$914,694</b>	
Program FTE	7.37	0.00	7.53	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$914,694 – County General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25143, 25147, 25149, 25151A, 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 43 county-supported full-service sites in this offer serve approximately 12,500 students, 74% of whom receive free or reduced lunch. 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 94% school attendance rate and 75% improved academic benchmark scores in reading and 77% in math. 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, 6 school districts, non-profits, the state and Multnomah County. The SUN partnership leverages significant contributions including an estimated \$2.7 million in cash from the city and districts, over \$5 million in supplemental services, and \$2.4 million in in-kind resources. In total, the partnership supports 60 total SUN CS sites countywide.

SUN Community Schools in this offer provide 12,500 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. 7,500 youth annually. SUN CS participants exceed outcome targets and overall perform better than state expectations. SUN CS serve the neediest children, targeting those living in poverty and performing below standards. 70% are racial/ethnic minorities, 26% are English Language Learners and 74% receive free or reduced lunch (compared to 45%, 15% and 52% respectively in school districts).

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of children ages 5-18 served <sup>1</sup>	12,231	9,200	9,200	9,200
Outcome	% who improve state test scores in Reading <sup>2</sup>	75.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended <sup>2</sup>	94.0%	92.0%	92.0%	92.0%
Outcome	% who improved classroom behavior <sup>2</sup>	54.0%	75.0%	75.0%	75.0%

**Performance Measure - Description**

<sup>1</sup> Outputs reflect the annual number served.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold; 7,537 children participated at this level last year. 92% attendance rate is considered Annual Yearly Progress as defined by No Child Left Behind.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$96,498	\$148,879	\$109,821	\$111,530
Contracts	\$2,827,651	\$417,093	\$3,045,435	\$300,460
Materials & Supplies	\$4,535	\$26,503	\$19,088	\$14,429
Internal Services	\$28,984	\$10,518	\$13,654	\$24,025
<b>Total GF/non-GF:</b>	<b>\$2,957,668</b>	<b>\$602,993</b>	<b>\$3,187,998</b>	<b>\$450,444</b>
<b>Program Total:</b>	<b>\$3,560,661</b>		<b>\$3,638,442</b>	
Program FTE	1.00	1.75	1.04	1.30
<b>Program Revenues</b>				
Indirect for dep't Admin	\$5,304	\$0	\$4,107	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$88,001
Intergovernmental	\$0	\$515,959	\$0	\$362,443
Other / Miscellaneous	\$0	\$87,034	\$0	\$0
<b>Total Revenue:</b>	<b>\$5,304</b>	<b>\$602,993</b>	<b>\$4,107</b>	<b>\$450,444</b>

## Explanation of Revenues

\$275,010 – City of PDX Parks & Rec: Based on FY11 revised budget  
 \$85,001 – Institute for Educational Leadership: Based on FY11 revised budget  
 \$4,100 – Gresham-Barlow School District: Based on FY11 revised budget  
 \$83,333 – Center for Disease Control (ARRA): Based on FY11 estimated carryover  
 \$3,000 – Misc Charges/Recoveries: Based on FY11 revised budget  
 \$130,000 - OTO County General Fund  
 \$3,057,998 – County General Fund

## Significant Program Changes

### Last year this program was:

Increases funding, to be leveraged with school district funds, for an additional 2 SUN sites in the Reynolds School District and 1 additional SUN site in the Gresham-Barlow School District.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

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

**Related Programs:** 25143, 25145A, 25147, 25149, 25151A, 25154, 25155

**Program Characteristics:** Measure 5 Education

**Executive Summary**

This program offer creates a SUN Community School (SUN CS) at David Douglas High School in Mid-Multnomah County. This Program Offer represents a partnered effort to fund this highest poverty High School in the County. The City is investing \$100,000 in this site, the County \$25,000 and the DDSD is contributing \$10,000.

SUN CS provide critical educational, social and health supports to students at risk of dropping out and their families. This program will serve 225 students and 50 adults intensively and touch thousands of other youth and family members. 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 94% school attendance rate and 75% improved academic benchmark scores in reading and 77% in math.

**Program Description**

The new SUN CS site will provide 225 youth and 50 adults with a comprehensive array of social and support services that allow students to come to school ready to learn and succeed academically, and foster families stability and success. Services are developmentally appropriate and operate year-round. 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.

David Douglas High School (DDHS) is the largest high school in Oregon, and the highest poverty high school in the County without a SUN Community School. Developing this CS site addresses an equity issue in distribution of SUN CS locations by increasing the # of sites located outside of Portland Public Schools, particularly in David Douglas School District which has the highest district free and reduced lunch rate in the county at 74%.

The SUN CS at DDHS will implement the SUN High School model, providing and aligning intensive youth case management, tutoring and credit retrieval (the last two funded through district contributions) with the array of services provided at all SUN CS sites. This core set of services was developed by experts from education, youth development, alternative education, workforce development and social service fields. Services are developmentally appropriate and follow best practices in high school completion. This offer supports the work of the former County/City Education Cabinet, which is focused on addressing the critical issue of high school drop out in our community. According to research conducted by Connected by 25, only 57% of young people in Multnomah County are graduating from high school on time.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of children ages 5-18 served <sup>1</sup>	0	0	0	225
Outcome	% of school days attended <sup>2</sup>	0.0%	0.0%	0.0%	92.0%
Outcome	Average # of credits earned by high school students <sup>2</sup>	0	0	0	6

**Performance Measure - Description**

<sup>1</sup> Outputs reflect the annual number served through SUNCS and part-time case management.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold 192% attendance rate is considered Annual Yearly Progress as defined by the federal No Child Left Behind Act.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$0	\$0	\$25,000	\$100,000
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$25,000</b>	<b>\$100,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$125,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$100,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>

## Explanation of Revenues

\$25,000 – County General Fund  
 \$100,000 - City of PDX Mayor's Office

## Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 25143, 25145A, 25147, 25149, 25151A, 25154, 25155  
**Program Characteristics:** Backfill State/Federal/Grant, Measure 5 Education

**Executive Summary**

This program offer ensures support to 3 of the county's most vulnerable neighborhoods by sustaining SUN Community Schools (SUN CS) that have expiring federal grants. The county investment (which represents 1/3 of the funding for these sites) leverages contributions from Portland Public Schools and other SUN partners.

SUN CS provide critical educational, social and health supports to students at risk of dropping out and their families. This program will serve 600 students and 150 adults intensively and touch thousands of other youth and family members. 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 94% school attendance rate and 75% improved academic benchmark scores in reading and 77% in math.

**Program Description**

These 3 SUN CS sites provide over 600 youth and 150 adults with a comprehensive array of social and support services that allow students to come to school ready to learn and succeed academically, and foster families stability and success. Services are developmentally appropriate and operate year-round. 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.

The 3 sites with expiring grants are Harrison Park, Boise Eliot and Vernon in Portland Public Schools. These 3 schools are all high on the SUN Poverty Index, with Harrison Park rating as the 2nd poorest school in the County. The County funding is about 1/3 of the total cost of these sites and leverages resources from other SUN CS partners.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of children ages 5-18 served <sup>1</sup>	0	0	0	600
Outcome	% who improve state test scores in Reading <sup>2</sup>	0.0%	0.0%	0.0%	75.0%
Outcome	% of school days attended <sup>2</sup>	0.0%	0.0%	0.0%	92.0%

**Performance Measure - Description**

<sup>1</sup> Outputs reflect the annual number served.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold. 92% attendance rate is considered Annual Yearly Progress as defined by No Child Left Behind.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$0	\$150,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$150,000</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**

\$150,000 - County General Fund

**Significant Program Changes**

Last year this program was:





## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$42,043	\$0	\$34,536	\$34,535
Contracts	\$144,000	\$0	\$85,857	\$21,912
Materials & Supplies	\$0	\$0	\$2,366	\$942
Internal Services	\$0	\$0	\$2,241	\$8,611
<b>Total GF/non-GF:</b>	<b>\$186,043</b>	<b>\$0</b>	<b>\$125,000</b>	<b>\$66,000</b>
<b>Program Total:</b>	<b>\$186,043</b>		<b>\$191,000</b>	
Program FTE	0.50	0.00	0.40	0.40
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$692	\$0
Other / Miscellaneous	\$0	\$0	\$0	\$66,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$692</b>	<b>\$66,000</b>

## Explanation of Revenues

\$43,000 – Private Donations: Based on FY11 revised budget  
 \$23,000 - Partners for a Hunger Free Oregon: Based on carryover estimate  
 \$125,000 – County General Fund

## Significant Program Changes

Last year this program was:



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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$96,498	\$0	\$98,917	\$0
Contracts	\$1,796,644	\$322,831	\$1,796,644	\$326,264
Materials & Supplies	\$2,221	\$0	\$2,992	\$0
Internal Services	\$19,693	\$0	\$12,171	\$0
Total GF/non-GF:	<b>\$1,915,056</b>	<b>\$322,831</b>	<b>\$1,910,724</b>	<b>\$326,264</b>
Program Total:	<b>\$2,237,887</b>		<b>\$2,236,988</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$322,831	\$0	\$326,264
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$322,831</b>	<b>\$0</b>	<b>\$326,264</b>

**Explanation of Revenues**

\$326,264 – Oregon Commission on Children, Families, and Community – Youth Investment: Based on FY11 revised budget  
 \$1,910,724 – County General Fund Subsidy

**Significant Program Changes**

Last year this program was:



## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$96,498	\$0	\$98,917	\$0
Contracts	\$1,182,782	\$152,353	\$1,182,782	\$147,961
Materials & Supplies	\$2,303	\$0	\$3,052	\$0
Internal Services	\$19,691	\$0	\$12,171	\$0
<b>Total GF/non-GF:</b>	<b>\$1,301,274</b>	<b>\$152,353</b>	<b>\$1,296,922</b>	<b>\$147,961</b>
<b>Program Total:</b>	<b>\$1,453,627</b>		<b>\$1,444,883</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$152,353	\$0	\$147,961
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$152,353</b>	<b>\$0</b>	<b>\$147,961</b>

## Explanation of Revenues

\$147,961 – Oregon Commission on Children, Families, and Community - Great Start: Based on FY11 revised budget  
 \$1,296,922 – County General Fund

## Significant Program Changes

Last year this program was:



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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$203,000	\$0	\$203,000	\$0
Total GF/non-GF:	<b>\$203,000</b>	<b>\$0</b>	<b>\$203,000</b>	<b>\$0</b>
Program Total:	<b>\$203,000</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

**Significant Program Changes**

Last year this program was:



**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Sexual Minority Youth Services (SMYS) program offers counseling, skill building and support services to over 800 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 over 800 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 92% of youth served re-enrolled or remained in school. In addition to the direct service impact, nearly 97% 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# youth served in Resource Center services	215	300	300	300
Outcome	% of youth participating in direct services remain or re-enroll in school	92.0%	60.0%	90.0%	90.0%
Output		0	0	0	0

**Performance Measure - Description**

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$106,940	\$0	\$106,940	\$0
Total GF/non-GF:	<b>\$106,940</b>	<b>\$0</b>	<b>\$106,940</b>	<b>\$0</b>
Program Total:	<b>\$106,940</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

**Significant Program Changes**

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**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, 2.8 FTE direct service staff serve Latinos throughout Multnomah County. In FY10 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 1,500 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 100 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, good physical and mental health. 2.0 FTE case managers and .8 FTE program development staff provide services on site, in families' homes, schools and other locations. The nutrition & food programs serve over 1,500 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 and 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 (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of households served by case management	109	77	100	100
Outcome	Number of families who received food to meet basic needs	1,568	1,655	1,796	1,825
Output		0	0	0	0

**Performance Measure - Description**

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$385,579	\$0	\$392,904	\$0
Materials & Supplies	\$16,395	\$0	\$22,337	\$0
Internal Services	\$81,002	\$0	\$46,247	\$0
Total GF/non-GF:	<b>\$482,976</b>	<b>\$0</b>	<b>\$461,488</b>	<b>\$0</b>
Program Total:	<b>\$482,976</b>		<b>\$461,488</b>	
Program FTE	3.80	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

\$461,488 – County General Fund

## Significant Program Changes

### Last year this program was:

Client contacts were reduced for 4 months due to partial then full absence of one case manager due to a physical injury.

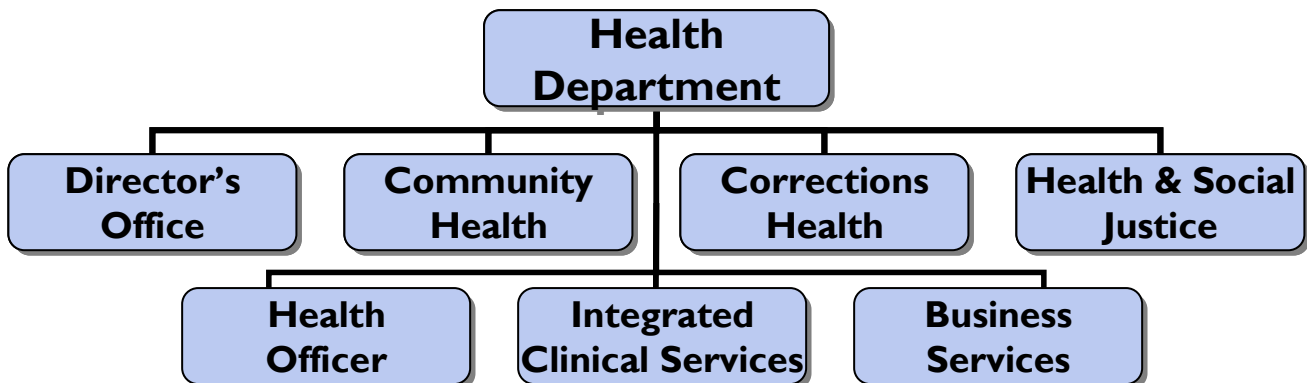
### Department Overview

The Multnomah County Health Department is guided by our vision of Healthy People in Healthy Communities. We seek to protect against threats to health, to ensure access to health care for Multnomah County residents, and to promote health. We do this by focusing our limited resources on creating policies that promote or protect the community's health; preventing the conditions that lead to illness and disease and by forming public and private partnerships to stretch our capacity to achieve our mission.

Our five-year strategic plan for FY's 2010-2014 establishes our priorities for the FY 2012. The plan contains three goals with specific strategies for the next few years, they are:

1. To ensure all individuals, families and communities gain greater control of the factors that influence their health.
2. To improve the health of our diverse communities.
3. Be an adaptive, learning organization that serves as an effective and accountable local public health authority and provider of community health services.

Our day-to-day activities and work is central to the Department achieving its mission. These strategic activities are those which reflect new or enhanced goals; they are direct, focused and prioritized over our every day work; and they lay a pathway for us to measure and account for our progress over time. This plan guides our work, our budget decision-making, funding priorities, and trade-offs. It not only shapes what we do but how we do it.



### Budget Overview

The FY 2012 budget for the Health Department is \$161.0 million with 1,004.94 FTE. Roughly one-third, or \$54.6 million, of the budget comes from the County General Fund with the remaining two-thirds or \$106.4 million, from federal and state revenue, Medicaid and other medical fee revenue, and emergency response and ambulance fees.

The FY 2012 budget has decreased 0.73%, or \$1.2 million, in total spending from the FY 2011 adopted budget with a 0.32%, or \$172,990 increase in General Fund spending. FTE have increased from 980.74 in FY 2011 to 1,004.94 in FY 2012, a 2.47% growth.

The \$1.4 million dollar decrease in other funds is due largely to expiring grants from the Federal American Recovery and Reinvestment Act (ARRA). These grants primarily funded capital improvement and one-time-only projects such as upgrades and process changes to the Westside Health Clinic (40021), and policy development and pass through payments to community partners in Community Wellness and Prevention (40047).

The Medical Examiner's Office (40052) has been moved from the District Attorney's Office to the Health Department in the FY 2012 budget. This move increased the Health Department's FTE by 9.00 and the General Fund by \$937,274. Previous year's budget totals for both the Health Department and the District Attorney's Office have been updated to reflect this change. A significant portion of the increase in FTE from FY 2011 to FY 2012 is found in the Integrated Clinical Services Division. For example, the Dental Services (40017) program in the newly opened Rockwood Health Clinic saw a 4.26 FTE increase due to increases in patient volume. In the Northeast Health Clinic (40020), there was a 7.53 FTE increase from the addition of a new provider team. Additional information on the changes in these programs, as well as changes in other programs, can be found in the individual program offers.

Budget Trends*	FY 2010	FY 2011	FY 2011	FY 2012	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	871.16	943.81	980.74	1,004.94	33.20
Personal Services	\$90,328,872	\$97,905,090	\$100,833,725	\$103,711,312	\$2,877,587
Contractual Services	16,423,765	15,766,300	19,960,498	16,797,111	(3,163,387)
Materials & Supplies	40,283,956	41,810,637	41,322,569	40,527,542	(795,027)
Capital Outlay	224,431	382,256	110,425	0	(110,425)
<b>Total Costs</b>	<b>\$147,261,024</b>	<b>\$155,864,284</b>	<b>\$162,227,217</b>	<b>\$161,035,965</b>	<b>(\$1,191,252)</b>

\*Does not include cash transfers, contingencies or unappropriated balances.

## Successes and Challenges

Our key success this year position us for continued success in 2012. We have supported our goals for a healthy community by focusing resources on high risk populations and allocating funds to support evidence based best practices. Chronic diseases are among the most prevalent, costly, and preventable of all health problems. Both our clinical delivery system and our public health community engagement and policy activities have prioritized and refocused activities into a more comprehensive approach to prevention work in the community and in individual encounters. We have evaluated our work processes in light of innovation, equity, quality and community involvement. We have begun to adopt Lean process improvement tools to eliminate duplication and non-value in our delivery systems and to assure transparency of results both to our employees and our clients. We have maintained and enhanced our role to conduct and disseminate assessments focused on population health in our county and designed to provide important information on understanding health status, recognizing emerging trends, identifying risk factors both personal and environmental to guide programs and policy decisions.

Challenges for the coming year can be summed up under the heading; designing a robust County structure to confront the changes in federal and state transformation efforts around financing and service delivery of medical care and public health. While we do not know exactly what the changes will be, we do know we will be expected to design and deliver our services and policies in a way that integrates and consolidates interventions to increase health impact, health outcomes, streamline programs and enhance accountability. We anticipate an influx of need for new services as more people are covered and inadequate reimbursement limits community providers beyond safety net services. We know there will be funding reductions for core public health services such as disease surveillance and investigation but do not know how to quantify that at this time.

We will need to continually evaluate our structure to determine are we as efficient as we need to be with the fiscal constraints and at the same time balancing our commitment to quality and effective public health practice.

### Diversity and Equity

Our departmental diversity and equity programs and activities contribute to countywide diversity and equity goals. Diversity and equity are threaded throughout our departmental values, strategic plan, and program practices and objectives. For example, our budgeting process includes several program pilots for applying an equity lens when making budgeting decisions. Our departmental values and strategic plan provides a framework and road map for our work. The explicit departmental values around diversity and equity pertain to both employees and the community we serve: 1) We honor the diversity of the individuals and communities we serve and value their differing approaches to health and well-being 2) We value a diverse staff and believe our staff should be selected with care, treated with respect, held accountable for their performance, and encouraged in their personal growth. Our strategic plan specifically addresses diversity in several objectives and explicitly in goal number two to improve the health of our diverse communities.

A primary focus on diversity and equity is also present in the work of the Diversity and Quality Team (DQT), Health Equity Initiative (HEI) and our Building Partnership Across Difference Initiative (BPAD). The core mission of the DQT is to monitor the progress of the department’s strategies for diversity, quality and equity. The group monitors, measures and makes recommendations regarding departmental policies, programs and initiatives and supports the development of an increasingly competent workforce. HEI’s mission is to eliminate the root causes of racial and ethnic inequities. BPAD, an employee-focused initiative, combines the disciplines of leadership development and diversity. It provides opportunities for employees to build diverse partnerships. It will help us to achieve our goal of reducing health disparities and propel us closer to our mission of “Healthy People in Healthy Communities.”

### Budget by Division

Division Name	FY 2012 General Fund	Other Funds	Total Division Cost	Total FTE
Director’s Office	\$2,334,377	\$0	\$2,334,377	14.80
Community Health	19,193,397	27,685,449	46,878,846	283.68
Corrections Health	12,476,304	129,760	12,606,064	83.60
Health and Social Justice	2,300,913	1,394,117	3,695,030	27.43
Health Officer	2,014,565	3,109,714	5,124,279	27.06
Integrated Clinical Services	8,129,592	74,118,169	82,247,761	514.54
Business Services	<u>8,149,608</u>	<u>0</u>	<u>8,149,608</u>	<u>53.83</u>
<b>Total Health Department</b>	<b>\$54,598,756</b>	<b>\$106,437,209</b>	<b>\$161,035,965</b>	<b>1,004.94</b>



### Director's Office

The Health Department Director and Director's Office is responsible for providing leadership committed to the Health Department's vision of Healthy People in a Healthy Community; its mission is to ensure, promote and protect the health of Multnomah County residents; and to set its strategic direction to fulfill its mission.

The Director's Office leads and is responsible for a Department of more than 900 employees with more than \$153 million in State, County and Federally funded programs and services. The Director is the primary liaison to federal, state, county and local elected officials, the Community Health Council and County department leadership.

The members of the Department Leadership Team report to the Health Department Director and are responsible for leading the six major Divisions in the Health Department: Business Services, Community Health Services, Corrections Health, Health and Social Justice, Integrated Clinical Services, and the office of the Tri-County Health Officer.

The leadership team is responsible for the provision of quality best practice services; strategic partnerships; leadership and direction for public health issues; assurance that financial commitments are met; continuous improvement of service delivery systems; public health emergency preparedness and maintenance of a diverse and qualified workforce with high job satisfaction. (program 40000)

### Significant Changes

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

In FY 2010 the Department made many structural changes to help leverage resources by focusing on prevention, equity and quality. To this end, many of the prevention, equity and quality efforts were merged together and the Office of Health and Social Justice was formed. This group is located in the Director's Office where it leads this work for all programs and services in the Department.

FY 2011 will begin with some key partnerships including joint efforts between Health Equity and Health Promotion; Health Assessment and planning and transportation; and Health Equity, Budget and Finance. Upstream health policy work has always been a key strategy for improving the health of the community. FY 2011 will mark a significant increase in policy work, health impact assessments, and upstream public health activity led by the Director's Office, and encompassing Health and Social Justice and Health and Wellness. The Office of Emergency Preparedness has moved under the Deputy Director which will ensure collaboration between Health Emergency Preparedness and the County-wide Emergency Management office. In FY 2011 we will strengthen coordination between the two entities using lessons learned from the H1N1 event. In addition, we will align the work of Health Emergency Preparedness with of Health Continuity of Operations Plans (COOP) also housed in the Director's Office.

### Community Health Services

Community Health Services (CHS) addresses public health issues through direct services, initiatives, policy interventions, and community partnerships. There are eight programs within CHS: 1) Communicable Disease Services targets our core local public health responsibility to limit the spread of communicable diseases through timely identification, investigation, and treatment of infectious disease. 2) The Community Wellness and Prevention Program forms community partnerships and implements policy strategies to create conditions where county residents can have better health and reduce the burden of chronic disease. 3) Early Childhood Services works to ensure that basic health and developmental needs of mothers, infants and young children are met through programs for high risk pregnant women and newborns. 4) The Women, Infants and Children (WIC) Program promotes breast feeding and provides supplemental nutrition to young families. 5) The Adolescent Health Promotion program helps youth delay sexual involvement and reduce participation in other risky activities while building healthy relationships. 6) Environmental Health Services protects the safety of our county by providing health inspections of licensed facilities, controlling vector-borne diseases, and assuring healthy indoor environments. 7) The STD/HIV/Hepatitis C Program addresses sexually transmitted disease and those living with the chronic illness associated with these infections. 8) The Infrastructure for Public Health Services Program provides core support services (epidemiology, data, communications, finance, quality improvement) to all CHS programs and public health partners.

### Significant Changes

Changes for FY 2012 focus on decreasing health disparities in children, an emphasis on policy and community partners, work with emerging partners (e.g. transportation, land use planning, etc.), and quality improvement. Although CHS experienced significant reductions and changes in grants and revenue streams, impacts to services were minimized by thoughtful development of program efficiencies and using alternate resources where possible.

Community Wellness and Prevention is increasing its focus on public policy and community action activities to improve community health with the help of a multi-million dollar CDC grant, "Communities Putting Prevention to Work." Prevention is the focus in building and maintaining healthy communities.

The WIC Program is developing on-line nutrition education to help reduce the number of visits women must make. A Breast Feeding Peer Counseling program is being developed. The goal of this program is to increase the rate of breast feeding initiation and duration. WIC is a hub for screening and referral into other services for women with infants and young children. Environmental Health Services conducted a community assessment and engagement process to identify the health impacts of substandard housing as a priority issue for low-income families. As a result of this finding, a housing community coalition was formed, grant funding was obtained, a housing ordinance in unincorporated Multnomah County was passed, and proven interventions were implemented.

### Corrections Health

The Corrections Health program meets mandated standards that assure access to care, safeguards the health of those who are in detention and controls the legal risk to the County. A wide variety of health care services are in place to meet the urgent needs of detained adults in the Multnomah County Detention Center (MCDC) and the Multnomah County Inverness Jail (MCIJ) and youth in the Donald E. Long Home.

From first entering the jail at booking until being released or transferred to another jail, prison or US Marshall custody; professionally trained health care personnel provide around-the-clock health evaluation, illness identification and treatment services for over 37,000 adults a year. Over 60% have serious, unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol/drug withdrawal and major mental /behavioral illnesses. Communicable disease screening and isolation are key to keeping employees, visitors and detainees safe. Stabilizing health conditions allows detainees to participate in their legal cases, which is their right as a citizen.

At the juvenile facility, licensed nursing staff provide services 16 hours a day, including screening, symptom evaluation and treatment for over 3,000 youth per year. More than 35% of the youth are receiving mental health treatment including medications. Health promotion and sexually transmitted disease (STD) treatment are a focus for the youth to improve their health and lower the rate of STD transmission once they return to the community. Healthy transition from jail to the community is a focus of our work.

### Significant Changes

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

In FY 2012 Corrections Health continues to focus on reducing costs, and improving efficiencies and quality.

- Clinical staff are on target to schedule National Commission on Correctional Health Care accreditation surveyors in FY 2012, a nationally recognized measure of quality health care delivery.
- A new contract for management services was completed in FY 2011 that lowers the cost of outside hospital and diagnostic services by managing outside appointments and monitoring claims.
- Corrections Health, County IT, and OCHIN are working on an agreement to schedule implementation of electronic health records to integrate Corrections Health MCHD primary care clinics.
- Corrections Health is collaborating with the Sheriff's office to make improvements that will improve suicide prevention in the the jails. Changes will be implemented in FY 2012.

### Health and Social Justice

The mission of the Office of Health and Social Justice (HSJ) is to increase departmental and community capacity to promote health, health equity and social justice. HSJ provides leadership in the use of health promotion and health equity tools and policies; designing, funding and implementing health programs; informing the community of the health status of Multnomah County residents and assuring accountability through program evaluation. HSJ addresses three broad areas of work: Health Assessment, Planning and Evaluation, Health Promotion and Community Capacity Building and Working toward Health Equity.

The combination of five HSJ program areas brings together expertise in health promotion, health equity and social justice, community health assessment, health impact assessment, policy analysis, fund and program development and program evaluation. Locating these programs together in the Director's Office allows for greater collaboration across disciplines and increases their ability to support and influence the organization across organizational boundaries.

### Significant Changes

Budget reductions for FY 2012 will be offset by sharing resources and increased collaborations among the HSJ programs. Increased collaborations began during FY 2011 and include coordination between the Community Capacitation Center and the Health Equity Initiative. These programs worked closely to develop the Equity and Empowerment lens (tool.)

The Health Equity Initiative, Health Promotion Change process and the quality initiatives led by Community Health Services have also worked closely to make improvements across the Department. Continued collaboration among these initiatives should increase their effectiveness in FY 2012.

### Health Officer

Oregon Revised Statutes (ORS) 431.418 require each local health department to employ or contract with a physician to serve as County Health Officer. The Office of the Health Officer provides physician consultation, technical direction and leadership to support public health activities and clinical services. The Health Officer is also responsible for these operating programs:

- Tri-County Health Officer (40002) provides public health physician consultation, technical direction, and leadership for Multnomah, Clackamas, and Washington counties. These activities focus on improving the consistency and quality of public health services in the Tri-County area.
- Emergency Medical Services (EMS) (40004) coordinates, regulates, and improves the quality of ambulance and other pre-hospital medical services for people experiencing a medical emergency, and provides physician medical direction to all EMS responders in the County.
- Public Health and Regional Health System Emergency Preparedness (40005) assure the Health Department and the community is prepared to manage the public health aspects of emergencies (e.g., disease investigation and mass vaccination), and that health care delivery providers in the six-county NW Oregon region are prepared to provide effective medical care in the face of emergencies with large and complex health impacts.
- Medical Examiner (40006) is responsible for establishing the cause and manner of death of county residents who die under special circumstances, notifying next of kin, and protecting the property of the deceased.

### Significant Changes

There were two significant operational changes that impacted Public Health and Regional Health System Emergency Preparedness (40005). Neither of these are anticipated to have a significant budgetary impact in FY 2012.

1. Work on a CDC grant creating a regional health system pandemic influenza plan was completed during FY 2011. This created local health care strategies and tools for coordinated provision of essential health care services during a severe influenza pandemic. One key aspect was developing a public/private decision-making group to ensure an equitable and effective health care response. This group and its procedures - the Health/Medical Multi-Agency Coordinating Group (MAC Group) - have been incorporated into County, NW Oregon Region 1, and hospital/health system response plans. Development of MAC Group capacities will continue in FY 2012.

2. The Office of Public Health Emergency Preparedness was moved under the Deputy Director to ensure collaboration between Health Emergency Preparedness and the County-wide Emergency Management Office. After the H1N1 event, the Deputy Director implemented a Quality Improvement (QI) Emergency Preparedness process. The new emergency preparedness model, implemented in FY 2012, will result in more effective public health emergency preparedness while using preparedness resources more efficiently.

In addition, the Health Officer assumes responsibility for the Medical Examiner's Office from the District Attorney's Office beginning in July 2011..

### Integrated Clinical Services

Integrated Clinical Services (ICS) provides quality health services for people who experience barriers to accessing health care. The culturally appropriate clinical services provided by ICS link physical and behavioral health and social services for the poor, uninsured and homeless populations. Services include dental and medical care, disease management for chronic illness, specialized care for HIV positive individuals, behavioral health, family planning, prenatal care, and preventive services such as well child health care. By integrating these personal health care services under one organization, ICS can provide clients continuity of care, improve quality, operational efficiencies, and maximize opportunities with grants and programs for special populations.

Clinical services are provided in seven primary care clinic sites, Rockwood Community Health Center, our newest site opened FY 2011. Five dental clinics provide much needed access to dental care for children and adults. Thirteen School Based Health clinics (SBHC's) provide primary care services to the kids and adolescents in the school and surrounding community. The newest SBHC, David Douglas High School, opened FY 2011.

Incremental improvements and quality initiatives like Building Better Care have resulted in growth in both the number of clients receiving care as well as the number of visits provided. In 2010, Primary Care, Dental, SBHC's and Early Childhood services served approximately 64,200 people in 290,000 encounters. In FY 2011 the Rockwood clinic alone will serve an additional 4,400 clients in the first year.

### Significant Changes

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

Last year brought opportunities in health care reform and expansion of access in the safety net and Community Health Centers that had been unheard of in the last 15 years. The federal stimulus package (ARRA) allowed our health centers to implement medical and dental expansions that increased medical access to many under served residents of Multnomah County, we successfully oversaw clinic improvements/updates during much of FY 2011.

Federal Health Care Reform (ACA) provides additional revenue opportunities for Health Centers, including broadening the number of people eligible for Medicaid coverage and resources to help implement and optimize the adopt the use of the Electronic Health Records. We will seek to take advantage of any funding that will increase our ability to integrate (through information technology) clinical services across the Health Department, so that we are better able to provide quality patient and family centered medical and dental services for the most vulnerable residents of our community.

Portland Public Schools (PPS) is scheduled to close Marshall High School in June 2011 and the School Based Health Clinic located at Marshall will close as well. ICS is working with PPS to relocate the clinic to Franklin High School and funds are included in the FY 2012 budget.

### Business Services

The Division of Business and Quality Services includes Workforce Development, Human Resources, and Training services for more than 1,200 full/part time permanent and temporary employees. The Budget, Accounting, Financial and Contracting services manage all financial activity for an \$159 million organization. They are liaisons for the Department with the Department of County Management, coordinating the provision of services such as IT, Facilities and Fleet services.

Workforce Development, Human Resources and Training is committed to meeting customer needs by providing guidance and consultation in the areas of administrative procedures, recruitment, employee/labor management issues, management competency, labor contract interpretation, and legal compliance. This is achieved by applying business best practices; being proactive and collaborative with key stakeholders, partners, and having reliable data and information to measure results and quality performance.

Business Services - Accounts Payable, Contracts and Purchasing Services and Support teams along with the Accounting, Financial, and Medical Billing teams, are responsible for providing all payments, grant accounting, budget development and monitoring, medical billing and client collection services for the Health Department. We strive to do this in a manner which supports and advances the strategic initiatives and mission of the Department and County.

### Significant Changes

The Business Services Accounting, Financial and Medical Billing services structure and staffing have not changed significantly for FY 2012. Human Resources and Training have a small increase in limited duration positions in response to an increased demand for staffing to support achieving departmental performance standards and meeting Public Health accreditation standards, which includes assuring a technically and culturally competent public health workforce.

Business and Quality is poised to quickly respond once State and Federal reform, Medicaid transformation and the Early Childhood system redesigns begin to take shape. These initiatives will have a significant impact on how we obtain compensation for our services, how we document and substantiate those services, our contractual relationships with other systems, and what type, classification and training the Department will need to staff the new model.

The Health Department in partnership with the Department of County Human Services are looking for ways to combine and streamline their Business and Human Resource operations with an eye towards efficiencies and service improvements. We stand ready to support the County's effort to transform administrative services and processes with the goal of maximizing the funding for community and client services.

# Health Department

fy2012 adopted budget

## Health Department

The following table shows the programs by division that make up the departments total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
<b>Director's Office</b>					
40000	Health Department Leadership Team	\$1,623,118	\$0	\$1,623,118	7.00
40003	Health Department Leadership Administrative Support	711,259	0	711,259	7.80
<b>Community Health</b>					
40007	Health Inspections & Education	3,218,536	0	3,218,536	26.35
40008	Vector-Borne Disease Prevention and Code Enforcement	1,318,307	12,000	1,330,307	10.65
40009	Vital Records		637,509	637,509	5.90
40010	Communicable Disease Prevention & Control	2,361,805	1,237,251	3,599,056	28.57
40011	STD/HIV/Hep C Community Prevention Program	2,583,124	1,659,601	4,242,725	27.85
40012	Services for Persons Living with HIV	212,936	6,397,595	6,610,531	26.65
40013A	Early Childhood Services for Pregnant/ Parenting Families - N/NE	2,501,345	2,541,603	5,042,948	33.95
40013B	Early Childhood Services-Pregnant/ Parenting Families-Mid/East/Healthy Start	3,387,053	4,390,632	7,777,685	42.40
40014	Immunizations	278,753	3,362,164	3,640,917	4.00
40015	Lead Poisoning Prevention	21,390	137,800	159,190	0.90
40018	Women, Infants and Children (WIC)	1,249,636	3,137,977	4,387,613	40.35
40025	Adolescent Health Promotion	322,170	23,059	345,229	3.06
40037A	Environmental Health Education Outreach & Housing	645,226	665,932	1,311,158	8.85
40047	Community Wellness and Prevention	459,751	3,482,326	3,942,077	19.90
40048	Community Epidemiology Services	633,365	0	633,365	4.30



# Health Department

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
<b>Corrections Health</b>					
40049	Corrections Health Juvenile Detention/ Admissions and Housing	710,358	129,760	840,118	5.60
40050A	Corrections Health MCDC Base Services and Booking Floor	3,240,921	0	3,240,921	23.70
40050B	Corrections Health MCDC Clinical Services and 4th Flr Housing	2,662,313	0	2,662,313	14.14
40050C	Corrections Health MCDC Housing Floor 5, 6, 7 & 8	1,348,571	0	1,348,571	10.40
40051A	Corrections Health MCIJ Base Services and Clinical Services	2,166,701	0	2,166,701	13.76
40051B	Corrections Health MCIJ General Housing Dorms 4 - 11	1,198,862	0	1,198,862	8.00
40051C	Corrections Health MCIJ Dorms 12-18 Including Infirmary	1,148,578	0	1,148,578	8.00
<b>Health and Social Justice</b>					
40035	Health Assessment, Planning and Evaluation	1,347,500	1,376,117	2,723,617	18.63
40038	Health Promotion & Community Capacity Building	619,100	18,000	637,100	5.80
40045	Health Equity Initiative (racial justice focus)	334,313	0	334,313	3.00
<b>Health Officer</b>					
40002	Tri-County Health Officer	294,409	347,518	641,927	2.90
40004	Ambulance Services (EMS)	0	1,791,852	1,791,852	5.20
40005	Public Health and Regional Health Systems Emergency	0	852,112	852,112	6.26
40030	Medical Directors (Physician, Nurse Practitioner and Nursing)	782,882	118,232	901,114	3.70
40052	Medical Examiner's Office	937,274	0	937,274	9.00
<b>Integrated Clinical Services</b>					
40016	Medicaid/Medicare Eligibility	372,295	1,297,867	1,670,162	18.00
40017	Dental Services	99,480	16,794,542	16,894,022	97.21
40019	North Portland Health Clinic	99,197	3,864,077	3,963,274	27.80
40020	Northeast Health Clinic	130,443	5,346,897	5,477,340	39.30
40021	Westside Health Clinic	297,571	5,216,423	5,513,994	35.50
40022	Mid County Health Clinic	178,326	9,963,204	10,141,530	70.50
40023	East County Health Clinic	107,578	8,225,365	8,332,943	57.40

# Health Department

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
40024	School Based Health Centers	1,747,970	3,330,268	5,078,238	34.98
40026	La Clinica de la Buena Salud	99,408	1,604,901	1,704,309	10.90
40029	Rockwood Health Clinic	0	3,160,125	3,160,125	23.30
40031	Pharmacy	432,553	13,207,000	13,639,553	42.75
40032	Lab, X-Ray and Medical Records	2,944,322	0	2,944,322	26.90
40033	Primary Care and Dental Access and Referral	1,043,831	115,000	1,158,831	11.00
40034	Quality Assurance	337,026	1,992,500	2,329,526	17.70
40036	Community Health Council and Civic Governance	239,592	0	239,592	1.30
<b>Business Services</b>					
40039	Business and Quality - Human Resources and Training	2,197,977	0	2,197,977	17.53
40040	Business and Quality - Accounting and Financial Services	2,997,011	0	2,997,011	24.30
40041	Business and Quality - Medical Billing	<u>2,954,620</u>	<u>0</u>	<u>2,954,620</u>	<u>12.00</u>
<b>Total Health Department</b>		<b>\$54,598,756</b>	<b>\$106,437,209</b>	<b>\$161,035,965</b>	<b>1,004.94</b>

**Lead Agency:** Health Department

**Program Contact:** SHIRLEY Lillian

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Members of the Health Department's Leadership Team are the Department Director, Deputy Director, the Health Officer, Directors of Business Services, Human Resources & Workforce Development, Health and Social Justice, Community Health Services, Public Health & Community Initiatives, Integrated Clinical Services, and the Director of Nursing Practice.

**Program Description**

DLT is responsible for systems-based integration of health services and operations to provide quality best practice services; strategic partnerships; leadership and direction for public health issues; assurance that financial commitments are met; continuous improvement of service delivery systems; public health emergency preparedness and maintenance of a diverse and qualified workforce with high job satisfaction. The Director's Office is responsible for leadership committed to the Health Department's mission, vision, values and strategic objectives and is the primary liaison to federal, state, county and local elected officials, the Community Health Council and County department leadership. The Health and Social Justice Director is responsible for partnerships which support health disparity reductions and creates links within community systems. The Director supervises programs that provide best practices and timely health information and education to County, communities, policy makers and citizens. The Community Health Services (CHS) Director supervises communicable and environmentally influenced disease programs and services for families with young children and Oregon Health Plan enrollment, and is responsible for partnerships with CDC, State, Conference of Local Health Officials, businesses and citizens. The Senior Advisor of Public Health and Community Initiatives oversees efforts related to developing, implementing, monitoring and maintaining policies that support outreach and delivery of culturally appropriate services, and coordinates with programs that work cross functionally to support the health prevention needs of all communities, and evaluates the quality of services and the impact of policy changes on community perception. The Integrated Clinical Services (ICS) Director is responsible for developing and maintaining strategic external (hospital systems, health insurance systems, state, and community) and internal partnerships; providing leadership for the efficient and cost-effective performance of a complex integrated clinical delivery system; and working with community, state and federal agencies to ensure access to high quality clinical care.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Increased access to Health Dept. services as measured by # of clients served.	170,716	165,003	174,130	177,613
Outcome	Annual Federal and State resources \$ leveraged for services.	97,800,000	100,000,000	106,000,000	105,000,000
Output	Number of "all staff" Dept communications (NFD, brown bags, media releases).	82	41	85	85

**Performance Measure - Description**

Our ability to serve increasing numbers of uninsured clients is dependent on the availability of general fund or grant revenue to cover the cost of their care.

NFD=notes from the Director

## Legal/Contractual Obligation

ORS 431.418 Local public health administrator (1) Each district board of health shall appoint a qualified public health administrator or supervise the activities of the district in accordance with law. (2) Each county governing body in a county that has created a county board of health under ORS 431.412 shall appoint a qualified public health administrator to supervise the activities of the county health department in accordance with law.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,171,015	\$0	\$1,138,510	\$0
Contracts	\$76,800	\$0	\$108,596	\$0
Materials & Supplies	\$194,327	\$0	\$232,637	\$0
Internal Services	\$160,303	\$0	\$143,375	\$0
Total GF/non-GF:	<b>\$1,602,445</b>	<b>\$0</b>	<b>\$1,623,118</b>	<b>\$0</b>
Program Total:	<b>\$1,602,445</b>		<b>\$1,623,118</b>	
Program FTE	7.00	0.00	7.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Health Department Leadership Team is funded with \$672,328 county general fund and \$950,790 county general fund indirect revenue.

## Significant Program Changes

Last year this program was: #40000, Health Department Leadership Team

**Lead Agency:** Health Department

**Program Contact:** Kristin Tehrani

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Office of the Tri-County Health Officer provides public health physician consultation, technical direction, and leadership to health department administrators, program staff and community partners. This cooperative effort of the metro-county health departments is intended to improve the consistency and quality of public health services in the three counties, increase learning and collaboration across the counties, and improve the quality, efficiency and effectiveness of health officer services.

**Program Description**

The Tri-County Health Officer Program (TCHO) provides medical consultation, technical counsel, and leadership by three public health physicians to Multnomah, Clackamas and Washington County Health Departments and their respective community partners. Historically, each of the three counties employed or contracted with an individual to serve as County Health Officer. Through IGA's with Clackamas and Washington county health departments, the TCHO is better able to provide high quality health officer services, and to utilize the departments' relatively small amount of public health physician resources effectively and efficiently. In Multnomah County for example, the TCHO: (1) participates in enforcement of public health laws; (2) supervises select public health programs; (3) works with department staff, other county agencies, and community groups to manage critical public health problems; and, (4) participates in department administration. The program supports Multnomah County Health Department's goals (i.e. goal #3) by providing effective and accountable local public health practice leadership and medical direction that result in quality clinical and health promotion programs. In the current fiscal year, through the joint efforts of the TCHO, health officer program staff were able to provide leadership on chronic disease prevention programs, address issues of communicable disease control, and advise county and department staff on individual case management for communicable diseases.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Contract deliverables are met by the end of fiscal year.	0.0%	85.0%	85.0%	85.0%
Outcome	County stakeholders express satisfaction in program delivery and results.	90.0%	90.0%	90.0%	90.0%

**Performance Measure - Description**

The TCHO program assures completion of agreed-upon deliverables. Contract deliverables for FY12 will be negotiated and finalized by July 1, 2011. These will provide guidance for work priorities and program activities.

Satisfaction of key customers with Health Officer services is a critical measure of program success. Survey of key stakeholders in Multnomah, Clackamas, and Washington Counties will be conducted in April 2011. Success will be judged by the percentage of survey scores that meet or exceed four (on a scale of 1-5).

## Legal/Contractual Obligation

ORS 431.418 requires counties to employ or contract with a physician to serve as County Health Officer. IGA's with Clackamas and Washington counties specify Health Officer services that Multnomah County is required to provide, as well as expected outcomes and evaluation measures.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$245,925	\$304,665	\$253,069	\$297,548
Contracts	\$3,000	\$0	\$3,500	\$0
Materials & Supplies	\$5,025	\$5,101	\$6,764	\$12,569
Internal Services	\$31,888	\$37,752	\$31,076	\$37,401
Total GF/non-GF:	<b>\$285,838</b>	<b>\$347,518</b>	<b>\$294,409</b>	<b>\$347,518</b>
Program Total:	<b>\$633,356</b>		<b>\$641,927</b>	
Program FTE	1.00	1.90	1.00	1.90
<b>Program Revenues</b>				
Indirect for dep't Admin	\$20,666	\$0	\$20,764	\$0
Intergovernmental	\$0	\$347,518	\$0	\$347,518
<b>Total Revenue:</b>	<b>\$20,666</b>	<b>\$347,518</b>	<b>\$20,764</b>	<b>\$347,518</b>

## Explanation of Revenues

Clackamas and Washington counties meet their ORS 431.418 requirements for health officer services through IGA's with Multnomah County. These IGA's are revenue agreements. Contractual revenues of \$347,518 cover the full cost to provide services to Clackamas and Washington counties. Multnomah County General Funds of \$294,409 cover the cost to provide services in Multnomah County.

## Significant Program Changes

Last year this program was: #40002, Tri-County Health Officer

**Lead Agency:** Health Department

**Program Contact:** SHIRLEY Lillian

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program pools administrative support to the Department's senior leadership team under one supervisor so staff and resources can be shared and responsive.

**Program Description**

By coordinating workloads and cross-training, this team reduces duplication of effort and increases effectiveness of administrative support to leaders and program staff. A single point of supervision and leadership provides consistent performance expectations and evaluations. Team members provide staffing, scheduling, meeting/event preparation, technical support, minutes and project support for the Department Director, Deputy Director, Director of Nursing Practice, Public Health and Community Initiatives Executive Advisor, Health Officer, Health and Social Justice Program Manager Senior, Community Health Services Program Manager Senior, Business Services Program Manager Senior and their managers. Team members provide general office services, such as copying, travel and training, time and attendance records (TARS) entry, supply ordering, mailings, mail distribution, telephone, computer programs, minutes, surveys, operation of the Department's main telephone lines and front office reception on the Director's floor. This program offer supports the Health Department's Leadership Team's ability to achieve accountability, to manage resources and service delivery costs effectively, to evaluate and streamline delivery of service and County operations, and to provide reliable information for decision making, improving and reporting results.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of projects completed on time with an error rate not to exceed 3%.	90.0%	90.0%	90.0%	90.0%
Outcome	Annual satisfaction rating by Department Leadership Team on scale of 1 to 10.	8	8	8	8

**Performance Measure - Description**

Survey of Department Leadership members conducted at end of fiscal year will meet or exceed 8 (on a scale of 1-10).

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$543,393	\$0	\$594,674	\$0
Contracts	\$2,916	\$0	\$10,146	\$0
Materials & Supplies	\$57,993	\$0	\$51,081	\$0
Internal Services	\$51,208	\$0	\$55,358	\$0
Total GF/non-GF:	<b>\$655,510</b>	<b>\$0</b>	<b>\$711,259</b>	<b>\$0</b>
Program Total:	<b>\$655,510</b>		<b>\$711,259</b>	
Program FTE	6.80	0.00	7.80	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Health Department Leadership Administrative Support is funded by \$294,618 county general fund and \$416,641 county general fund indirect revenue.

## Significant Program Changes

**Last year this program was:** #40003, Health Department Leadership Administrative Support

1.0 fte OA2 added to provide admin support to the Health Alert Network (HAN) and Emergency Preparedness Programs. HAN is Oregon's Health Alert Network Systems, a communication system available 24/7 for distribution of health alerts, advisories, dissemination of prevention guidelines, infection control guidance, coordination of disease investigation efforts, preparedness and response planning, laboratory response, and environmental/industrial public health response. HAN is also used extensively for routine, non-emergency collaboration within the public health system.



**Lead Agency:** Health Department

**Program Contact:** OXMAN Gary L

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Emergency Medical Services (EMS) plans, regulates, coordinates, and provides medical supervision and quality assurance for all pre-hospital emergency care provided by an exclusive ambulance contractor and the fire departments in the County.

**Program Description**

The EMS program has five major functions: 1) The emergency ambulance contract: Emergency ambulance service is provided through an exclusive franchise agreement with a single ambulance company. This is a performance contract; the EMS program administers the contract and assures that performance criteria are met. 2) Medical supervision: The EMS Medical Director supervises all pre-hospital medical care provided by paramedics, basic EMTs and first responders. Immediate medical advice for responders is provided via radio by OHSU under the supervision of the EMS Medical Director. 3) Continuous Quality Improvement (CQI): The EMS Program coordinates a system-wide data-driven approach to improving the quality of service provided by the EMS system. The program gathers, maintains, and analyzes data on patient care and outcomes necessary for the CQI process. Results are used for planning, and for improving EMS operations and the quality of pre-hospital patient care. 4) The EMS program regulates all emergency and non-emergency ambulance business in the county in accordance with the ambulance ordinance, MCC 21.400. This includes licensing, inspections, review of operations, and supervision of medical care. 5) Coordination of medical dispatch and medical first response: Dispatch is provided by the City of Portland. The fire departments of Portland and Gresham and districts throughout the County provide first response. EMS coordinates medical supervision, operating protocols, communications, major event planning, and equipment specifications. The EMS Program is a visible part of the public safety system and contributes to citizens feeling safe. The EMS Program ensures that an immediate medical response is available to all County residents and visitors experiencing a medical emergency. The program emphasizes coordination of services provided by multiple public and private agencies, and takes collaborative approaches to prepare for individual and community emergencies.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Ambulance response times - 8 min. 90% of calls	90.4%	90.0%	90.0%	90.0%
Outcome	Cardiac arrest survival to hospital	24.6%	30.0%	34.9%	35.0%
Quality	Cardiac arrest survival to hospital discharge	14.1%	12.0%	12.0%	12.0%

**Performance Measure - Description**

The major contract performance measure is the percentage of urban emergency calls in which the ambulance arrives on scene in 8:00 minutes or less. The method for computing this percentage has changed, potentially resulting in a figure of <90.0% even when the ambulance provider meets contract requirements.

System quality measures address medical outcomes of cardiac arrest. Cardiac arrest is an often-fatal cessation of the heartbeat that requires immediate medical intervention. Cardiac arrest survival until hospital arrival demonstrates how quickly and effectively EMS responds and stabilizes patients in the field. Cardiac arrest survival to hospital discharge shows how EMS contributes to the larger health care system. These medical outcomes are benchmarked against other communities with an eye towards improving results over time. Current year estimates of cardiac arrest survival are preliminary and pending receipt of hospital data.

## Legal/Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. It is the County's choice as to how much to invest to achieve this mandate.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$655,212	\$0	\$674,327
Contracts	\$0	\$693,000	\$0	\$693,875
Materials & Supplies	\$0	\$341,926	\$0	\$205,064
Internal Services	\$0	\$202,407	\$0	\$218,586
Total GF/non-GF:	\$0	\$1,892,545	\$0	\$1,791,852
Program Total:	\$1,892,545		\$1,791,852	
Program FTE	0.00	4.70	0.00	5.20
<b>Program Revenues</b>				
Indirect for dep't Admin	\$112,541	\$0	\$107,008	\$0
Fees, Permits & Charges	\$0	\$1,447,545	\$0	\$957,681
Intergovernmental	\$0	\$0	\$0	\$562,000
Other / Miscellaneous	\$0	\$445,000	\$0	\$272,171
<b>Total Revenue:</b>	<b>\$112,541</b>	<b>\$1,892,545</b>	<b>\$107,008</b>	<b>\$1,791,852</b>

## Explanation of Revenues

All costs of the program are recovered from licenses, fees and reimbursement for supplies and training for other jurisdictions. The fees are established and collected through revenue agreements with American Medical Response (AMR) and other jurisdictions in Multnomah County. The estimated beginning working capital funds system improvements for EMS providers.

Ambulance licenses: \$22,000

Franchise Fee: \$835,681

Supply and joint training reimbursements: \$662,000

Fines: \$90,000

Beginning working capital: \$182,171

## Significant Program Changes

**Last year this program was: #40004, Ambulance Services (EMS)**

Ambulance Services revenue decreased from FY2011 by \$100,693 primarily from reduced beginning working capital.

Supplies expenditures were reduced to offset the reduction in revenue and also to add a .50 FTE Clinical Services Specialist (social worker) to identify and reduce the incidence of 911 emergency calls by working with individuals who frequently call for non-emergency assistance and connect them with appropriate services.

**Lead Agency:** Health Department

**Program Contact:** OXMAN Gary L

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Preparing for and responding to emergencies with widespread or severe health impacts requires multi-agency, multi-jurisdictional, and public/private sector collaboration. Two Health Department programs contribute to this: 1) Public Health Preparedness assures that we can carry out the County's unique public health responsibilities in an emergency; 2) Regional Health System Emergency Preparedness assures that hospitals and other health care providers in the 6-county NW Oregon region have a proven capacity to care for victims of large scale emergencies. Both programs apply the National Incident Management System (NIMS) framework and coordinate with the County's Office of Emergency Management.

**Program Description**

Responding to emergencies with severe health impacts (e.g., natural disasters, severe epidemics/pandemics, terrorist attacks) requires coordinated action to 1) focus the response on priority needs, and 2) effectively leverage resources of government, private healthcare providers, and non-profit organizations. This offer assures public and private health preparedness. Public health preparedness includes: 1) emergency plans and protocols linked to the County's Emergency Response Plan; 2) a trained and exercised Health Department Incident Management Team; 3) exercises to test and refine plans and capacities, and 4) plans to increase capacity for key public health functions (e.g., epidemiology capacity to investigate, and analyze an emergency's health impacts). The Advanced Practice Center (APC) project continues to refine its national benchmarks for just-in-time staff training for mass prophylaxis and disease investigation operations and is focusing on the national marketing of those products. Regional Health System Emergency Preparedness facilitates healthcare delivery system preparedness in Multnomah, Clackamas, Washington, Columbia, Tillamook and Clatsop counties, and coordinates planning with SW Washington. It assures that hospitals, clinics, and other providers are prepared to respond in an effective and coordinated manner. The program 1) ensures that hospitals and other providers develop and exercise plans to increase the number of patients they can serve; 2) creates regional plans to coordinate public/private response; 3) develops regional capacities to address communication and other critical support needs; and 4) develops regional capacities to manage specific health impacts (e.g., pandemic influenza). The programs utilize coordination and collaboration to develop effective governmental and private sector health response capacities in the county and region.

This program offer relates to the Climate Action Plan items 17-1, 17-2, and 17-3 specifically as it relates to piloting a new CDC State PH-Hazard Vulnerability Assessment related to climate change, and as a key stakeholder in adaptation planning. Minimum resources are available for this participation.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of Incident Mgmt team members trained & annually exercised	40	90	90	90
Outcome	Score on Centers for Disease Control's technical assistance review	88.0%	90.0%	83.0%	90.0%
Outcome	Improved health emergency response.	100.0%	90.0%	100.0%	100.0%
Quality	Program satisfaction	100.0%	95.0%	100.0%	100.0%

**Performance Measure - Description**

- 1) Output: # of Incident Mgmt team members trained & annually exercised.
- 2) Outcome: Score on Centers for Disease Controls technical assistance review.
- 3) Outcome: Regional stakeholders expressing program has improved health emergency response abilities.
- 4) Quality: Regional stakeholders' satisfaction with program activities based on Likert scale.

## Legal/Contractual Obligation

ORS 431 and 433 empower the County and Health Department to supervise matters related to preserving the life and health of the people of the County. An IGA with the Oregon DHS (Public Health Division) specifies requirements for public health preparedness activities supported with federal CDC funds. A contract with the National Association of County and City Health Officials (NACCHO) specifies requirements for the APC project. A separate IGA with DHS guides regional health system preparedness goals and activities supported with federal US Dept. of Health and Human Services funds. Both sources of Federal funds are dedicated to emergency preparedness, and cannot supplant other funding or be used to build general public health capacities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$623,250	\$0	\$651,359
Contracts	\$0	\$15,750	\$0	\$5,500
Materials & Supplies	\$0	\$51,753	\$0	\$37,209
Internal Services	\$0	\$145,115	\$0	\$158,044
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$835,868</b>	<b>\$0</b>	<b>\$852,112</b>
<b>Program Total:</b>	<b>\$835,868</b>		<b>\$852,112</b>	
Program FTE	0.00	5.20	0.00	6.26
<b>Program Revenues</b>				
Indirect for dep't Admin	\$49,705	\$0	\$51,025	\$0
Intergovernmental	\$0	\$835,868	\$0	\$852,112
<b>Total Revenue:</b>	<b>\$49,705</b>	<b>\$835,868</b>	<b>\$51,025</b>	<b>\$852,112</b>

## Explanation of Revenues

Public Health Emergency Preparedness is supported by Federal Centers for Disease Control (CDC) funds received via Oregon DHS. Additional funds from the CDC are passed through to Multnomah County from NACCHO to support the APC project. Regional Health System Emergency Preparedness is funded by the US Dept. of Health and Human Services via the Oregon DHS and the Oregon Association of Hospitals and Health Systems.

State Public Health Emergency Preparedness: 338,000  
 NACCHO Medical Reserve Corp and Advance Practice Center: \$125,000  
 State Health Preparedness \$389,112

## Significant Program Changes

**Last year this program was:** #40005, Public Health and Regional Health Systems Emergency Preparedness  
 The NACCHO APC project grant is \$405k for federal FY11; funding beyond October 2011 is uncertain. FY2012 adds 1.06 FTE with funds budgeted in FY2011 as temporary along with reductions in professional services, and materials and supplies. The additional staff is funded and supports the work APC project.

**Lead Agency:** Health Department

**Program Contact:** WICKHAM Lila A

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This fee supported program reduces risk to County residents and visitors from disease and injury by investigating food and waterborne diseases, educating the public about food safety, and performing routine inspections of licensed facilities (restaurants, swimming pools, hotels, child care centers, adult foster care, correctional facilities and small public drinking water systems). Participating in an FDA Food Standardization assessment will help us align our program with national standards for critical food safety issues. The inspection program received an outstanding rating during its 2008 Triennial review.

**Program Description**

**Inspected Facilities:** The Health Inspections program is responsible for assuring the health and safety in 4,004 facilities including restaurants, mobile restaurants, hotel/motels, RV parks, organizational camps, warehouses, commissaries, vending machines, and jails. Most facilities receive more than one inspection per year. **Swimming pools & spas:** The program inspects and licenses 566 pools/spas to ensure pools are safe from hazards and disease. Field and classroom technical training is provided to pool operators (i.e. the recently adopted Virginia Graeme Baker Pool and Spa Safety Act will require increased education with pool and spa operators to facilitate compliance). **Schools, Child and Adult Foster Care Facilities:** The program inspects 507 schools, childcare centers, and other service providers to ensure they handle food properly, are clean and are free of health and safety hazards. **Drinking Water Systems:** Inspected to ensure they are properly maintained and meet EPA water quality standards. **Food Borne Illness Outbreaks:** Registered Environmental Health Specialists respond to and investigate local food borne illness complaints in collaboration with the Communicable Disease Program and are key participants in emergency response. **Food Defense Tool Kits** that will assist restaurants in preventing and responding to intentional food contamination continue to be distributed. Multnomah County has significantly less food borne illness outbreaks than other counties. **Food Handler Training and Certification:** Multi-lingual training about safe food preparation in 7 languages is provided online and in person to food workers at all literacy levels to support health equity and entry into the workforce. Emergency contact information has been gathered for over 7,000 facilities. A monthly newsletter is electronically distributed to food operators.

This legally mandated program protects the health and safety of the entire community by providing education, assuring safe food and water, controlling disease, improving safety in the work place and reducing unintentional injuries as well as supporting other public health activities by incorporating prevention activities into the inspection process. The citizenry understands and expects the program functions.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of licenses issue	6,877	6,464	7,149	6,858
Outcome	Critical violations per year	6,678	5,589	6,054	6,275
Output	Facility inspections	13,551	13,874	15,168	14,310
Output	Total number certified Food Workers eligible for employment	13,404	14,490	14,115	15,401

**Performance Measure - Description**

**Output:** Licenses issued excludes facilities inspected but not licensed (ie. schools, day care centers, etc.) New measure designed to evaluate trends in facilities licensed annually. Licenses directly reflect program workload.

**Outcome:** Critical violations are items noted during inspections that can directly affect the health and well being of the consumer, leading to elevated food safety risk and requiring immediate correction.

**Output:** Facilities (e.g. restaurants, mobile units, vending machines, temporary event units, schools, child-care facilities, tourist accommodations, surveillances) inspected on-site.

**Output:** This number reflects the number of people who completed certification in the given year. The certificate is a three-year certificate and makes food workers employable in the food industry. On-line and on-site Food Handler training and testing provides food workers with knowledge about preventing disease transmission to food consumers. Decrease in Food Handlers certified is primarily a result of the economic downturn, and are expected to recover.

## Legal/Contractual Obligation

Legal mandates are 1999 FDA Food Code 2002 OR Food Sanitation Rules; ORS Chapt. 30.890 (gleaning); ORS Chapt. 624; ORS Chapt. 448; MCC 21.612 (license fees); MCC Chapt. 5; MCC Chapt. 21 (Civil Penalty Ordinance); OR Dept. of Education Division 51 (Schools); OARS 581-051-0305; OARS Chapt. 333 (Licensed Programs); ORS 183 (Civil Penalty), ORS 164 (Food); ORS 700 (EHS License); ORS 414 (Childcare). OARS 333-018 Communicable Disease and Reporting 333-019 Communicable Disease Control.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$2,329,037	\$0	\$2,464,175	\$0
Contracts	\$279,588	\$0	\$217,482	\$0
Materials & Supplies	\$81,913	\$0	\$105,075	\$0
Internal Services	\$495,859	\$0	\$431,804	\$0
Total GF/non-GF:	<b>\$3,186,397</b>	<b>\$0</b>	<b>\$3,218,536</b>	<b>\$0</b>
Program Total:	<b>\$3,186,397</b>		<b>\$3,218,536</b>	
Program FTE	25.67	0.00	26.35	0.00
Program Revenues				
Fees, Permits & Charges	\$3,090,081	\$0	\$3,114,786	\$0
Total Revenue:	<b>\$3,090,081</b>	<b>\$0</b>	<b>\$3,114,786</b>	<b>\$0</b>

## Explanation of Revenues

The Health Inspections & Education program is entirely funded by inspection fees set by ordinance in Chapter 21 MC Ordinance 08-140. The fees for services provided to the public shall be based generally on the cost of providing the services.

Inspection Fees: \$3,218,536

## Significant Program Changes

**Last year this program was:** #40007, Health Inspections & Education

FDA 2009 Food Code projected to be implemented January 1, 2012.

This significant rule changes may impact number of 'Critical Violations' outcome.

**Lead Agency:** Health Department

**Program Contact:** WIRTH Chris M

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Program protects the public from emerging and imminent vector-borne diseases and reduces the social/economic impact of uncontained outbreaks. Vector-borne diseases are transmitted from animal to humans. The major emerging diseases are vector borne (WNV, avian influenza, SARS). Current analysis of evidence shows that environmental indicators such as dead birds predict the prevalence of human cases of West Nile virus in a community. Although no positive cases of WNV occurred in Multnomah County in 2010, climate changes in the NW, such as warming winter temperatures, increase in rainfall, and urban landscape management will increase the risk of vector-borne diseases. Intervention strategies include surveillance, analysis, proactive control/abatement of rodent and mosquito populations and public education. Program includes enforcement of nuisance codes. The program solicits input from a Commissioner-appointed Citizen Advisory Committee.

**Program Description**

**Objectives:** Collection and identification of mosquitoes, birds and rats. Monitor for and respond to emerging vector borne disease such as H1N1 and West Nile Virus. Perform laboratory analysis on rats and mosquitoes to determine which species carry disease, their preferred habitats and population size. Abate and or suppress mosquitoes that carry West Nile Virus with pesticides with the least impact, reduce the population by water control and vegetation management to reduce breeding habitat. Educate the average citizen and vulnerable people about preventing vectors and their habitat through community meetings, pamphlets and the media. **COMPONENTS:** Mosquito Control – majority of funds/staffing. Rodent Control - primary service provider for rodent control countywide. Nuisance Code Enforcement – addresses public health code violations, esp. restaurant enforcement, dumping and harboring unspecified animals (e.g., bees, livestock, and birds). Multnomah County (MC) climate supports an ideal mosquito and rat habitat. International airport and shipping along with migratory bird flyways provide avenues for new diseases to enter the community. Mosquito control began in MC in the 1930's when malaria was endemic. Although no WNV cases occurred in MC in 2010, two counties in Oregon reported three cases of infected mosquitoes. It is necessary to maintain current levels of surveillance and control to ensure early prevention and suppression of this disease using World Health Organization and Center for Disease Control best practices. Rodent control is critical to public health. Rodents can spread Hantavirus, plague and other diseases and can affect livability. A current survey in the MC rat population is showing Toxoplasmosis (Cat Box Fever) in 6% of the rat population. Vector control protects the community by serving all populations, while focusing on the vulnerable (i.e. elderly, children, homeless). The citizenry understands and expects these program functions.

This program offer supports the climate action plan for work done in surveying mosquito populations for emerging vector-borne diseases that are related to changes in our climate. Vector Control is able to minimally support adaptation assessment and planning as a key stakeholder. Action items: 17-1, 17-2, 17-3.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of acres treated for mosquitoes	4,216	3,500	4,000	4,000
Outcome	Mosquitoes prevented (In millions)	2,108	1,750	2,000	2,000
Efficiency	Number of acres treated for mosquitoes per FTE	843	700	800	800
Output	Number of rodent inspections conducted	914	905	925	925

**Performance Measure - Description**

**Output:** Total acreage where mosquito suppression activities occurred and is subject to variance in weather patterns, seasonal flooding, characteristics, presence/absence of disease.

**Outcome:** Based on industry standard estimate methodology: 500,000 mosquitoes per surface acre of water X number of acres treated estimates mosquitoes prevented (to nearest whole number).

**Efficiency:** Total acreage treated per one FTE.

**Output:** On-site inspections stemming from rodent complaints (i.e. rat in toilet received. Measures were refined to reflect industry standards.

## Legal/Contractual Obligation

Legal mandates are ORS 167, 452, 498, 506, and 634; OAR 635 and 603; 1968 Agreement City of Portland and Multnomah County – Title 13 and Title 8; 7 contractual mandates include grants, contracts, Federal, regional and local mandates.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$912,590	\$0	\$945,832	\$0
Contracts	\$73,150	\$0	\$66,350	\$0
Materials & Supplies	\$86,663	\$11,097	\$112,712	\$11,004
Internal Services	\$189,035	\$903	\$193,413	\$996
<b>Total GF/non-GF:</b>	<b>\$1,261,438</b>	<b>\$12,000</b>	<b>\$1,318,307</b>	<b>\$12,000</b>
<b>Program Total:</b>	<b>\$1,273,438</b>		<b>\$1,330,307</b>	
Program FTE	10.65	0.00	10.65	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$714	\$0	\$717	\$0
Fees, Permits & Charges	\$2,500	\$0	\$500	\$0
Intergovernmental	\$236,666	\$12,000	\$235,166	\$12,000
Other / Miscellaneous	\$1,000	\$0	\$1,000	\$0
<b>Total Revenue:</b>	<b>\$240,880</b>	<b>\$12,000</b>	<b>\$237,383</b>	<b>\$12,000</b>

## Explanation of Revenues

Vector-borne Disease Prevention and Code Enforcement is funded by county general fund and with revenue from intergovernmental agreements with City of Portland and other local and state jurisdictions that is recognized in the general fund. The program also receives a federal grant through the state of Oregon for West Nile Virus.

County General Fund: \$1,081,641

City of Portland Bureau of Environmental Services: \$224,000

Oregon Zoo: \$5,000

Oregon Department of Transportation: \$2,500

City of Durham: \$2,166

City of Maywood Park: \$1,500

Fees from fines and permits: \$1,500

West Nile Virus federal grant: \$ 12,000

## Significant Program Changes

**Last year this program was:** #40008, Vector-borne Disease Prevention and Code Enforcement



**Lead Agency:** Health Department

**Program Contact:** WICKHAM Lila A

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Vital Records is a legislatively mandated, fee supported program that produces birth and death certificates in accordance with federal and state statutes to maintain the integrity and accuracy of birth and death information. The information is analyzed to provide essential public health information that is used to plan prevention and intervention activities for positive health outcomes. An example of an analytical function of vital records is the ability to identify high risk groups for influenza and pneumonia deaths so that scarce resources (influenza vaccine) can be provided to the people at greatest risk of death resulting in fewer deaths. The program received high marks on a state triennial evaluation which assesses the quality and accountability of the program.

**Program Description**

**Birth and Death Certification:** Multnomah County is responsible for issuing birth and death certificates within the first six months after the birth or death, and within 24-hours of receipt of a request for certificate. Death certificates can be issued to family members, legal representatives, governmental agencies, or to the person or agency with personal or property rights. Birth records can be released to immediate family including grandparents, parents, brothers/sisters, legal representatives or governmental agencies. Employees working in this program must be registered with the state to assure competency. An electronic birth and death data certification model was implemented requiring a significant increase in individual education with community partners.

The Vital Records Program provides reliable information for decision-making in public health. Populations at risk for poor health outcomes are identified for the provision of proactive interventions. For example: Pregnant women were identified as being at great risk for death from H1N1 influenza by reviewing hospitalization data and death certificates. As a result physicians and clinical services providing care to pregnant women were prioritized for receipt of vaccine averting deaths in this high risk population. Vital Records assures accurate, timely and confidential registration of birth and death events minimizing the opportunity for identity theft and assuring accurate record of cause of death and the identification of parents of the born child.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of birth and death certificates issued	40,097	38,949	38,791	41,095
Outcome		0	0	0	0
Efficiency	Average number of days to issue error free certificate	1	1	1	1

**Performance Measure - Description**

- 1) Certificates issued: Measures program volume.
- 2) Days to issue: Measures rapidity of issuance process. The 24-hour timeframe from receipt to issuance is mandatory.

## Legal/Contractual Obligation

Legal mandates are ORS 97, 146, 432; OAR 830 and 333.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$509,025	\$0	\$495,071
Contracts	\$0	\$9,890	\$0	\$16,478
Materials & Supplies	\$65	\$16,419	\$0	\$23,977
Internal Services	\$0	\$109,417	\$0	\$101,983
<b>Total GF/non-GF:</b>	<b>\$65</b>	<b>\$644,751</b>	<b>\$0</b>	<b>\$637,509</b>
<b>Program Total:</b>	<b>\$644,816</b>		<b>\$637,509</b>	
Program FTE	0.00	6.10	0.00	5.90
<b>Program Revenues</b>				
Indirect for dep't Admin	\$38,340	\$0	\$38,175	\$0
Fees, Permits & Charges	\$0	\$644,751	\$0	\$637,509
<b>Total Revenue:</b>	<b>\$38,340</b>	<b>\$644,751</b>	<b>\$38,175</b>	<b>\$637,509</b>

## Explanation of Revenues

This is a fee driven, self-sustaining program. Despite the weakened economy, revenue appears to be stable. Per ORS 432.146, fees for records are established by the Oregon Health Authority, subject to the review of the Oregon Department of Administrative Services, and authorized by the Legislative Assembly. Fees (for both birth and death certificates) are \$20 for the first certificate ordered and \$15 for additional copies ordered at the same time (OAR 333-011-0106). Fees were last increased in 2003.

Licenses & Fees: \$637,509

## Significant Program Changes

Last year this program was: #40009, Vital Records

**Lead Agency:** Health Department

**Program Contact:** Amy Sullivan

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Communicable Disease Services (CDS) protects the health of our community by responding to reportable communicable diseases with prompt disease investigation and by limiting the spread of these diseases in the population through assuring treatment as needed. We uphold and enforce Oregon state statues requiring investigation of and response to dozens of reportable diseases varying from tuberculosis (TB) and pertussis to E. coli 0157 and anthrax. We respond 24/7 to events of public health importance.

**Program Description**

CDS directly provides services that protect the health and safety of our community by limiting the spread of life-threatening infectious diseases through clinical and investigatory interventions. This type of work has been the backbone of public health for over 100 years. It includes investigations that find people who have been exposed to serious diseases, to get them the information and care they need to stay healthy. To prevent these diseases before they start, we work with communities to provide education and screening. For people who have diseases like TB, we assure access to medicine. To ensure that appropriate diagnostic tests are available to healthcare providers, we provide a link to state and national laboratories that test for rare pathogens.

Our staff has highly-trained public health nurses supported by health assistants, community health specialists, analysts, and administrative staff with knowledge of infectious disease transmission and state reporting rules. We are culturally and linguistically competent, speaking several languages. We work closely with other Health Department programs, including Environmental Health and the Office of the Health Officer; and provide educational opportunities for public health and nursing students to develop tomorrow's public health professionals. Examples of the types of work we do are as follows:

- Comprehensive TB prevention and control activities provided through clinic and home visits, nursing case management, and TB screening. This includes following up as directed by federal authorities with newly arrived refugees and immigrants who may have TB infection, and working with Portland homeless shelters to identify TB in this high-risk group.
- Epidemiologic investigation, health education, and provision of preventive health measures in response to reportable disease exposures and outbreaks, including collaboration with state, national, and international officials as needed, and with law enforcement when an intentional cause is suspected.
- Provision of occupational health measures related to blood-borne pathogens, TB exposure, and post-exposure prophylaxis for county employees to meet county OSHA requirements.

This program offer supports the Climate Action Plan because of its work in surveying emerging diseases related to climate change, such as food borne illness-specifically GI diseases caused by Vibrio- and other pathogens. CAP Action items: 17-1, 17-2 and 17-3 per CD's role in adaptation assessment and planning as a key stakeholder.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Disease report responses	4,156	0	4,046	4,000
Outcome	Meningococcal disease case contacts receiving recommendation or prescription	100.0%	100.0%	100.0%	100.0%
Quality	CD case investigation started within timeframes set by Oregon PH & CDC: goal 90%	98.0%	90.0%	98.4%	90.0%
Quality	TB patients completing treatment within 12 mos. as set by Oregon & CDC	100.0%	90.0%	95.0%	90.0%

**Performance Measure - Description**

 **Measure Changed**

1) Output-All disease reports and suspect case referrals received, processed, and responded to. 2) Outcome-Reflects effectiveness of case contact investigation and response to life threatening diseases. 3) Quality-Measures reflect standards, and are reported to the state for CD case investigations and TB patients completing treatment within 12 months as set by Oregon and CDC: standard 90%.

## Legal/Contractual Obligation

1) OAR 333-018 and 019: Disease Reporting and investigation and Control of Diseases, Oregon Health Services and CLHO. BT/CD & TB Assurances; OAR 437: OR-OSHA: Bloodborne Pathogens 1910.1030. 2) CDC: Immunization of Health-Care Workers, Vol. 46/RR-18. 3) CDC: Guidelines for Preventing the Transmission of TB in Health-Care Facilities, Vol. 43/RR-13.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,998,937	\$937,046	\$2,154,106	\$828,128
Contracts	\$121,102	\$25,270	\$0	\$39,534
Materials & Supplies	\$13,352	\$256,889	\$6,994	\$91,073
Internal Services	\$139,980	\$488,664	\$200,705	\$278,516
Total GF/non-GF:	<b>\$2,273,371</b>	<b>\$1,707,869</b>	<b>\$2,361,805</b>	<b>\$1,237,251</b>
Program Total:	<b>\$3,981,240</b>		<b>\$3,599,056</b>	
Program FTE	18.18	9.64	20.74	7.83
Program Revenues				
Indirect for dep't Admin	\$101,537	\$0	\$73,973	\$0
Fees, Permits & Charges	\$0	\$10,476	\$0	\$34,284
Intergovernmental	\$0	\$1,611,570	\$0	\$1,151,651
Other / Miscellaneous	\$0	\$85,823	\$0	\$51,316
<b>Total Revenue:</b>	<b>\$101,537</b>	<b>\$1,707,869</b>	<b>\$73,973</b>	<b>\$1,237,251</b>

## Explanation of Revenues

Communicable Disease Prevention & Control is funded by an intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services that includes both state and federal funds, federal TB Outreach grant, patient fees for occupational health service, and county general fund.

TB Outreach grant: \$22,629  
 State of Oregon LPHA: \$1,129,022  
 Patient fees: \$85,600  
 County general fund: \$2,361,805

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40010, Communicable Disease Prevention & Control

The Travel Clinic was started in 2001 in order to fill a gap in travel services availability. However, the environment of offering travel services has changed considerably in the last few years. Changes include an increased number of private travel medicine providers in the metro-area, and a weak economy that has led to reduced international travel by the general public. Because of these changes, the Traveler's Clinic closed in July 2010.

Also, due to a renewed emphasis on providing core public health services, CDS has increased its response to communicable disease exposure and outbreaks, thus limiting the spread of infectious diseases through clinical and investigatory intervention. As a result of these changes, CDS has a net decrease of \$382,184 and a net increase of 0.75 FTE.

**Lead Agency:** Health Department

**Program Contact:** TOEVS Kim

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

HIV, STDs and Hepatitis C account for almost 80 percent of all reportable diseases in the County. This cost effective program prevents epidemics seen in other west coast cities by controlling disease spread using evidence-based prevention interventions and STD treatment for those at highest risk.

**Program Description**

PREVENTION is the key strategy, using culturally specific, evidence-based population focused approaches. Disease spread is reduced by: 1) PARTNER SERVICES: Staff contact infected people, encourage treatment, partner notification and behavior change. 2) COMMUNITY TESTING: Staff visit bars, jails, internet and other "hookup" sites to test, educate, and promote behavior change. 3) STD CLINIC: Provides timely evaluation, treatment, and prevention counseling for people without health care access. STD rates highly correlate to poor access to quality, timely health care. 4) PARTNERSHIPS: Collaborates with businesses, community organizations, and other counties to enhance capacity. Helps people at-risk link to care, drug treatment, counseling, etc. 5) SYRINGE EXCHANGE: Proven to keep infection rates low among injectors, partners and their infants. 6) BEHAVIOR CHANGE/EDUCATION: Community-based interventions to reduce risky sexual and drug behavior. 7) SUCCESS: County HIV, syphilis, and gonorrhea rates are the lowest of major west coast cities, due in large part to this program. Because these diseases disproportionately affect racial, ethnic and sexual minority communities, we base our service delivery on local epidemiology to prioritize reducing disparities. In place for 20+ yrs, this program is demonstrably effective. 8) COST EFFECTIVE: Preventing disease saves money over time. Delayed treatment increases disease spread and costly chronic conditions such as AIDS, liver disease, infertility and poor maternal/child health. Untreated, HIV leads to poverty, inability to work or maintain stable housing.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of community outreach/health promotion encounters	39,915	0	44,800	45,000
Outcome	% of ALL county gonorrhea/syphilis/HIV cases diagnosed through this program	30.7%	0.0%	34.9%	30.0%
Quality	% of gonorrhea/syphilis/HIV cases investigated	92.2%	90.0%	87.8%	90.0%
Output	#STD clinical encounters (visit/phone results)	13,148	12,000	12,500	12,500

**Performance Measure - Description**

 **Measure Changed**

1. This new performance measure better quantifies the amount of community-based work the program provides each year than the previous measure "# of HIV tests performed".
  2. This new performance measure illustrates the impact of the STD/HIV/Hep C Program's ability to find, diagnosis, and treat reportable STDs, including HIV, more than the previous measure "stable or decreased # of HIV cases based on 5 year rolling average". This measure also demonstrates the program's capacity to target services to those at highest risk for STDs.
  3. The 90% goal is negotiated with the Oregon State STD Program, and is comparable to benchmarks set by other states nationally.
- Previous year's performance measures now not included (# of HIV cases, # of HIV tests performed) are both on target for meeting performance goals this year.

## Legal/Contractual Obligation

Yes. ORS 433 mandates disease prevention & control. Ryan White CARE Act Part A (see Services for Persons Living with HIV) requires a local maintenance of effort for HIV prevention services. Oregon State DHS HIV Prevention contractual program elements. Oregon State DHS STD disease investigation assurances.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,830,292	\$1,077,990	\$1,988,399	\$784,265
Contracts	\$202,658	\$407,907	\$196,965	\$371,108
Materials & Supplies	\$132,141	\$119,636	\$101,339	\$161,976
Internal Services	\$418,033	\$326,574	\$296,421	\$342,252
Total GF/non-GF:	<b>\$2,583,124</b>	<b>\$1,932,107</b>	<b>\$2,583,124</b>	<b>\$1,659,601</b>
Program Total:	<b>\$4,515,231</b>		<b>\$4,242,725</b>	
Program FTE	18.56	10.89	19.05	8.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$114,852	\$0	\$99,332	\$0
Fees, Permits & Charges	\$0	\$124,015	\$0	\$137,162
Intergovernmental	\$0	\$1,808,092	\$0	\$1,504,439
Other / Miscellaneous	\$0	\$0	\$0	\$18,000
<b>Total Revenue:</b>	<b>\$114,852</b>	<b>\$1,932,107</b>	<b>\$99,332</b>	<b>\$1,659,601</b>

## Explanation of Revenues

STD/HIV/HEP C receives funding federal Ryan White Part A, an intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services that includes both state and federal funds, a grant from Cascade AIDS project, medical fees from Medicaid, Medicare, private insurance and patient fees, and county general fund.

Federal Ryan White grant: \$39,200  
 State of Oregon LPHA: \$1,428,702  
 Medical fees: \$173,699  
 Cascade AIDS Project: \$18,000  
 County general fund: \$2,583,124

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40011, STD/HIV/Hep C Community Prevention Program

In the STD program, the OHSU-STI Study grant will end in June 2011, resulting in a decrease of \$304,000 and 1.00 FTE. This grant helped pay for lab test for clients who were then recruited for the study. Client visits are not expected to decrease, so these lab costs will be funded through improvements in 3rd-party insurance collections.

In the HIV program, a shared position with State/County Program Design and Evaluation Services, as well as another vacant position, was removed from the budget resulting in a 0.60 decrease in FTE. To prevent loss of services, HIV has restructured responsibilities of staff within the program to ensure that essential functions are maintained by existing positions. HIV is also changing the service delivery model for reaching target populations utilizing peers from the affected communities.

**Lead Agency:** Health Department

**Program Contact:** TOEVS Kim

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The HIV Care Services Program (HCS) and HIV Health Services Center (HIV Clinic) provide community-based primary care and support services to highly vulnerable populations living with HIV. Services target low income, uninsured, mentally ill, substance abusing, and other special needs populations. These services contribute to lower mortality from HIV, fewer disease complications, and reduced transmission of HIV in the community.

**Program Description**

The HIV Clinic serves over 900 clients each year. Clinic services include outpatient medical care, mental health and substance abuse counseling, case management, health education, HIV prevention and risk reduction support, and treatment adherence counseling. Access to and use of HIV medications is optimized by clinical pharmacy services. On-site chronic disease self management workshops and peer mentoring are also offered to clinic clients. The HIV Clinic integrates prevention into all services to reduce client risk of HIV transmission. The clinic is supported by an active Client Advisory Board and a well established network of HIV social services providers. The clinic is an AIDS Education and Training Center site training over 40 doctors, nurses and pharmacists each year.

HIV Care Services Program coordinates a regional care system that promotes access to high quality HIV services through contracts with health departments and community organizations. HCS funded services include: **EARLY INTERVENTION:** Outreach ensures early identification and treatment. **CARE:** A coordinated primary care system provides medical, dental, mental health and substance abuse treatment. **SERVICE COORDINATION:** Case management connects clients with health insurance, housing, and other services critical to staying in care. **BASIC NEEDS:** Housing focuses on building life skills and access to permanent housing. **HEALTH PROMOTION:** Behavioral education provides clients with self-management skills. **PLANNING:** A community-based council does service planning. Over the past three years, the number of persons living with AIDS has increased 15.3%. HCS clients continue to be severely affected by poverty, lack of stable housing, and reductions in insurance and medication programs.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of unduplicated HCS clients served (all srv types/whole system)	2,686	2,400	2,400	2,450
Outcome	% of uninsured HCS clients who gained insurance	71.4%	70.0%	68.0%	70.0%
Output	# of unduplicated HIV CLINIC clients	1,040	950	975	975
Quality	% of medical clients who do not progress to AIDS	93.0%	93.0%	92.0%	93.0%

**Performance Measure - Description**

4) Quality: % of medical clients who do not progress to AIDS, helps to determine how well medical and support services contained in this offer support the health outcomes of people living with HIV disease.

## Legal/Contractual Obligation

Federal HIV grant and contract funds are restricted. Part A grant requires: 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill and Clark Counties; 2) Community-based Planning Council; 3) Ten percent expenditure cap on planning and administration, which requires the County to cover some indirect costs; and 4) Maintenance of effort where the County must spend local funds for HIV services at least at the level spent in the previous year.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$36,000	\$2,733,278	\$120,149	\$2,825,291
Contracts	\$203,000	\$2,874,017	\$10,236	\$2,517,733
Materials & Supplies	\$8,707	\$199,310	\$58,396	\$266,244
Internal Services	\$6,690	\$790,155	\$24,155	\$788,327
Total GF/non-GF:	<b>\$254,397</b>	<b>\$6,596,760</b>	<b>\$212,936</b>	<b>\$6,397,595</b>
Program Total:	<b>\$6,851,157</b>		<b>\$6,610,531</b>	
Program FTE	0.50	25.46	0.50	26.15
Program Revenues				
Indirect for dep't Admin	\$249,135	\$0	\$253,207	\$0
Fees, Permits & Charges	\$0	\$1,071,335	\$0	\$896,737
Intergovernmental	\$0	\$5,525,425	\$0	\$5,500,858
<b>Total Revenue:</b>	<b>\$249,135</b>	<b>\$6,596,760</b>	<b>\$253,207</b>	<b>\$6,397,595</b>

## Explanation of Revenues

HIV Care Services receives flat funding from federal Ryan White care Act (RWCA) Part A grant. County general fund is used to leverage HCS grant funding. The HIV Clinic revenues include several federal grants, local contracts and third party billing-- primarily OMIP, CareAssist, Oregon Health Plan and Medicare. The federal grants have not kept pace with the growth in number of patients served or with increased costs of clinic operations.

Federal Ryan White grant: \$3,884,205

Medical fees: \$1,478,069

Federal Primary Care HIV Early Intervention grant: \$910,321

University of Washington AIDS Education and Training Center grant: \$114,000

OHSU grant: \$11,000

County general fund: \$212,936

## Significant Program Changes

Last year this program was: #40012, Services for Persons Living with HIV



**Lead Agency:** Health Department

**Program Contact:** RUMINSKI Diane T

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Early Childhood Services provides home visiting to pregnant women and families with young children to assure that those at risk for poor health outcomes receive the support, education and resources needed to achieve optimal health during the critical early years of life. We expect to serve approximately 6,300 women and children in FY 12.

**Program Description**

Voluntary home visiting programs have demonstrated positive changes in parenting practices, gains in child growth and development, increased readiness for school, reductions in the incidence of child abuse and neglect, low birth weight and prematurity, and improvements in maternal life course. High risk families including teens, African Americans and other groups experiencing health disparities, low income, and single parents appear to benefit the most from these interventions. Long term benefits to the county include a healthier, well prepared work force and decreased costs related to school failure, juvenile crime, and chronic disease. Early childhood services uses community based epidemiologic data to help inform us about the current health of our young families and how to tailor interventions to address their needs.

The Healthy Birth Initiative(HBI) program is designed to reduce the historical disparities in poor birth outcomes by addressing the social determinants of health in the African American population. Core service components include outreach, case management, health education, interconceptual care, and depression screening and referral. A community consortium, mental health groups, and a contract with Black Parent Initiative (BPI) to educate and support African American fathers are unique components of HBI. Transportation and childcare support are wraparound services available to HBI families. Services begin in early pregnancy and children are followed up to their second birthday.

Albina Early Head Start Program provides nursing services through contract to families enrolled in this Head Start program serving N/NE Portland.

The Nurse Family Partnership Program (NFP)is offered to first-time low income pregnant women. Services begin in early pregnancy and follow families up to their child's second birthday. NFP evaluations demonstrate improved prenatal outcomes, fewer subsequent births, increased intervals between births, increased rates of breast feeding, and fewer childhood injuries. Research on the long-term benefits for children receiving NFP services has shown at age 15 they are more likely to be in school, and less likely to be in the criminal justice system. The mothers who received NFP services are more likely to have finished high school, be in the workforce, and not use public assistance.

General Home Visiting Services: Families who do not meet the criteria to enter HBI or NFP programs are also offered home visits by nurses and community health workers. These include pregnant women with medical conditions, women experiencing domestic violence, or alcohol/drug use as well as premature, low birthweight or infants with medical conditions. Services include health screening and assessment, case management, health education and community referrals.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of infants 0-12 months with developmental screening	62.0%	70.0%	70.0%	70.0%
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	48.0%	50.0%	50.0%	50.0%
Quality	% of clients completing survey who are very satisfied/satisfied with services*	0.0%	0.0%	0.0%	80.0%
Output	% women enrolled in HBI who are screened for depression**	0.0%	0.0%	0.0%	95.0%

**Performance Measure - Description**

 **Measure Changed**

\*New performance measure designed to obtain client input on services offered by measuring client satisfaction.

\*\*New measure this year and also a requirement of the federal grant.

## Legal/Contractual Obligation

Nurse Family Partnership (NFP) follows program guidelines set forth by the NFP National Service Office. Healthy Birth Initiative (HBI) must comply with HRSA grant requirements. Services reimbursed by Medicaid must comply with Medicaid rules.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,011,686	\$2,043,391	\$1,476,272	\$1,950,831
Contracts	\$1,286,071	\$46,091	\$804,582	\$94,224
Materials & Supplies	\$41,998	\$103,531	\$37,868	\$159,108
Internal Services	\$170,492	\$506,429	\$182,623	\$337,440
Total GF/non-GF:	<b>\$2,510,247</b>	<b>\$2,699,442</b>	<b>\$2,501,345</b>	<b>\$2,541,603</b>
Program Total:	<b>\$5,209,689</b>		<b>\$5,042,948</b>	
Program FTE	7.04	18.90	16.10	17.85
<b>Program Revenues</b>				
Indirect for dep't Admin	\$160,524	\$0	\$150,914	\$0
Intergovernmental	\$0	\$2,699,442	\$0	\$2,541,603
<b>Total Revenue:</b>	<b>\$160,524</b>	<b>\$2,699,442</b>	<b>\$150,914</b>	<b>\$2,541,603</b>

## Explanation of Revenues

Early Childhood Services for pregnant/parenting families - N/NE is funded by county general fund, the federal Healthy Birth Initiative, and Medicaid fees from: 1) Maternity Case Management (MCM) home visits conducted from pregnancy through two months postpartum (\$249/visit); and 2) Targeted Case Management (TCM) for infants and children up to age 5 years (\$303/visit). CaCoon is a Care Coordination grant designed to serve children with special health care needs. This grant is shared between both Early Childhood Services program offers. The Babies First! state general fund grant and is divided between two Early Childhood Program offers.

Healthy Birth Initiative federal grant: \$850,000  
 Medical fees: \$1,588,515  
 CaCoon and Babies First! grant: \$87,088  
 County general fund: \$2,510,247

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40013A, Early Childhood Services for First Time Parents

This program offer structure, not services, has been changed for ease of monitoring and reporting on the budget. Offer A is now for staff working out of the N/NE office. Offer B is for staff working out of Mid and East County office. The services described herein are provided to the whole community.

Programmatic changes include changes in response to State rules changes to Medicaid funded services. These rule changes affect provider types, initial assessment visits, and place of service restrictions, resulting in the same number of patient visits but fewer reimbursable visits. Changes to the match rate have offset some of the revenue shortfall. Other changes include the CDC-Intimate Partner Violence/Nurse Family Partnership grant ended in FY 2011. All staff from this grant were retained and redeployed with the Early Childhood Services programs. The result of these changes to the ECS programs is a net reduction in State and Medicaid revenue of \$854,649 and 4.80 FTE. The reduction in FTE was achieved without reducing services, eliminating vacancies and staff reassignment prevented layoffs.

**Lead Agency:** Health Department

**Program Contact:** RUMINSKI Diane T

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

ECS provides home based services to pregnant women and families with young children to assure optimal maternal and infant health and assist parents in meeting their child's basic health and developmental needs. The conditions of our early life have a profound impact on our long-term health and stability. We expect to screen 2850 first birth families for eligibility for home visiting service and deliver home visiting services to 9,600 women and children.

**Program Description**

Voluntary home visiting programs have demonstrated positive changes in parenting practices, gains in child growth and development, increased readiness for school, reductions in the incidence of child abuse and neglect, low birth weight and prematurity, and improvements in maternal life course. High risk families including teens, African Americans and other groups experiencing health disparities, low income, and single parents appear to benefit the most from these interventions. Long term benefits to the county include a healthier, well prepared work force and decreased costs related to school failure, juvenile crime and chronic disease.

Nurse Family Partnership Program (NFP) is offered to first-time low income pregnant women. Services begin in early pregnancy and follow families to their child's second birthday. NFP evaluations demonstrate improved prenatal outcomes, fewer subsequent births, increased intervals between births, increased rates of breast feeding, and fewer childhood injuries. Long-term benefits for children receiving NFP services has shown at age 15 they are more likely to be in school, and less likely to be in the criminal justice system. The mothers who received NFP services are more likely to have finished high school, be in the workforce, and not use public assistance.

Healthy Start is a state wide program serving first birth families with overall goals to reduce child abuse/neglect, improve school readiness and promote healthy growth and development of young children up to age three years. Last year over 2850 families received screenings at the time of birth and over 600 families were served in home visits. Healthy Start follows the "Healthy Families America(HFA)" model of home visiting--a best practice model delivered by highly trained staff through community-based agencies. Nurse consultants provide additional health support to families and staff.

General home visiting services: Families who do not meet the criteria to enter the NFP/Healthy Start programs are also offered home visits. These include pregnant women with medical conditions, women experiencing domestic violence or alcohol/drug use. Infants served are those born prematurely or of low birth weight, with medical conditions, or having parents unable to provide appropriate care without support. Home visits by nurses and community health workers provide significant support to families, tailored to their needs as observed in their home environment. Services include health screening/assessment, case management, health promotion, breast feeding/parenting support, childbirth classes, and community referrals. Nursing consultation is also provided to pregnant and parenting families enrolled in the Mt Hood Head Start program.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% infants 0-12 months with developmental screening	76.0%	80.0%	80.0%	80.0%
Outcome	% of mothers enrolled in NFP who are still breastfeeding at 6 months	48.0%	50.0%	50.0%	50.0%
Quality	% of clients completing survey who are very satisfied/satisfied with services*	0.0%	0.0%	0.0%	80.0%
Outcome	% Healthy Start parents who report reading to /with child at least 3X/week.	80.0%	82.0%	90.0%	90.0%

**Performance Measure - Description**

 **Measure Changed**

\* New performance measure designed to obtain client input on services offered by measuring client satisfaction.

## Legal/Contractual Obligation

Healthy Start must comply with Healthy Families America(HFA) credentialing requirements and the state OCCF Healthy Start contract requirements. Failure to comply may result in disaffiliation with HFA and withholding of funding. Babies First & CaCoon state funds must comply with contract requirements. Medicaid reimbursements must comply with Medicaid rules.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$2,490,396	\$2,794,957	\$1,930,619	\$2,744,014
Contracts	\$702,745	\$1,399,375	\$1,161,360	\$1,028,215
Materials & Supplies	\$25,370	\$139,088	\$74,811	\$121,181
Internal Services	\$168,542	\$738,022	\$220,263	\$497,222
Total GF/non-GF:	<b>\$3,387,053</b>	<b>\$5,071,442</b>	<b>\$3,387,053</b>	<b>\$4,390,632</b>
Program Total:	<b>\$8,458,495</b>		<b>\$7,777,685</b>	
Program FTE	27.71	26.80	16.80	25.60
Program Revenues				
Indirect for dep't Admin	\$196,767	\$0	\$164,606	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$586,123
Intergovernmental	\$0	\$5,071,442	\$0	\$3,804,509
<b>Total Revenue:</b>	<b>\$196,767</b>	<b>\$5,071,442</b>	<b>\$164,606</b>	<b>\$4,390,632</b>

## Explanation of Revenues

Early Childhood Services-Pregnant/Parenting Families-Mid/East/Healthy Start is funded by county general fund, Medicaid fees for: 1) Maternity Case Management (MCM) home visits conducted from pregnancy through two months postpartum (\$249/visit), and 2) Targeted Case Management (TCM) for infants and children up to age 5 (\$303/visit). CaCoon is a Care Coordination grant serving children with special health care needs and is shared with Program Offer 40013A. The Babies First! state general fund is also shared with 40013A. The Healthy Start Program is primarily funded through state general funds from the Oregon Commission on Children and Families (OCCF) via the Multnomah Commission on Children, Families and Communities. The state general fund portion of \$1,555,863 represents a decrease of \$253,316 over last year.

Healthy Start: \$1,555,863, Medical fees and administrative claiming: \$2,654,581

CaCoon and Babies First grants: \$110,288; Mt Hood Community College Head Start: \$69,900; County general fund: \$3,387,053

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40013B, Early Childhood Services for High Risk Prenatal, Infants & Children

This program offer structure, not services, has been changed for ease of monitoring and reporting on the budget. Offer A is now for staff working out of the N/NE office. Offer B is for staff working out of Mid and East County office. The services described herein are provided to the whole community.

Programmatic changes include changes in response to State rules changes to Medicaid funded services. These rule changes affect provider types, initial assessment visits and place of service restrictions, resulting in the same number of patient visits but fewer reimbursable visits. Changes to the match rate have offset some of the revenue shortfall. Other changes include the CDC-Intimate Partner Violence/ Nurse Family Partnership grant ended in FY 2011. All staff from this grant were retained and redeployed with the Early Childhood Services programs. The result of these changes to the ECS programs is a net reduction in State and Medicaid revenue of \$854,649 and 4.80 FTE. The reduction in FTE was achieved without reducing services, eliminating vacancies and staff reassignment prevented layoffs.

**Lead Agency:** Health Department

**Program Contact:** SCHMITZ Virginia S

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

By implementing the federally subsidized Vaccines for Children (VFC) Program and helping schools and childcare facilities comply with state school immunization rules, the Community Immunization Program (CIP) contributes to a safe environment for learning, ensuring that children are protected from life-threatening, vaccine-preventable diseases.

**Program Description**

No child should be unvaccinated because a parent is unable to pay for vaccine. And because vaccine-preventable diseases like measles can spread from one child to another, childhood vaccination is important not only for individual health but for the health of those with whom children live, play, and go to school. CIP ensures that the basic disease prevention needs of children are met through several interrelated program components.

- We increase access to immunizations by providing childhood immunization services at community sites and our clinic. No VFC-eligible child is turned away due to inability to pay.
- We support a safe vaccine supply and efficient use of vaccine for the county system of Federally Qualified Health Centers by monitoring the cold chain and conducting physical inventories to meet county quality assurance requirements.
- We uphold and enforce the state-mandated obligation to ensure that all children in certified day care centers, preschools, kindergartens, Head Start Programs and students in private, alternative and public schools are complete or up-to-date on their immunizations in the following ways:
  - To help schools, including those in the Multnomah Education Service District (MESD), and other facilities maintain their licensure, we facilitate mandatory reporting by reviewing and compiling reports related to the immunization status of their students.
  - To help parents navigate the exclusion process, we assist with documentation to prevent school exclusion.
  - To enforce the law in cases where it has not been met, we issue exclusion orders as needed.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of immunizations directly provided to keep children in school	1,298	0	1,000	1,100
Outcome	Of facilities assisted those successful in meeting immunization law requirements	100.0%	0.0%	100.0%	100.0%
Output	Number of schools & other facilities assisted with immunization law requirements	311	0	364	364

**Performance Measure - Description**

 **Measure Changed**

Performance measures changed to better reflect and monitor the performance of the program's services and activities.

Output 1: The number of children vaccinated during the two week period from the first Friday in February, when parents start receiving school exclusion letters for children who are not up-to-date, and third Friday in February, the first day on which children could actually be excluded from school.

Output 2: The number of certified day care centers, preschools, kindergartens, Head Start programs and private, alternative and public schools that we assisted through the state school immunizations law reporting process from December through March of the previous fiscal year.

Outcome: The percentage of the facilities we assisted which met state immunization reporting requirements, thus maintaining their licensure requirements in this area.

**Legal/Contractual Obligation**

ORS 433-235 through 433.280 and Administrative Rules 333-19-021 through 333-19

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$43,233	\$245,487	\$129,877	\$257,822
Contracts	\$0	\$18,984	\$5,783	\$683
Materials & Supplies	\$68	\$3,041,053	\$58,949	\$3,025,228
Internal Services	\$51,066	\$81,004	\$84,144	\$78,431
<b>Total GF/non-GF:</b>	<b>\$94,367</b>	<b>\$3,386,528</b>	<b>\$278,753</b>	<b>\$3,362,164</b>
<b>Program Total:</b>	<b>\$3,480,895</b>		<b>\$3,640,917</b>	
Program FTE	0.00	2.00	1.59	2.41
<b>Program Revenues</b>				
Indirect for dep't Admin	\$22,986	\$0	\$21,640	\$0
Fees, Permits & Charges	\$0	\$12,476	\$0	\$158,484
Intergovernmental	\$0	\$3,374,052	\$0	\$3,203,680
<b>Total Revenue:</b>	<b>\$22,986</b>	<b>\$3,386,528</b>	<b>\$21,640</b>	<b>\$3,362,164</b>

**Explanation of Revenues**

Immunizations is funded by the Immunization Action Plan grant included in the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, patient fees, and the value of vaccines provided by the state.

Cash value of donated Vaccines: \$3,000,000  
 State LPHA Immunization Action Plan grant: \$101,840  
 Federal Immunization grant: \$101,840  
 Patient fees: \$158,484  
 County general fund: \$278,753

**Significant Program Changes**

**Last year this program was:** #40014, Immunizations

Early Childhood Services resources have been shifted to support and increase access for childhood immunization services, as well as to assist parents and schools in meeting state-mandated immunization requirements. As a result of this shift, Immunization general fund has increased by \$160,000 and 2.00 FTE.

**Lead Agency:** Health Department  
**Program Offer Type:** Existing Operating  
**Related Programs:** 40037A

**Program Contact:** WICKHAM Lila A

**Program Characteristics:**

**Executive Summary**

This program prevents childhood lead poisoning and is primarily funded with city, state and federal funding. Lead causes brain damage in children resulting in behavior, learning, and health problems that impacts their economic, academic and social future. The program administers a statewide LeadLine, providing information and referral in multiple languages and screens for lead levels in blood, environmental investigations, case management, advocacy for services and community education/outreach.

**Program Description**

Multnomah County Environmental Health Services works collaboratively with the City of Portland lead partners and the State Health Department to ensure a seamless system of lead prevention and early intervention for children identified with elevated blood lead levels. The Lead Program: 1) Educates parents, landlords, property owners, and contractors about lead exposure causes and effects, screening, and reducing home lead hazards; 2) Tests children for blood lead levels and provides information about free lead screening locations in the county; 3) Promotes lead screening in primary care clinics; 4) Provides investigation of high lead levels by an Environmental Health Specialist by conducting an in home assessment to identify causes and eliminate exposures to lead for children at high to moderate risk; 5) Provides the family with a lead remediation plan; 6) Tracks all lead screening results and all Elevated Blood Lead Levels (EBLL) to detect program trends/risks; 7) Screens for risk of lead exposure of low-income children in support of improving health equity. LeadLine has increased outreach to medical providers and community.

The lead poisoning prevention program continues to increase its focus on outreach and education services targeting the most vulnerable populations that are under-represented in the blood lead level statistics. By combining targeted prevention messaging, advocacy for rigorous policy initiatives and developing community capacity to address lead prevention, this program offer relies almost exclusively on grants and contracts. Electronic newsletter distributed to community and providers quarterly. Children who have lead poisoning develop significant brain damage and learning disabilities, which impacts their normal growth and development and reduces their ability to function in school, at home and develop into a healthy adult. There are an estimated 10,000 older homes with possible exposure risk of leaded paint in Multnomah County that houses children 6 years old and younger. The Lead Poisoning Prevention Program identifies and helps residents reduce exposure to the environmental hazards of lead and promotes safer housing conditions. The program has seen an increased demand for lead screening, education, and referral services. Medicaid reimbursement for Lead Investigations began July 2010.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total # of children screened by MCHD primary care and immunization providers	3,239	4,000	3,939	4,000
Outcome	Total # of successfully identified children with EBLLs*	18	25	68	40
Output	# of community members receiving information on lead prevention**	10,459	7,000	13,591	14,000
Quality	%home investigations where lead exposure risk hazards/factors are identified***	100.0%	95.0%	100.0%	95.0%

**Performance Measure - Description**

Children screened: Counts lead screening services provided by Multnomah County Health Department care providers, immunization unit and MCHD outreach testing (expanded service)

\*Children with EBLL: Elevated Blood Lead Levels (EBLL) found during screening by any health care provider within Multnomah County. EBLL investigation criteria changed from 15 mg/dl to 10 mg/dl. Health Department proactively began investigating children with lead levels over 5 mg/dl in FY 2011.

\*\*Community Information: Measure to quantify reach of program through phone counseling, referral, educational materials, website and community events. The Current Year Estimate and Next Year Offer show an increase because the program has added targeted community event outreach to the prior methodology of primarily answering calls from the community.

\*\*\*Percentage of home investigations with identified contributing factors for lead source. Program goal is 95%.

## Legal/Contractual Obligation

Legal mandates are City of Portland codes 8.20.210 (Maintenance of Health Hazard not Permitted); 8.20.200 (Notice of Unsanitary or Unhealthful Condition of Premises to be Given and Posted – Unlawful to Remove); 29.30.110 (interior Walls, Floors, and Ceilings); 29.30.060 (Exterior Walls and Exposed Surfaces); Some activities under this program offer are subject to contractual obligations under Inter-Governmental Agreement #0607105.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$121,971	\$0	\$122,751
Contracts	\$2,787	\$5,963	\$0	\$2,370
Materials & Supplies	\$0	\$3,390	\$10,101	\$1,243
Internal Services	\$12,535	\$10,676	\$11,289	\$11,436
Total GF/non-GF:	<b>\$15,322</b>	<b>\$142,000</b>	<b>\$21,390</b>	<b>\$137,800</b>
Program Total:	<b>\$157,322</b>		<b>\$159,190</b>	
Program FTE	0.00	1.30	0.00	0.90
Program Revenues				
Indirect for dep't Admin	\$8,444	\$0	\$8,235	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$800
Intergovernmental	\$0	\$142,000	\$0	\$137,000
<b>Total Revenue:</b>	<b>\$8,444</b>	<b>\$142,000</b>	<b>\$8,235</b>	<b>\$137,800</b>

## Explanation of Revenues

Lead Poisoning Prevention has a contract with the City of Portland Water Bureau for \$135,000 that we expect to be renewed at the same rate in FY2011. The program has an additional \$2,000 ongoing contract with the State Lead Program. As a result of the increased outreach, we expect to see an increase in the number of investigations to 25 a year. The State of Oregon will reimburse \$200 for each investigation done on a child with Medicaid.

City of Portland Water Bureau: \$135,000

State Lead Program: \$2,000

Medical fees: \$800

County general fund: \$21,390

## Significant Program Changes

### Last year this program was: #40015, Lead Poisoning Prevention

There was a significant increase in education and outreach activities which is reflected in the output measure of community members receiving information about lead poisoning prevention. Partnering with WIC and Head Starts to target at risk populations has generated more interest and screening.

The Leadline program began investigating children with lead levels at five to be proactive and intervene to eliminate sources of lead in the home. Although the official action level for dangerous blood level remains at 10, there is general agreement among lead experts that levels as low as five are dangerous for children six and under as well as the unborn.

Improvements in telephone systems and websites have increased efficiency in responding to calls and generating community interest.



**Lead Agency:** Health Department

**Program Contact:** Susan Kirchoff

**Program Offer Type:** Existing Operating

**Related Programs:**

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

**Executive Summary**

Medicaid Enrollment assists uninsured and under-insured Oregonians gain access to health services by providing application and enrollment assistance and advocacy to families and children applying for Medicaid Oregon Health Plan (OHP) benefits, Medical Assistance Assumed (MAA), Medical Assistance for Families (MAF), Temporary Assistance For Needy Families (TANF), Family Health Insurance Assistance Program (FHIAP), Children’s Health Insurance Program (CHIP), Healthy Kids Plan & Kids Connect, Oregon Prescription Drug Program (OPDP), and Kaiser Child Health Program. The Medicaid Program operates under contract with the State Division of Medical Assistance Programs (DMAP).

**Program Description**

The Medicaid Enrollment program provides outreach and education efforts which increases the number of clients who complete the OHP enrollment process, increases access to health care services, particularly for pregnant women and children, and ensures continuity of coverage at recertification. The program aims to provide dignified access to health care for all citizens in collaboration with existing Multnomah County services, and addresses the Basic Needs strategy to provide access to care, by securing insurance coverage for eligible individuals. Approximately 90% of Medicaid eligible clients select MCHD clinics as their provider. In addition, the program addresses the strategy to educate, prevent, and/or intervene to keep individuals from experiencing health or economic crisis due to lack of coverage.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Annual number of clients screened	33,900	36,000	41,688	40,500
Outcome	Uninsured children in Multnomah County insured through program	13,000	13,500	5,000	6,000

**Performance Measure - Description**

- 1) Output: Reflects service volume.
- 2) Outcome: Uninsured children insured as a direct result of Medicaid Enrollment Program. 2,265 referrals received from MESD nurses (2,087 kids insured as a direct result); and 662 referrals from SBHC, 244 kids and 35 adults insured as a direct result. Since October 2009, an additional 607 individuals were screened for Medicaid eligibility resulting in 240 children now covered by the Healthy Kids Plan, through the outreach efforts of the MESD Eligibility Specialists. For FY11 one program outcome will include children insured directly through expanded outreach opportunities.

## Legal/Contractual Obligation

The Medicaid Enrollment Program is on contract with the State Division of Medical Assistance Programs (DMAP) to provide application and enrollment assistance to all OHP/Medicaid eligibles including education regarding managed health care. Information shall include establishing a Date of Request (DOR) or effective date of coverage, managed medical, dental, and mental health care, covered services (including preventive and emergent), client rights and responsibilities, and the grievance and appeal process.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$96,691	\$1,059,561	\$302,798	\$1,134,329
Contracts	\$3,123	\$0	\$3,137	\$0
Materials & Supplies	\$12,602	\$10,737	\$25,334	\$343
Internal Services	\$33,021	\$151,652	\$41,026	\$163,195
Total GF/non-GF:	<b>\$145,437</b>	<b>\$1,221,950</b>	<b>\$372,295</b>	<b>\$1,297,867</b>
Program Total:	<b>\$1,367,387</b>		<b>\$1,670,162</b>	
Program FTE	1.00	14.00	3.50	14.50
Program Revenues				
Indirect for dep't Admin	\$72,664	\$0	\$77,550	\$0
Intergovernmental	\$0	\$1,221,950	\$0	\$1,297,867
<b>Total Revenue:</b>	<b>\$72,664</b>	<b>\$1,221,950</b>	<b>\$77,550</b>	<b>\$1,297,867</b>

## Explanation of Revenues

Medicaid/Medicare Eligibility receives funding from the Division of Medical Assistance Programs (DMAP) which provides compensation to eligible Federally Qualified Health Centers (FQHCs) for outreach activities. Compensation is related to the receipt and initial processing of applications for individuals, including low-income pregnant women and children, to apply for Medicaid at out station locations other than state offices. DMAP provides for compensation through calculating a rate that is equal to 100% of allowable, specific direct costs according to OAR 410-147-0400. The costs are based on actual expenses from FY2010 and DMAP disallows the cost of supervision, office support and interpretation services. The rate for FY2012 is \$7.78 per visit and the medical fee revenue is based on 166,821 visits.

Medical fees: \$1,297,867  
 County general fund: \$372,295

## Significant Program Changes

**Last year this program was:** #40016, Medicaid/Medicare Eligibility

Backfill has been noted for this program because of the small increase in general fund for FY12. Because of the costs excluded from the State reimbursement rate and the cap the State has applied to personnel salary and benefits more general fund is needed to maintain this valuable service.

**Lead Agency:** Health Department

**Program Contact:** Susan Kirchoff

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Dental Services provides Multnomah County residents with essential, urgent, routine, and preventive services in clinic settings and school-based programs. The Dental Program works with many community partners, targeting un-served populations, treating nearly 15,000 uninsured children in Multnomah County. The Dental Program is the largest Safety Net provider for vital dental care in Multnomah County. We provide unique child based services to uninsured and underinsured and focus on access for pregnant women due to the link with early childhood cavity prevention, using evidence based practice guidelines. The Dental Services program is supported in part by the MultiCare Dental plan, one of several dental contractor organizations that serve patients in the tri-county area under the Oregon Health Plan. MultiCare Dental is funded entirely by OHP revenue and most members receive their dental care from Multnomah County Dental Clinics along with two other partner Health Clinics in the Tri-County area.

**Program Description**

The Dental program has four distinct service components. Four dental clinics provide comprehensive dental treatment for Medicaid (Oregon Health Plan) and uninsured patients. The clinics specifically focus on outreach to uninsured patients with chronic health conditions seeking care at primary care sites. The School and Community Dental program provides dental education, fluoride, and dental sealant services to children in Multnomah County schools and provides outreach, education, and dental treatment specifically to pregnant women and children 0-24 months. Recent research indicated that dental hygiene services provided during pregnancy decreases preterm delivery and improves infant health outcomes. For uninsured Multnomah County residents with critical, urgent or specialty dental needs the Dental Access Program (DAP) provides triage and referrals to County dental clinics and private dentists. MultiCare Dental plan enrolls approximately 30,000 Medicaid members which provides access within four dental clinics in Multnomah County to provide dental services to the underserved population. MultiCare Dental works closely with dental clinic operations and School and Community dental supporting such projects as the Baby Day Program and the Pregnant Women's Project. In addition, MultiCare collaborates with various community partners to provide dental services for clients in long-term care facilities and nursing homes. Dental Services is an essential program that provides education, prevention, and dental treatment to Multnomah County's poorest and most vulnerable population.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Billable patient visits	52,553	55,780	57,776	62,102
Outcome	Percentage preventive services for children 0-15 ever enrolled in plan.	54.9%	51.0%	60.0%	60.0%
Quality	% of patients who would "strongly agree" to recommend clinic to friends/family	64.0%	80.0%	64.0%	70.0%
Outcome	Number of CAWEM and uninsured pregnant women who received dental services	760	950	708	750

**Performance Measure - Description**

**Output:** Billable patient visits-The number of patient visits measures access to dental services within the County clinics and the School Community Dental Program. The intent is to increase access to care for both Medicaid and uninsured clients.  
**Outcome:** Percentage of preventive services for children age 0-15 enrolled in MultiCare who receive preventive services. This is an important Public Health measure.  
**Quality:** % of patients who would strongly agree-clinic focus group formed to address specific identified issues.  
**Outcome:** number of CAWEM and uninsured pregnant women who received dental services-oral health plays a significant role in the health of pregnant women and newborns.

## Legal/Contractual Obligation

Dental services are a requirement of the Bureau of Primary Health Care 330 Grant.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$9,631,568	\$0	\$10,014,721
Contracts	\$0	\$3,245,769	\$7,410	\$3,143,990
Materials & Supplies	\$0	\$785,953	\$32,857	\$981,578
Internal Services	\$100,544	\$2,510,160	\$59,213	\$2,654,253
Capital Outlay	\$0	\$10,000	\$0	\$0
<b>Total GF/non-GF:</b>	<b>\$100,544</b>	<b>\$16,183,450</b>	<b>\$99,480</b>	<b>\$16,794,542</b>
<b>Program Total:</b>	<b>\$16,283,994</b>		<b>\$16,894,022</b>	
Program FTE	0.00	92.95	0.00	97.21
<b>Program Revenues</b>				
Indirect for dep't Admin	\$962,357	\$0	\$1,003,996	\$0
Fees, Permits & Charges	\$0	\$303,854	\$0	\$282,930
Intergovernmental	\$0	\$15,872,096	\$0	\$16,511,612
Other / Miscellaneous	\$0	\$7,500	\$0	\$0
<b>Total Revenue:</b>	<b>\$962,357</b>	<b>\$16,183,450</b>	<b>\$1,003,996</b>	<b>\$16,794,542</b>

## Explanation of Revenues

The primary source of revenue is Medicaid funds; a combination of capitation and FQHC wrap around payments. Additional revenue is received from the Primary Care 330 Grant, and patient fees. The county general fund pays for the community and school oral health program and care for the uninsured.

Medicaid fees: \$16,006,112  
 Primary Care 330 grant: \$505,500  
 Patient fees: \$282,930  
 County general fund: \$99,480

## Significant Program Changes

**Last year this program was: #40017, Dental Services**

Dental has experienced increases in patient volume, in part due to the opening of the Rockwood Health Clinic and increased demand at the Northeast Health Center. In order to respond to this increased demand, Dental has increased by \$610,028 and 4.26 FTE.

**Lead Agency:** Health Department

**Program Contact:** David Brown

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

The Women, Infants and Children Program (WIC) serves lower-income pregnant, post-partum and breastfeeding women, infants and children under age five who have health or nutrition risks. WIC sees every participant at least four times per year to provide individual growth and health assessments, education on nutrition and physical activity, nutritious foods purchased with WIC vouchers, breastfeeding education and support and referrals to other preventive health and support services. Other support services include prenatal and other medical care, immunizations, Head Start, housing and day care assistance, social services, etc. The recent change to a centrally managed program allows for increased participation (over 19,206 active clients compared with 17,298 this time last year) and a significant increase in State allocated funding. WIC served over 31,000 clients in 2010. This included over 35% of all pregnant women in Multnomah County. WIC strengthens the economy which leverages federal funds to pay for almost 78% of the program's costs. The end result is WIC brought in over \$12 million dollars to local grocery stores and, through the Farm Direct Nutrition Program (Farmer's Market), over \$70,000 to local farmers. WIC is one of the few health promotion programs the federal government has sponsored. It is estimated that for every \$1 spent on WIC over \$3 is saved in Medicaid expenses. Programs like Oral Health, Lead Screening, Head Start and others are realizing the tremendous access WIC provides to the community. Since it is a federal mandate that WIC provide referral services to other valuable community programs, for the individual client, WIC becomes the web that connects all the programs together for easy access – seamless service.

**Program Description**

The WIC Program's mandate is to provide food, nutrition education, growth monitoring and support services to our most vulnerable population – low income pregnant, breastfeeding women, infants and children up to five years of age. The potential for WIC's success is based on the premise that access to food is of primary concern for low-income families. With the availability of nutritious foods offered each month, families in need seek out the program. To receive the food vouchers all participants must be certified on the program which includes weighing and measuring every 6 months as well as hemoglobin screenings. Clients are counseled by registered dietitians and nutrition assistants on the current best practices for diet during pregnancy, lactation, infancy and early childhood based on the American Dietetic Association and the National WIC Association's recommendations. For high risk pregnancies, children with special needs and breastfeeding complications individual counseling is provided by registered dietitians. In between certifications, clients are required to attend additional nutrition education classes on specific topics relevant to their individual needs. Nutrition classes include infant and child nutrition, nutrition during pregnancy, breastfeeding, low-fat cooking, increasing fruits, vegetables and whole grains in the diet. In all, over 90 nutrition education classes are taught each month. Poor nutrition during the first three years can affect brain development resulting in lowered academic achievement, reduced immune function, greater incidence of obesity, diabetes, etc. Research demonstrates that families on WIC are in overall better health, have less dental related Medicaid costs, have less underweight infants and demonstrate a lower prevalence of anemia than low-income children not on WIC. Four and five-year-olds whose mothers participated in WIC during pregnancy have better vocabulary test scores than those that didn't receive WIC benefits. WIC positively influences the nutrient intakes of children, dramatically improves Healthy Eating index scores for the household, reduces the risk of child abuse or neglect and WIC participation is associated with increased use of preventative care and improved health status of children. This program offer relates to the Climate Action Plan for work that supports and promotes the purchase of locally grown, low carbon, sustainable foods purchased at farmer's markets, and as well as providing insight into the acute vulnerabilities faced by this population. CAP specific items include: 14-1, 15-4, 16-1.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Average number of clients served each month	18,793	19,373	19,206	20,000
Outcome	% of mothers initiating breastfeeding on WIC	87.0%	89.0%	89.7%	91.0%
Outcome	Show rate for WIC nutrition education follow-up	70.0%	72.0%	66.0%	70.0%

**Performance Measure - Description**

Output: Average number of clients served each month measures the average number of clients receiving WIC food vouchers. Outcome: % of mothers who initiated breast feeding after delivery. Data Source - WIC TWIST system. Outcome: return for education required each six months to continue participation.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$924,532	\$2,412,524	\$912,771	\$2,552,138
Contracts	\$101,990	\$5,995	\$0	\$0
Materials & Supplies	\$40,811	\$47,072	\$74,781	\$26,500
Internal Services	\$419,652	\$378,875	\$262,084	\$559,339
<b>Total GF/non-GF:</b>	<b>\$1,486,985</b>	<b>\$2,844,466</b>	<b>\$1,249,636</b>	<b>\$3,137,977</b>
<b>Program Total:</b>	<b>\$4,331,451</b>		<b>\$4,387,613</b>	
Program FTE	3.53	32.61	6.25	34.10
<b>Program Revenues</b>				
Indirect for dep't Admin	\$169,148	\$0	\$187,501	\$0
Intergovernmental	\$0	\$2,844,466	\$0	\$3,137,977
<b>Total Revenue:</b>	<b>\$169,148</b>	<b>\$2,844,466</b>	<b>\$187,501</b>	<b>\$3,137,977</b>

## Explanation of Revenues

Women, Infants and Children program's revenue is federal funds included in the intergovernmental revenue agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services. WIC is also funded with county general fund. The WIC Program has seen a significant increase in pregnant women requiring WIC services. County general funds assist the WIC Program in meeting the Federal/State funding requirement of scheduling new pregnant women within 10 days of application to the program.

WIC: \$2,916,178

WIC Breastfeeding/Peer Counselors grant: \$221,799

County general fund: \$1,249,636

## Significant Program Changes

**Last year this program was: #40018, Women, Infants and Children (WIC)**

As a result of the number of clients enrolled in the MCHD WIC program and the addition of the Breastfeeding Peer Counseling grant, WIC has seen a net revenue increase of \$56,162, along with a net reduction in expenses allowing for a personnel increase of 4.21 FTE allowing the program to serve more clients.

**Lead Agency:** Health Department

**Program Contact:** THIELE Margaret

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The North Portland Health Center provides comprehensive, culturally appropriate primary care and enabling services to vulnerable citizens who are uninsured or underinsured and otherwise might not have access to healthcare.

**Program Description**

North Portland Health Center primary care services are designed to be a patient centered medical home. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. North Portland Health Center serves a population of 70% who are below 100% of the Federal Poverty level, 25% are uninsured, 65% are Medicaid and 7% are Medicare. North Portland Health Center plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of annual client visits	17,026	18,593	17,604	18,858
Outcome	% of children who are up to date on immunizations at 35 months of age	61.0%	90.0%	61.0%	75.0%
Efficiency	Number of days for a new patient appointment	9	7	5	5
Quality	% of patients who would "strongly agree" to recommend clinic to friends/family	64.0%	80.0%	74.0%	80.0%

**Performance Measure - Description**

**Output:** Total number of client visits.

**Outcome:** % of children who are immunized by 35 months: Immunizations are vitally important in preventing infectious diseases, many of which can occur in the first year of life.

**Efficiency:** # of days for new patient appointment: Measures effectiveness of timely availability for underserved Multnomah County residents to access health care services.

**Quality:** Client satisfaction survey question which asks if they would recommend this clinic to family/friends. Performance Measures Variance Explanation: # of children who are up to date on immunizations--current improvement efforts across Primary Care clinics is underway to improve rate of immunization % of patients who would strongly agree--clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

North Portland Health Clinic complies with the Bureau of Primary Health Care (BPHC) grant, JCAHO accreditations requirements and CareOregon contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$2,875,177	\$0	\$2,844,953
Contracts	\$0	\$109,611	\$0	\$76,060
Materials & Supplies	\$0	\$141,060	\$0	\$179,083
Internal Services	\$204,138	\$906,159	\$99,197	\$763,981
<b>Total GF/non-GF:</b>	<b>\$204,138</b>	<b>\$4,032,007</b>	<b>\$99,197</b>	<b>\$3,864,077</b>
<b>Program Total:</b>	<b>\$4,236,145</b>		<b>\$3,963,274</b>	
Program FTE	0.00	27.60	0.00	27.80
Program Revenues				
Indirect for dep't Admin	\$240,004	\$0	\$230,888	\$0
Fees, Permits & Charges	\$4,000	\$124,244	\$4,000	\$119,246
Intergovernmental	\$0	\$3,907,763	\$0	\$3,744,831
<b>Total Revenue:</b>	<b>\$244,004</b>	<b>\$4,032,007</b>	<b>\$234,888</b>	<b>\$3,864,077</b>

## Explanation of Revenues

North Portland Health Clinic is supported by federal BPHC grant, state family planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients. In addition, the program collects \$4,000 general fund income from property rental.

Medical fees: \$3,130,450

Federal Primary Care grant: \$639,728

State Family Planning: \$47,676

State Maternal & Child Health: \$46,253

County General Fund: \$99,197

## Significant Program Changes

**Last year this program was:** #40019, North Portland Health Clinic

Less revenue is needed to support current operations of the North Portland Health Clinic because of reductions to building management, data processing services and distribution and postage. The debt service for the building was paid off, data processing was reduced through a more accurate counting of computers and projected distribution/postage cost were lower. There is a net increase of .20 FTE for clinic operations.



**Lead Agency:** Health Department

**Program Contact:** SAUM Robert E

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Northeast Health Center (NEHC), provides comprehensive primary care and behavioral health services to the diverse, poor, underserved residents in NE Portland. The NE clinic was strategically placed to provide culturally competent care to a population that otherwise may not have access to medical care.

**Program Description**

Northeast Health Center primary care services are designed to be a patient centered medical home. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. Northeast Health Center serves a racially diverse population of which 75% are below 100% of the Federal Poverty level, 25% are uninsured, 70% are Medicaid recipients and 4% are Medicare. Northeast Health Center plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of annual client visits	20,705	21,582	22,916	25,284
Outcome	Percentage of children who are up to date on immunizations at 35 months of age	67.0%	90.0%	79.0%	85.0%
Efficiency	Number of days for a new patient appointment	6	6	6	5
Quality	% of patients who would "strongly agree" to recommend clinic to friends/family	50.0%	80.0%	56.0%	70.0%

**Performance Measure - Description**

Output: Total number of client visits. Outcome: % of children who are immunized by 35 months: Immunizations are vitally important in preventing infectious diseases, many of which can occur in the first year of life. Efficiency: # of days for new patient appointment: Measures effectiveness of timely availability for underserved Multnomah County residents to access health care services. Quality: Client satisfaction survey question which asks if they would recommend this clinic to family/friends. Performance Measure variance # of children who are up to date on immunizations--current improvement efforts across Primary Care clinics is underway to improve rate of immunization % of patients who would strongly agree--clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

The NEHC complies with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CareOregon contractual obligations. The NEHC contracts with CARES Northwest at Legacy Emanuel Hospital to provide two days per week of medical assessment services for children suspected to be victims of child abuse.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$3,333,763	\$0	\$4,070,354
Contracts	\$0	\$191,377	\$0	\$141,526
Materials & Supplies	\$0	\$673,894	\$0	\$206,314
Internal Services	\$70,747	\$1,040,840	\$130,443	\$928,703
Total GF/non-GF:	<b>\$70,747</b>	<b>\$5,239,874</b>	<b>\$130,443</b>	<b>\$5,346,897</b>
Program Total:	<b>\$5,310,621</b>		<b>\$5,477,340</b>	
Program FTE	0.00	31.77	0.00	39.30
Program Revenues				
Indirect for dep't Admin	\$279,778	\$0	\$319,518	\$0
Fees, Permits & Charges	\$0	\$203,343	\$0	\$221,901
Intergovernmental	\$0	\$5,036,531	\$0	\$5,124,996
<b>Total Revenue:</b>	<b>\$279,778</b>	<b>\$5,239,874</b>	<b>\$319,518</b>	<b>\$5,346,897</b>

## Explanation of Revenues

Northeast Health Clinic is supported by federal BPHC grant, state family planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$4,560,732  
 Federal Primary Care grant: \$692,581  
 State Family Planning: \$47,476  
 State Maternal & Child Health: \$46,098  
 County General Fund: \$130,443

## Significant Program Changes

**Last year this program was: #40020, Northeast Health Clinic**

The Northeast Health Clinic has a net increase of \$166,719 in revenue for FY2012. A new provider team was added to the clinic in FY2011 budget modification and additional provider productivity has increased medical visit revenue by \$672,864. Offsetting the additional revenue was the end of the ARRA grant funds for Capital improvement Project which reduced revenue and supplies expenditures by \$535,000. The increase in FTE is from the new provider team and changes in FTE between job classes to align with client services.

**Lead Agency:** Health Department

**Program Contact:** Marilyn Boss

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Westside Health Center (WSHC) and its outreach programs are the primary hub for Multnomah County's (MC) homeless, providing comprehensive medical, behavioral and addictions (A&D) case management, access to medications and social services. The WSHC outreach clinic at St. Francis Dining Hall engages and serves the most disenfranchised homeless.

**Program Description**

WSHC is the anchor of the Health Care for the Homeless Program. 65% of Westside Clients are homeless. WSHC serves the County's most medically complex clients, providing significant mental health and addictions care. Many clients have dual diagnoses, such as bipolar/schizophrenia, drug/alcohol abuse and serious medical conditions. Many have hepatitis C, MRSA or diabetes. Westside Health Center plays a key role in stopping the cycle of incarceration by providing healthcare access to over 200 chronically mentally ill clients from corrections. Services are provided in collaboration with community mental health, corrections, drug treatment and shelters to provide access to their neediest homeless clients. Case management includes coordination with housing providers to increase supportive housing units and works to meet the goals of the 10 yr. Plan to End Homelessness. Last year, WSHC and outreach programs helped 1,500 severely mentally ill clients access psychiatric medications, who may otherwise remain untreated on the streets, posing a potentially greater risk to the general population.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of client visits	23,103	26,573	21,604	26,248
Outcome	Patients will be screened for depression on an annual basis	32.0%	90.0%	75.0%	90.0%
Quality	Number of days for a new patient appointment	4	4	8	5
Quality	% of Patients who would "strongly agree" to recommend clinic to friends/family	53.0%	80.0%	51.0%	70.0%

**Performance Measure - Description**

Performance Measure Variance Explanation: Number of client visits: There has been a provider vacancy which impacted access and decreased number of available appointments. % of patients who would strongly agree to recommend to friends and family: Clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

WSHC complies with the Bureau of Primary Health Care grant, JCAHO accreditations requirements and CareOregon contractual obligations. Federally Qualified Health Center (FQHC) designation requires: •Provision of comprehensive primary care and supportive care services. •Services be available to all regardless of ability to pay.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$3,907,121	\$0	\$3,809,951
Contracts	\$0	\$596,988	\$0	\$494,032
Materials & Supplies	\$0	\$724,616	\$59,496	\$155,345
Internal Services	\$295,789	\$802,998	\$238,075	\$757,095
<b>Total GF/non-GF:</b>	<b>\$295,789</b>	<b>\$6,031,723</b>	<b>\$297,571</b>	<b>\$5,216,423</b>
<b>Program Total:</b>	<b>\$6,327,512</b>		<b>\$5,513,994</b>	
Program FTE	0.00	36.30	0.00	35.50
<b>Program Revenues</b>				
Indirect for dep't Admin	\$324,130	\$0	\$311,735	\$0
Fees, Permits & Charges	\$0	\$84,408	\$0	\$69,488
Intergovernmental	\$0	\$5,947,315	\$0	\$5,146,935
<b>Total Revenue:</b>	<b>\$324,130</b>	<b>\$6,031,723</b>	<b>\$311,735</b>	<b>\$5,216,423</b>

## Explanation of Revenues

Westside Health Clinic is supported by federal BPHC grant as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and to serve uninsured patients.

Medical fees: \$2,969,625  
 Federal Primary Care grant: \$1,085,148  
 Federal Primary Care Homeless grant: \$1,161,650  
 County general fund: \$297,571

## Significant Program Changes

**Last year this program was:** #40021, Westside Health Clinic

Due to the completion of the ARRA: CIP grant and incremental adjustments to realign medical provider teams so that they are consistent within the department and responsive to the needs of the community they serve, the Westside Health Clinic is reduced by \$813,518 and 0.80 FTE.

**Lead Agency:** Health Department

**Program Contact:** COCKRELL Deborah S

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Mid-County Health Center (MCHC) serves clients in the poorest and most culturally diverse area of Multnomah County. MCHC provides vital health services for patients who, even if insured, would remain isolated from traditional forms of medical care because of where they live, the language they speak and their higher level of complex healthcare needs. With its Refugee Program and culturally competent staff, MCHC is an important health care safety net for thousands of uninsured and underinsured members of the community.

**Program Description**

MCHC provides culturally competent, comprehensive primary care, preventive health and enabling services such as transportation, translation, case management and health education which address the needs of the whole person. Care that addresses their beliefs and culture is more likely to succeed in improving and maintaining their health. MCHC is tightly linked with refugee resettlement agencies (i.e., SOAR, IRCO, Catholic Charities). About 80% of all clients are or were refugees (Russia, Somalia, Sudan, Latin America, Vietnam, etc.). More than 80% of the MCHC staff speak a second language, many were refugees themselves. Sixty-eight percent of clients have incomes at or below 100% of FPL, while 99.1% are at or below 200% of FPL. MCHC services are designed specifically to prevent people from needing more costly and often less appropriate care. The refugee population often receive no preventative care at home, leading to a disproportionately high rate of serious medical conditions (ie. diabetes, hypertension, heart disease, cancer). Most client families have three or more children; some 10 or 11 - often with serious health problems (ie. asthma, diabetes, poor nutrition, no dental care, posttraumatic stress, etc.) which impact their schooling and development. This program helps them with pediatric and pre-natal services as well as referrals. Many children receive their first complete set of vaccines at MCHC.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of annual client visits	36,914	47,956	45,594	47,418
Outcome	Percentage of children who are up to date on immunizations at 35 months of age	53.0%	90.0%	59.0%	75.0%
Efficiency	Number of days for a new patient appointment	9	7	5	5
Quality	% of patients who would "strongly agree" to recommend clinic to friends/family	53.0%	80.0%	70.0%	80.0%

**Performance Measure - Description**

Performance Measure Variance Explanation: # of children who are up to date on immunizations--progress towards goal achieved current improvement efforts across Primary Care clinics is underway to improve rate of immunization % of patients who would strongly agree--clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

MCHC complies with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CareOregon contractual obligations.

Federally Qualified Health Center (FQHC) designation requires: •Provision of comprehensive primary care and supportive care services. •Services be available to all regardless of ability to pay.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$7,094,942	\$0	\$7,340,001
Contracts	\$0	\$337,313	\$0	\$302,707
Materials & Supplies	\$0	\$380,722	\$0	\$553,169
Internal Services	\$80,398	\$1,891,908	\$178,326	\$1,767,327
<b>Total GF/non-GF:</b>	<b>\$80,398</b>	<b>\$9,704,885</b>	<b>\$178,326</b>	<b>\$9,963,204</b>
<b>Program Total:</b>	<b>\$9,785,283</b>		<b>\$10,141,530</b>	
Program FTE	0.00	73.20	0.00	70.50
Program Revenues				
Indirect for dep't Admin	\$577,105	\$0	\$595,321	\$0
Fees, Permits & Charges	\$0	\$258,488	\$0	\$0
Intergovernmental	\$0	\$9,446,397	\$0	\$9,963,204
<b>Total Revenue:</b>	<b>\$577,105</b>	<b>\$9,704,885</b>	<b>\$595,321</b>	<b>\$9,963,204</b>

## Explanation of Revenues

Mid County Health Clinic is supported by federal BPHC grant, state family planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$8,806,498

State Refugee Screening grant: \$487,255

Federal Primary Care grant: 544,344

State Maternal & Child Health grant: \$61,626

State Family Planning: \$63,481

County general fund: \$178,326

## Significant Program Changes

**Last year this program was:** #40022, Mid County Health Clinic

Due to the realignment of resources necessary upon completion of the ARRA: IDS grant and additional grant funding to support refugee screening, the Mid-County Health clinic is increased by \$356,247. Because of incremental adjustments to realign medical provider teams so that they are consistent within the department and responsive to the needs of the community they serve, the Mid-County Health Clinic is reduced by 2.70 FTE and no services are reduced.

**Lead Agency:** Health Department

**Program Contact:** MORROW Marcia M

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The East County Health Center (EHC) provides comprehensive primary care and behavioral health services to the diverse, poor, underserved residents in East Multnomah County. The clinic serves seasonal migrant workers, pregnant women, infants, children that reside in East Multnomah County who, even if insured, would remain isolated from traditional forms of medical care because of where they live, the language they speak and their higher level of complex healthcare needs.

**Program Description**

East County Health Center primary care services are designed to be a patient centered medical home. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. East County Health Center serves a culturally diverse population (59% Latino) of which 80% who are below 100% of the Federal Poverty Level, 20% are uninsured, 75% are Medicaid and 3% are Medicare. East County Health Center plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of annual client visits	31,581	41,735	38,808	42,905
Outcome	Percentage of children who are up to date on immunizations at 35 months of age	70.0%	90.0%	75.0%	85.0%
Efficiency	Number of days for a new patient appointment	8	6	7	5
Quality	% of patients who would "strongly agree" to recommend clinic to friends/family	70.0%	80.0%	57.0%	70.0%

**Performance Measure - Description**

Output: Total number of clients served Outcome: Percentage of children who are immunized by 35 months: Immunizations are vitally important in preventing infectious diseases, many of which can occur in the first year of life. Efficiency: Number of days for new patient appointment: Measures effectiveness of timely availability for underserved Multnomah County residents to access healthcare services. Performance Measure variance Explanation: # of children who are up to date on immunizations--Improvement efforts across Primary Care clinics are underway to improve rate of immunization % of patients who would strongly agree--clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

The ECHC complies with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CareOregon contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$5,789,673	\$0	\$5,964,572
Contracts	\$0	\$329,006	\$0	\$237,036
Materials & Supplies	\$0	\$251,988	\$67,673	\$257,260
Internal Services	\$90,002	\$1,717,676	\$39,905	\$1,766,497
Total GF/non-GF:	<b>\$90,002</b>	<b>\$8,088,343</b>	<b>\$107,578</b>	<b>\$8,225,365</b>
Program Total:	<b>\$8,178,345</b>		<b>\$8,332,943</b>	
Program FTE	0.00	57.65	0.00	57.40
<b>Program Revenues</b>				
Indirect for dep't Admin	\$480,977	\$0	\$491,715	\$0
Fees, Permits & Charges	\$0	\$238,548	\$0	\$231,204
Intergovernmental	\$0	\$7,849,795	\$0	\$7,994,161
<b>Total Revenue:</b>	<b>\$480,977</b>	<b>\$8,088,343</b>	<b>\$491,715</b>	<b>\$8,225,365</b>

## Explanation of Revenues

East County Health Clinic is supported by federal BPHC grant, state family planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$8,027,627  
 Federal Primary Care grant: \$71,646  
 State Maternal & Child Health grant: \$62,111  
 State Family Planning: \$63,981  
 County general fund: \$107,578

## Significant Program Changes

Last year this program was: #40023, East County Health Clinic



**Lead Agency:** Health Department

**Program Contact:** Susan Kirchoff

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The School-Based Health Center program provides access to comprehensive preventive, primary, and mental healthcare for Multnomah County school-aged youth to keep them healthy and ready to learn. Without this safety net many school aged youth would not receive necessary health care. The 13 School-Based and School-Linked sites provide critical points of access to health care regardless of insurance status. SBHC's contribute to learning readiness through optimizing the learning environment by linking health and education for student success in school and life. This work is achieved through partnerships with schools, families, healthcare providers and community agencies.

**Program Description**

The School-Based Health Center program operates 13 fully equipped medical clinics. Twelve clinics are located in schools and one clinic is school linked. This program assures access to care by providing service ties beyond regular school times, with multiple sites open during the summer and school breaks to ensure continuity of care. Staffing includes a Nurse Practitioner, Registered nurse, medical support staff and an office assistant. Services include chronic, acute and preventive healthcare; age appropriate reproductive health; exams, risk assessments, prescriptions, immunizations, fitness and nutrition education/counseling and referrals. This comprehensive approach enables early identification and intervention, thereby reducing risk behaviors. Program locations are geographically diverse and all MC school aged youth are eligible to receive services (attending other schools, drop-outs, homeless, detention). The program strives to ensure that basic physical and behavioral needs of youth are met to help them attend, participate and remain in school. Healthcare for school aged youth is a basic need.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of patients with three or more visits with a risk assessment in the last year	0.0%	75.0%	73.0%	75.0%
Outcome	% of patients with persistent asthma prescribed appropriate medications	0.0%	80.0%	82.0%	85.0%
Outcome	% of patients who would "strongly agree" to recommend to family and friends	0.0%	80.0%	68.0%	80.0%

**Performance Measure - Description**

New program measures were chosen for FY11 to better reflect work related to our patient centered medical home initiative (Building Better Care). Key areas of focus include:

- integration of effective methods for disease management,
- reduction in barriers to access to care
- services are organized to be "patient centered"

Conducting risk assessments leads to achieving the program goal of early identification and timely intervention for risk reduction and health promotion.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$1,251,701	\$2,394,765	\$1,400,409	\$2,257,099
Contracts	\$4,755	\$36,416	\$25,035	\$13,806
Materials & Supplies	\$45,693	\$583,270	\$81,830	\$422,431
Internal Services	\$565,970	\$323,152	\$240,696	\$636,932
<b>Total GF/non-GF:</b>	<b>\$1,868,119</b>	<b>\$3,337,603</b>	<b>\$1,747,970</b>	<b>\$3,330,268</b>
<b>Program Total:</b>	<b>\$5,205,722</b>		<b>\$5,078,238</b>	
Program FTE	10.51	25.25	14.03	20.95
<b>Program Revenues</b>				
Indirect for dep't Admin	\$179,584	\$0	\$199,020	\$0
Fees, Permits & Charges	\$0	\$194,358	\$0	\$217,148
Intergovernmental	\$0	\$3,141,610	\$0	\$3,113,120
<b>Total Revenue:</b>	<b>\$179,584</b>	<b>\$3,335,968</b>	<b>\$199,020</b>	<b>\$3,330,268</b>

## Explanation of Revenues

School Based Health Centers are supported by federal BPHC grant, state family planning grant, State School Based Health Centers grant through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$2,545,433  
 State School Based Health Centers grant: \$492,000  
 Primary Care grant: \$212,835  
 State Family Planning grant: \$80,000  
 County general fund: \$1,747,970

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40024, School Based Health Centers

In FY11 the Lincoln Park site was moved to David Douglas. Portland Public Schools (PPS) is scheduled to close Marshall High School in June 2011 and the School Based Health Clinic located at Marshall will close as well. ICS is working with PPS to relocate the clinic to Franklin High School. Revenue, expenditures, and staff for Franklin SBHC are included in the FY12 budget.

**Lead Agency:** Health Department

**Program Contact:** NORMAN Kathy M

**Program Offer Type:** Existing Operating

**Related Programs:**

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

**Executive Summary**

The Adolescent Health Program implements community and school-based parent and youth services, teacher training, and policy development designed to address key health disparities among adolescents that include: teen pregnancy, educational attainment and other health concerns.

**Program Description**

Teen pregnancy impacts every racial/ethnic group and is one of the primary health indicators for a community. The overall teen pregnancy rate in Multnomah County is higher than the state's rate and when analyzed by race/ethnicity, is significantly higher among Latinas, American Indians, and African Americans when compared to the County as a whole. A recent study of drop out rates in Oregon showed that Multnomah County high schools have the worst graduation rate in the state with dropout rates ranging from 43% to 47%. Teen pregnancy is a factor contributing to dropout rates.

This program works to reduce teen pregnancy and delay the onset of sexual activity and other high risk adolescent behaviors that impact educational attainment. All program components stress prevention and use culturally specific, evidence based, population focused approaches. Component 1) Community Services: Based on the theoretical framework of positive youth development, the program utilizes two best practice models, "Parent-Child Connectedness" & "Lets Talk" to provide educational sessions that increase communication between youth, parents and other supportive adults within the community. While there will be a strong focus on teen pregnancy prevention, healthy relationships, and sexual health (including LGBTQ issues), other topic areas such as violence prevention, bullying, mental health, nutrition/physical activity may be included in programming depending on the community need. Component 2) Teacher Training: Due to ongoing budget deficits, Multnomah County middle schools have eliminated many health teachers and reassigned health education to other areas. The program will support school districts in providing evidence-based comprehensive sexuality education through implementing a teacher training course designed to build classroom teachers skills and abilities to teach sexuality education. Trained teachers will receive CEU credits, resource development and ongoing support for district to meet the Oregon statute on Human Sexuality Education. Component 3) Public Health Policy/Advocacy: The program will work in collaboration with school districts and community organizations to develop policies that strengthen sexual health education and address other prominent issues that are identified through participatory community engagement practices.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of participants in educational sessions/training	0	0	0	1,200
Outcome	Percent of participants demonstrating increased knowledge	0.0%	0.0%	0.0%	80.0%
Quality	% of participants utilizing skills to increase parent to youth communication	0.0%	0.0%	0.0%	80.0%

**Performance Measure - Description**

 **Measure Changed**

The performance measures are designed to track efforts to reduce teen pregnancy and delay the onset of sexual activity, and other high risk adolescent behaviors that impact educational attainment. 1) Skill and capacity building will be measured through tracking the number of teachers, community members, and internal partners that successfully complete training and implement the curricula. 2) The percentage of program participants that demonstrate increased knowledge. 3) The percentage of program participants that plan to utilize information, skills, and abilities gained in the program to increase the connection between parents, youth and other supportive adults.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$78,345	\$628,785	\$241,583	\$20,442
Contracts	\$0	\$46,650	\$0	\$0
Materials & Supplies	\$655	\$5,016	\$26,122	\$703
Internal Services	\$0	\$144,292	\$54,465	\$1,914
<b>Total GF/non-GF:</b>	<b>\$79,000</b>	<b>\$824,743</b>	<b>\$322,170</b>	<b>\$23,059</b>
<b>Program Total:</b>	<b>\$903,743</b>		<b>\$345,229</b>	
Program FTE	1.00	7.62	3.00	0.06
<b>Program Revenues</b>				
Indirect for dep't Admin	\$49,044	\$0	\$1,381	\$0
Intergovernmental	\$0	\$824,743	\$0	\$23,059
<b>Total Revenue:</b>	<b>\$49,044</b>	<b>\$824,743</b>	<b>\$1,381</b>	<b>\$23,059</b>

## Explanation of Revenues

Adolescent Health Promotion is supported by \$322,170 in county general fund. In FY2011, the program's adopted budget estimated that the federal Community Based Abstinence grant would be renewed. However, Multnomah County was not successful in a competitive grant application process. In addition the Northwest Health Foundation grant expired. For FY2012 the scope of the program was changed and the general fund partially backfills expired grant funds.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40025, Adolescent Health Promotion

Last year the program had a grant to address teen pregnancy prevention in Multnomah County middle schools and community organizations. The grant ended in September 2010. The program has changed the service model to continue supporting Multnomah County middle schools and community organizations through capacity building, training, targeted community interventions, resource and policy development at a lower cost. As a result of these changes, general fund revenue has increased by \$243,170 while grant support has decreased by \$824,743 and 5.62 FTE.

**Lead Agency:** Health Department

**Program Contact:** Susan Kirchoff

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

La Clinica de Buena Salud (The Clinic of Good Health), provides comprehensive primary care and behavioral health services to the diverse, poor, underserved residents in the NE Portland Cully Neighborhood. La Clinica was strategically placed, in partnership with the local community, to provide culturally competent care to a population that otherwise may not have access to medical care.

**Program Description**

La Clinica provides culturally competent, comprehensive primary care, preventive health and enabling services such as transportation, translation, case management and health education which address the needs of the whole person. Eighty percent are at or below 100% Federal Poverty Level (FLP). La Clinica health and social services team includes: primary, preventive and urgent health care behavioral health services, case management and resource referral. Although La Clinica was initially intended to primarily serve the Latino community, the program has expanded and responded to the area's changing demographics which include culturally-specific services for Somali immigrants and refugees, and Russian speaking families in the Cully neighborhood and beyond. La Clinica is the County's anchor health care program for homeless children and families. This program supports many of the basic living needs priorities. The offer links closely with the School-aged Policy and Early Childhood Frameworks as well as the Health Equity Initiative. Of those receiving health services, 32% have no insurance. The program initiates consultation and coordination efforts with other providers to build cultural competency among other service providers and lead efforts to solve community problems.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of annual client visits	0	6,823	0	0
Outcome	% of children who are up to date on immunizations at 35 months of age	0.0%	90.0%	0.0%	0.0%
Efficiency	Number of days for a new patient appointment	0	4	0	0
Quality	% of Patients who would "strongly agree" to recommend clinic to friends/family	0.0%	80.0%	0.0%	0.0%

**Performance Measure - Description**

Output: Total number of client visits Outcome: % of children who are immunized by 35 months: Immunizations are vitally important in preventing infectious diseases, many of which can occur in the first year of life. Efficiency: # of days for new patient appointment: Measures effectiveness of timely availability for underserved Multnomah County residents to access health care services. Quality: Client satisfaction survey question which asks if they would recommend this clinic to family/friends.

Performance Measure variance Explanation: # of children who are up to date on immunizations--Improvement efforts across Primary Care clinics are underway to improve rate of immunization % of Patients who would strongly agree--clinic focus group formed to address specific identified issues.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$1,200,301	\$0	\$1,155,227
Contracts	\$0	\$61,146	\$0	\$37,167
Materials & Supplies	\$0	\$75,099	\$0	\$91,529
Internal Services	\$80,982	\$302,626	\$99,408	\$320,978
<b>Total GF/non-GF:</b>	<b>\$80,982</b>	<b>\$1,639,172</b>	<b>\$99,408</b>	<b>\$1,604,901</b>
<b>Program Total:</b>	<b>\$1,720,154</b>		<b>\$1,704,309</b>	
Program FTE	0.00	11.40	0.00	10.90
<b>Program Revenues</b>				
Indirect for dep't Admin	\$97,475	\$0	\$95,897	\$0
Fees, Permits & Charges	\$0	\$60,700	\$0	\$46,736
Intergovernmental	\$0	\$1,578,472	\$0	\$1,558,165
<b>Total Revenue:</b>	<b>\$97,475</b>	<b>\$1,639,172</b>	<b>\$95,897</b>	<b>\$1,604,901</b>

## Explanation of Revenues

La Clinica de la Buena Salud is supported by federal BPHC grant, state Family Planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$1,194,688  
 Federal Primary Care grant: \$116,681  
 Federal Primary Care/Homeless grant: \$256,414  
 State Maternal & Child Health grant: \$18,284  
 State Family Planning: \$18,834  
 County general fund: \$99,408

## Significant Program Changes

Last year this program was: #40026, La Clinica de la Buena Salud

**Lead Agency:** Health Department

**Program Contact:** WILEY Lynne

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Rockwood Health Center provides comprehensive primary care and behavioral health services to the diverse, poor, underserved residents in the East County Rockwood area. The Rockwood clinic was strategically placed to provide culturally competent care to a population that otherwise may not have access to medical care.

**Program Description**

Rockwood Health Center primary care services are designed to be a patient centered medical home. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. Rockwood Health Center plays a significant role in providing safety net medical services to residents in the community. Forty percent of the over 40,000 residents earn less than 200% of the federal poverty level and 20-30% are uninsured. From 2000 to 2007, the number of persons of color in Rockwood increased by 54% (the countywide increase was 27%). Furthermore, 62% of the 7,000 plus Rockwood residents living below 100% of the federal poverty level are persons of color (which is 20% higher than the countywide average) and five of the area's eight census tracts are designated as medically underserved populations in recognition of access issues residents faced.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of new clients served	0	4,400	3,180	3,640
Outcome	Percentage of children who are up to date on immunizations at 35 months of age	0	90	60	85
Quality	% "strongly agree" they would recommend this clinic to friends and family	0.0%	80.0%	64.0%	80.0%

**Performance Measure - Description**

**Output:** # of new clients served--measures success in serving residents not previously receiving services from MCHD (source: EPIC system report).

**Outcome:** Percentage of children who are up to date on immunizations (source: state immunization data).

**Quality:** % strongly agree they would recommend this clinic to friends and family (source: quarterly patient satisfaction survey).

## Legal/Contractual Obligation

The Rockwood Health Center will comply with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CareOregon contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$179,349	\$1,543,919	\$0	\$2,381,376
Contracts	\$20,651	\$129,349	\$0	\$59,635
Materials & Supplies	\$22,897	\$96,939	\$0	\$156,735
Internal Services	\$0	\$380,113	\$0	\$562,379
Total GF/non-GF:	<b>\$222,897</b>	<b>\$2,150,320</b>	<b>\$0</b>	<b>\$3,160,125</b>
Program Total:	<b>\$2,373,217</b>		<b>\$3,160,125</b>	
Program FTE	3.00	14.85	0.00	23.30
<b>Program Revenues</b>				
Indirect for dep't Admin	\$127,870	\$0	\$183,013	\$0
Fees, Permits & Charges	\$0	\$131,160	\$0	\$56,678
Intergovernmental	\$0	\$2,019,160	\$0	\$3,103,447
<b>Total Revenue:</b>	<b>\$127,870</b>	<b>\$2,150,320</b>	<b>\$183,013</b>	<b>\$3,160,125</b>

## Explanation of Revenues

Rockwood Health Clinic is supported by federal BPHC grant, state family planning grant, state funds for maternal & child health services through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical fees: \$2,146,639  
 Federal Primary Care grant: \$226,5691  
 State Maternal & Child Health grant: \$92,054  
 State Family Planning: \$94,822  
 County general fund: \$155,219

## Significant Program Changes

**Last year this program was:** #40029A, Rockwood Health Clinic  
 Last year this program was also 40029B - Rockwood Health Clinic Scaled Offer



**Lead Agency:** Health Department

**Program Contact:** ABDELLATIF Vanetta M

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Clinical Directors ensure that MDs, NPs, PAs, RNs, and LPNs have the necessary training, skills and knowledge to practice competently; patient care adheres to all pertaining regulations; clinical quality improvement (QI) initiatives are effective and appropriate for the communities we serve; and patient care is safe, cost effective, and based on proven best practices.

**Program Description**

Medical services:

1. Oversees initiatives to improve quality, safety, cost effectiveness, and access; develops and implements patient care guidelines, policies, procedures.
2. Recruits, hires, credentials and monitors provider performance; oversees in-house nursing and medical educational programs.
3. Sets and monitors provider and nursing productivity goals.
4. Investigates and remedies untoward clinical incidents and errors.
5. Ensures that patient care meets all rules, regulations and standards set forth by regulatory agencies, contractors, grantors and accrediting agencies.
6. Ensures that administrative practices are consistent with quality patient care.

Directors are accountable for legal conformance, quality and safety of patient care, need-based and scientifically justified service design, and efficient use of public funds.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome	% of Providers meeting productivity goals	87.0%	95.0%	90.0%	95.0%
Quality	Maintain compliance with regulatory and licensing standards/boards	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

## Legal/Contractual Obligation

Oregon State Board of Nurses, Oregon State Board of Medical Examiners, Medicaid and Medicare rules and regulations, Joint Commission on Accreditation of Healthcare Organizations, stipulations of multiple federal and state grants, CareOregon contract, Central City Concern contract.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$883,839	\$0	\$652,679	\$103,161
Contracts	\$37,000	\$0	\$15,096	\$0
Materials & Supplies	\$113,188	\$0	\$77,325	\$7,500
Internal Services	\$63,643	\$0	\$37,782	\$7,571
Total GF/non-GF:	<b>\$1,097,670</b>	<b>\$0</b>	<b>\$782,882</b>	<b>\$118,232</b>
Program Total:	<b>\$1,097,670</b>		<b>\$901,114</b>	
Program FTE	4.70	0.00	3.70	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$5,463	\$0
Intergovernmental	\$0	\$0	\$0	\$118,232
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$5,463</b>	<b>\$118,232</b>

## Explanation of Revenues

Medical Directors (Physician, Nurse Practitioner and Nursing) is primarily funded with county general fund. Additionally the Department has been awarded a research grant from the Kaiser Foundation for participating in research project for cardiovascular disease risk factors among diabetic patients in federally qualified health centers.

Kaiser Foundation: \$91,232  
 County General Fund: \$782,882

## Significant Program Changes

**Last year this program was:** #40030, Medical Directors (Physician, Nurse Practitioner and Nursing)  
 In order to better reflect where services are actually delivered, adjustments were made to several positions to move them into the health clinics where they serve. As a result of this change, there is a decrease of \$223,556 and 1.00 FTE.

**Lead Agency:** Health Department

**Program Contact:** ABDELLATIF Vanetta M

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Pharmacy provides essential clinical support to health delivery and emergency preparedness programs in the Health Department.

**Program Description**

Pharmacy Services utilizes various contracts to procure medication for dispensing to Health Department clients. Medications are dispensed to uninsured clients including high numbers of mentally ill, clients of public health programs such as the Sexually Transmitted Disease Prevention and the Tuberculosis Clinics as well as youth in School Based Health Clinics. The program bills third parties, assists clients in obtaining low-cost/free drugs from manufacturers, and provides staff consultation and patient education regarding medications. Pharmacy Services provides essential support to the health delivery and emergency preparedness programs within the Health Department; and assists in the treatment and monitoring of clients receiving health care in Health Department facilities and programs. Uninsured, public health programs (TB, STD, CD) and School Based Health clients comprise close to 40% of the total work of the program.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Prescriptions Filled	325,803	370,000	368,000	401,000
Outcome	Average prescription cost	31	32	33	35

**Performance Measure - Description**

The prescription volume reflects staffing needs, materials and supplies, expenditures and revenue. The average prescription cost reflects prescription volume, expenditures, staffing, materials and supplies but not revenue.

## Legal/Contractual Obligation

Various grants require a provision for pharmacy services. State mandated public health services are provided.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$94,556	\$4,357,334	\$0	\$4,624,364
Contracts	\$0	\$251,000	\$0	\$220,305
Materials & Supplies	\$558,612	\$6,445,174	\$291,501	\$7,070,723
Internal Services	\$47,022	\$1,212,795	\$141,052	\$1,291,608
Capital Outlay	\$0	\$100,425	\$0	\$0
Total GF/non-GF:	<b>\$700,190</b>	<b>\$12,366,728</b>	<b>\$432,553</b>	<b>\$13,207,000</b>
Program Total:	<b>\$13,066,918</b>		<b>\$13,639,553</b>	
Program FTE	1.35	38.30	0.00	42.75
<b>Program Revenues</b>				
Indirect for dep't Admin	\$708,709	\$0	\$789,150	\$0
Fees, Permits & Charges	\$0	\$485,000	\$0	\$780,000
Intergovernmental	\$0	\$11,881,728	\$0	\$12,427,000
<b>Total Revenue:</b>	<b>\$708,709</b>	<b>\$12,366,728</b>	<b>\$789,150</b>	<b>\$13,207,000</b>

## Explanation of Revenues

Pharmacy is funded through prescription fees and revenue from pharmacy patient assistance programs. General fund is used to pay for services to the uninsured clients served by the Health Department as well as deliver mandated public health services.

Third Party Fees: \$12,307,000  
Patient Fees: \$375,000  
Patient Assistance Programs: \$395,000  
County general fund: \$553,140

## Significant Program Changes

**Last year this program was:** #40031, Pharmacy

Pharmacy has experienced consistent increases in prescription volume for several years. In order to respond to the increased demand due to more patient visits and the new Rockwood Health Center, Pharmacy has increased by \$572,635 and 3.10 FTE.

**Lead Agency:** Health Department

**Program Contact:** ABDELLATIF Vanetta M

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Lab, X-ray, and Health Information Management provide essential clinical support to health delivery and emergency preparedness programs in the Health Department. These programs provide service support to delivery of care to clients of Health Department services including Primary Care, School Based Health Clinics, Disease Prevention Clinics, Dental and Corrections Health. A large percentage of uninsured clients are experiencing homelessness, mental illness and/or are women and children.

**Program Description**

Laboratory: Test clinical and environmental specimens, manage contracts, prepare for bio-terrorism and emergencies and surveillance of emerging infections. X-ray: Maintain diagnostic imaging and film archives. Health Information Management: Manage medical records systems to ensure comprehensive clinical documentation and compliance with all applicable licensing, regulatory and accreditation standards. Also fulfills role of Health Department's Privacy Official as required by HIPAA. The Clinical Infrastructure Services Group provides essential support to the health delivery and emergency preparedness programs within the Health Department. Laboratory and X-ray assist in the diagnosis, treatment, and monitoring of clients receiving health care in Health Department facilities. Health Information Management ensures proper documentation of health care services and provides direction, monitoring and reporting of federally required HIPAA compliance activities.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of records requests completed	0	10,500	11,000	9,700
Outcome	X-rays taken	5,800	6,400	6,300	6,600
Outcome	Number of laboratory specimens handled	222,000	250,000	250,000	275,000
Quality	Lab proficiency/competency levels through internal and external testing program	95.0%	95.0%	95.0%	95.0%

**Performance Measure - Description**

New measures (began FY10/11) are the number of records requests completed, and lab proficiency/competency level through internal and external testing programs.

## Legal/Contractual Obligation

Federal and state mandates require maintenance of medical records. HIPAA and state confidentiality and privacy laws require adherence to standards. Various grants require provisions of laboratory and X-ray services. The EMR and Practice Management contractual obligations will be as per the contractual agreement between Multnomah County Health Department (MCHD) and OCHIN. Multnomah County Health Department is the client receiving services from OCHIN in this agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$2,335,251	\$0	\$2,494,844	\$0
Contracts	\$18,729	\$0	\$10,750	\$0
Materials & Supplies	\$75,140	\$0	\$74,685	\$0
Internal Services	\$366,248	\$0	\$364,043	\$0
Total GF/non-GF:	<b>\$2,795,368</b>	<b>\$0</b>	<b>\$2,944,322</b>	<b>\$0</b>
Program Total:	<b>\$2,795,368</b>		<b>\$2,944,322</b>	
Program FTE	26.10	0.00	26.90	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Revenue for laboratory and X-ray services are included in medical visit revenue. It is a reflection of medical visits and payor mix. General fund is used to pay for services to the uninsured clients served by the Health Department as well as deliver mandated public health services.

## Significant Program Changes

**Last year this program was:** #40032, Lab, X-Ray and Medical Records

In addition to incremental adjustments to existing positions, the Lab, X-Ray and Medical Records operating level is determined by patient demand. Due to increased patient visits at the Rockwood Health Clinic, this program has increased by \$148,954 and 0.80 FTE.

**Lead Agency:** Health Department

**Program Contact:** OLBRICH Pamela W

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Primary Care and Dental Access and Referral (PCARD) Program is the gateway for new patients appointed into Multnomah County Health Department's (MCHD) Primary Care and Dental System, and for established uninsured patients referred into community specialty care.

MCHD Information and Referral and Languages Services provide written translation, oral and sign language interpretation throughout the department's programs and services.

**Program Description**

PCARD is the point of entry for scheduling new clients for both the Primary Care and dental clinics. PCARD also facilitates access to specialty referrals and charity care for uninsured patients in collaboration with Project Access. PCARD provides appointments and referrals in collaboration with County and other community organizations, ensuring consistent patient information and tracking. PCARD also provides information and referral for MCHD medical, dental and social services and key community service partners.

MCHD Language Services provides interpretation in over 50 languages and sign language for all MCHD services and programs and for established patients who access specialty care in the community. Comprehensive written translation for clinical and non-clinical programs and services is also provided. MCHD Language Services is the central coordinator for thousands of patient/client interpretation requests and translations each year for multiple programs/services. This key service ensures that patients and clients through the department's Refugee and Screening Program, and those who have Limited English Proficiency, receive culturally competent interpretation.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of new patients who receive appointments	11,070	13,000	9,625	11,500
Outcome	# of uninsured patients who receive specialty care	2,100	2,350	1,250	1,250

**Performance Measure - Description**

Output: Number of new patients who receive a new patient appointment (medical and dental).

Outcome: Number of uninsured patients who receive specialty care referral--measures the success of efforts to connect uninsured clients to community charity care.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$863,115	\$0	\$910,142	\$0
Contracts	\$56,610	\$99,880	\$90,989	\$23,848
Materials & Supplies	\$23,500	\$0	\$0	\$22,828
Internal Services	\$104,676	\$8,120	\$42,700	\$68,324
<b>Total GF/non-GF:</b>	<b>\$1,047,901</b>	<b>\$108,000</b>	<b>\$1,043,831</b>	<b>\$115,000</b>
<b>Program Total:</b>	<b>\$1,155,901</b>		<b>\$1,158,831</b>	
Program FTE	11.00	0.00	11.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$6,422	\$0	\$6,871	\$0
Intergovernmental	\$0	\$108,000	\$0	\$115,000
<b>Total Revenue:</b>	<b>\$6,422</b>	<b>\$108,000</b>	<b>\$6,871</b>	<b>\$115,000</b>

## Explanation of Revenues

Primary Care and Dental Access and Referral is primarily funded with county general fund and is also supported with revenue from the Bureau of Primary Health Care.

Federal Primary Care grant: \$115,000  
 County general fund: \$1,043,831

## Significant Program Changes

**Last year this program was:** #40033, Primary Care and Dental Access and Referral



**Lead Agency:** Health Department

**Program Contact:** ABDELLATIF Vanetta M

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Clinical Infrastructure (Quality and Support) Program provides pivotal oversight by managing the Bureau of Primary Health Care (BPHC) grant, developing and implementing fiscal accountability programs and access to health care, initiating and sustaining clinical and administrative quality and safety activities and improvements, and coordinating adherence to healthcare standards and regulations.

**Program Description**

This program supports services within the project scope of the BPHC grant, which has continued to increase since our initial award in 1977. The funding is significant and facilitates the mission of increasing access to needed health services to the County's most vulnerable. BPHC funding requires strict adherence to federal laws mandating which services must be provided as a Federally Qualified Health Center (FQHC) which results in additional Medicaid revenue for Oregon Health Plan clients. This funding requires quality services, performance audits and responsiveness to new methods of delivering safe and quality care. Infrastructure and support assures that these efforts are maintained at acceptable thresholds. This program supports the ongoing delivery of Primary Care, Homeless, Dental and School Based Health clinical services through the following activities: Management of all aspects of the BPHC grant, including adherence to all federal program requirements. Review, audit and maintain standards of clinical quality and safety as required to maintain Joint Commission (JCAHO) accreditation, which the BPHC strongly supports. Emphasis on use of data and provision of evidence-based care to increase performance outcomes. Provision of financial analysis, monitoring and revenue development for revenue generating program areas. Development and implementation of systems and processes to streamline service delivery, maintain quality and safety, and increase customer satisfaction. This program measures clinical standards/outcomes, quality, safety and fiscal accountability with other similar health delivery systems. The BPHC and JCAHO are our primary external benchmarking organizations relative to performance indicators. Program includes work with the Community Health Council, client feedback results, and collaborations with other health care delivery systems.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome	Maintain compliance with Joint Commission standards	0.0%	100.0%	0.0%	0.0%
Outcome	Percentage of grants renewed	0.0%	100.0%	0.0%	0.0%

**Performance Measure - Description**

1. Bureau of Primary Health Care Performance Reviews results and monthly audits in key performance areas. 2. National benchmark of 90% compliance is required to meet standards/rules governing quality and safety, per Bureau of Primary Health Care (BPHC) Accreditation Initiative. Ongoing targeted compliance audits focus mainly on areas identified as needing improvement. Annual Periodic Performance Review assesses the entire program.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$170,820	\$1,693,025	\$269,441	\$1,596,538
Contracts	\$165,369	\$150,131	\$500	\$119,650
Materials & Supplies	\$2,000	\$142,680	\$8,212	\$88,872
Internal Services	\$0	\$245,341	\$58,873	\$187,440
<b>Total GF/non-GF:</b>	<b>\$338,189</b>	<b>\$2,231,177</b>	<b>\$337,026</b>	<b>\$1,992,500</b>
<b>Program Total:</b>	<b>\$2,569,366</b>		<b>\$2,329,526</b>	
Program FTE	1.90	14.55	2.80	14.90
<b>Program Revenues</b>				
Indirect for dep't Admin	\$132,679	\$0	\$113,027	\$0
Intergovernmental	\$0	\$1,161,177	\$0	\$1,105,000
Other / Miscellaneous	\$0	\$1,070,000	\$0	\$887,500
<b>Total Revenue:</b>	<b>\$132,679</b>	<b>\$2,231,177</b>	<b>\$113,027</b>	<b>\$1,992,500</b>

## Explanation of Revenues

Quality Assurance and Quality Improvement activities are funded primarily from the federal Bureau of Primary Care with additional funding provided by CareOregon based upon eligibility criteria and quality outcome measures described in the CareOregon Medical Home Payment Model.

Federal Primary Care grant: \$1,105,000  
 CareOregon: \$887,500  
 County general fund: \$337,026

## Significant Program Changes

**Last year this program was:** #40034, Quality Assurance

Due to one-time only expenses in FY 2011, such as the Corrections Health cost benefit analysis and JHACO accreditation, Quality Assurance is decreased by \$239,840. Additionally, in order to align staff with the program areas that they serve Quality Assurance is increased by 1.25 FTE.

**Lead Agency:** Health Department

**Program Contact:** JOHNSON Sandy A

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Health Assessment, Planning and Evaluation informs and supports health program and policy decisions through providing research, evaluation, program and fund development services. Health Assessment, Planning and Evaluation identifies health issues and concerns within the county, provides leadership for department-wide strategic planning, procurement of grant funds, and the development and evaluation of evidence-based programs. Evaluation efforts are aimed at examining the effectiveness of programs and initiatives and identifying opportunities for community health improvement.

**Program Description**

Health Planning and Evaluation provides support through three program areas: Health Assessment and Evaluation (HAE), Program Design and Evaluation Services (PDES), and Grant Development. HAE provides data analysis and evaluation support for program planning and quality improvement efforts across the Health Department, reports on the health status of Multnomah County residents, and provides data support for Grant Development efforts. HAE supports county-wide efforts to achieve health equity and social justice through monitoring and disseminating reports documenting health inequities and conducting health impact assessments. PDES provides evaluation support to county and state programs, initiates and conducts applied research studies to improve community health, shape public policy, and reduce health disparities. PDES designs public health interventions by identifying and applying best practices and generates knowledge about promising new approaches through research and evaluation. Grant Development identifies and tracks public and private sector funding opportunities, develops grant proposals and budgets, and provides technical assistance to Health Department staff and community partners in program planning, proposal writing, and grant management. Over \$33 million was procured to address health issues in FY2009-10.

Health Planning and Evaluation projects address key areas including tobacco control, obesity, early childhood, school-aged policy, homelessness, poverty, and emergency preparedness. Examples include evaluation of the Healthy Birth Initiative, the Communities Putting Prevention to Work program, and of smoke-free multi-unit housing policies. Grant Development has secured program funds to support early childhood, adolescent health, public health infrastructure, and clinical services. Health Planning and Evaluation programs identify health priorities and direct resources toward improving health. The investment of \$1.4 million in general funds results in over \$23 million in returns from foundation, state and federal grants, and contracts. HAE analyses and reports inform Health Department program planning and improvement and keep communities apprised of health issues of importance.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of requests for data analysis (1)	700	700	600	600
Outcome	Number of grant proposals written (2)	31	50	35	37
Output	Number of reports and presentations disseminated	47	55	58	60
Outcome	Dollar amount (in millions) of grants funded (3)	33	22	23	24

**Performance Measure - Description**

- 1) Includes HAE planned projects and ad hoc requests.
- 2) Includes Grant Development and PDES proposals. The CYP of 50 was too high; a tighter funding environment reduced CYP.
- 3) Includes HAE and PDES reports and articles.
- 4) Total grant awards in \$millions. FY09-10 actuals reflect American Reinvestment and Recovery Act funding.

## Legal/Contractual Obligation

Program Design and Evaluation Services (PDES) is primarily grant funded and program continuation is required by grant and contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,252,478	\$1,156,210	\$1,156,667	\$892,352
Contracts	\$21,200	\$293,423	\$0	\$290,444
Materials & Supplies	\$27,696	\$73,725	\$35,638	\$79,117
Internal Services	\$135,136	\$129,846	\$155,195	\$114,204
Total GF/non-GF:	<b>\$1,436,510</b>	<b>\$1,653,204</b>	<b>\$1,347,500</b>	<b>\$1,376,117</b>
Program Total:	<b>\$3,089,714</b>		<b>\$2,723,617</b>	
Program FTE	11.35	10.07	10.50	8.13
<b>Program Revenues</b>				
Indirect for dep't Admin	\$98,333	\$0	\$82,403	\$0
Intergovernmental	\$0	\$1,575,722	\$0	\$1,079,800
Other / Miscellaneous	\$0	\$77,482	\$0	\$296,317
<b>Total Revenue:</b>	<b>\$98,333</b>	<b>\$1,653,204</b>	<b>\$82,403</b>	<b>\$1,376,117</b>

## Explanation of Revenues

Health Assessment, Planning and Evaluation is funded by county general fund and from grants through the state Local Public Health Agency award and from other jurisdictions and organizations for evaluation and educational services provided by the Program Design and Evaluation Services (PDES) unit.

State Local Public Health Agency grant: \$406,800  
 State of Alaska Tobacco grant: \$600,000  
 State of Washington Tobacco grant: \$50,000  
 Mercy Corps: \$92,061  
 Seattle/King County Washington: \$79,256  
 County general fund: \$558,161  
 County general fund indirect: \$789,339

## Significant Program Changes

**Last year this program was:** #40035, Health Assessment, Planning and Evaluation

Several of the grant-funded evaluation projects the Program Design and Evaluation Services (PDES) team is working on will be completed by the end of FY 2011, resulting in a reduction of \$404,097 and 2.02 FTE. The work that the Health Assessment, Planning and Evaluation team does is highly respected in the local and regional health community, and future contracts are likely.

In addition to the changes in PDES, a Grants Development position was moved to Integrated Clinical Services resulting in a decrease of 1.00 FTE.

**Lead Agency:** Health Department

**Program Contact:** LEE Kate

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Community Health Council (CHC) is a mandated community-based planning body that facilitates community involvement in quality assurance, public policy advocacy, and management accountability for the Health Department. CHC provides oversight of community health center services which include primary care, dental, early childhood services, nursing, school-based health, lab, pharmacy and radiology. The Council is comprised of a minimum 51% consumer – majority membership to ensure that health center users have a voice in the decision making process.

The 13 Coalition of Community Health Clinics (CCHC) are community based clinics that have a pivotal role in serving individuals who are under or uninsured in Multnomah County. The Health Department's indemnification program screens volunteer health care professionals for CCHC.

**Program Description**

The CHC offers an entry point for residents to give input about how the County can better meet the health needs of the community. The CHC has a critical role in assuring access to health care for our most vulnerable residents; it serves as the governing board required by the Federal Bureau of Primary Health Care to provide oversight of policies and programs within the scope of the Primary Care Grant. The 13 member Coalition of Community Health Clinics (CCHC) are community-based clinics uniquely able to respond to changing demographics and offer culturally appropriate care while fulfilling their mission of improving and providing health care to the county's most vulnerable populations. The Coalition clinics provide free or low-cost health care to uninsured people. The Council plays a critical role in assuring access to health care for our most vulnerable residents and by serving as the governing board required by the Federal Bureau of Primary Health Care to provide oversight of policies and programs within the scope of the Primary Care Grant. At minimum, 51% of Council Members are county residents who use the Health Department's clinical services. Participation on the Council allows them to better understand and influence how the County system works. Through effective partnerships, the County has leveraged millions of dollars of local, state, and federal revenue, increasing access to services for vulnerable populations through funding of the Community Health Council. County funding of the Coalition of Community Health Clinics' infrastructure fuels the engine that leverages community health resources: \$325,000 estimated in 2009. The Health Department's indemnification program for volunteer health care professionals leveraged an estimated 15,675 total volunteer hours with an estimated dollar value of \$560,000 in 2009–2010. The County's support of the coalition infrastructure and the Health Department's indemnification program assures access to critical health care for many who would otherwise be without care.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of volunteer hours	15,575	16,500	16,500	16,700
Outcome	Percentage of consumers involved	64.0%	63.0%	64.0%	64.0%

**Performance Measure - Description**

Number of volunteer hours includes volunteer hours at the 13 Coalition Clinics for licensed health care professionals that utilize the indemnification program as well as Community Health Council participation at meetings and community events. Percentage of consumers involved includes patient advisory boards represented through the CCHC and consumers represented on the CHC. Number of uninsured patients seen include an Health Department estimate of 23,654 at the health centers and 95,579 visits of uninsured patients through the CCHC. Number of meetings held, includes participation on patient advisory boards for Coalition clinics, CHC executive committee meetings and monthly CHC meetings.

### Legal/Contractual Obligation

The CHC is federally mandated by the Bureau of Primary Health Care. The CHC's role as the Citizen Budget Advisory Committee is mandated by County Charter.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$98,007	\$0	\$114,163	\$0
Contracts	\$106,060	\$0	\$106,060	\$0
Materials & Supplies	\$7,380	\$0	\$6,645	\$0
Internal Services	\$12,253	\$0	\$12,724	\$0
Total GF/non-GF:	<b>\$223,700</b>	<b>\$0</b>	<b>\$239,592</b>	<b>\$0</b>
Program Total:	<b>\$223,700</b>		<b>\$239,592</b>	
Program FTE	1.10	0.00	1.30	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

### Explanation of Revenues

Community Health Council and Civic Governance is funded by county general fund, \$239,592.

### Significant Program Changes

**Last year this program was:** #40036, Community Health Council and Civic Governance

An incremental adjustment was made to an existing position, resulting in an increase of 0.20 FTE and \$15,892.

**Lead Agency:** Health Department

**Program Contact:** WICKHAM Lila A

**Program Offer Type:** Existing Operating

**Related Programs:** 40007, 40008, 40015

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Supports community housing interventions and development of environmental health policy recommendations that reduce health disparities exacerbated by negative and disparate exposure to environmental, social and economic factors. The housing program's focus on vulnerable families living in substandard housing to reduce: asthma triggers, exposure to household mold, toxins, vectors and lead paint through family/home assessments and housing inspections. The program addresses emerging environmental health issues. Strategies include education, advocacy, policy analysis, information & referral, and community organizing to build community capacity. Focus areas include health impacts of global climate change, toxic exposures, indoor air quality, transportation, bedbugs, and the built environment. The program will pilot the integration and analysis of the health equity lens in the policy analysis process. The emerging public concern and associated social and economic impacts of bedbug infestations call out for a response coordinated through public health.

**Program Description**

The program supports the root causes of health disparities through chronic disease prevention by improving the health and livability of the home and addressing environmentally related health concerns. Healthy Home Priorities: 1) Provide home based environmental and medical assessment/interventions for high risk asthmatic children; 2) Consult with medical providers; 3) Create partnerships between landlords and tenants; 4) Provide environmental assessments and interventions for children and families whose health is impacted by their home environment; 5) Address substandard housing complaints in unincorporated areas and 6) Provide home environmental assessments for sick children and improve housing conditions. Housing Education Priorities: 1) Conduct community-based training related to mold, indoor air quality, hazards, toxins and safety; 2) Integrate environmental health risk reduction with other MCHD initiatives. The Healthy Homes asthma intervention has been shown to improve asthma control resulting in reduced emergency department visits and improved conditions of home environment. Environmental Health Education: 1) Conduct education and outreach related to global climate change, toxics exposure, indoor air quality, bedbugs and the built environment; 2) Provide environmental health education related to housing, diseases transmitted from animals to humans (vector borne disease), and food borne illness. Environmental Health Policy Analysis: 1) Coordinate implementation of the Climate Action Plan (CAP) action items; 2) Participate in the CAP revision steering committee; 3) Integrate environmental health risk reduction with other Health Departments and County-wide initiatives; 4) Work in collaboration with County Commissioners, Health Department leadership and State officials to address bedbugs as an emerging issue. Environmental Health Advocacy: 1) Participate in committees that address health disparities and environmental justice; 2) Provide remediation services related to health and housing; 3) Coordinate stakeholder work groups to provide recommendations on emerging toxic-free policies. This program offer relates to the Climate Action Plan for its overall coordination of implementation of the CAP within MCHD, and specifically for items 14-1, 14-2, 5-7, and for technical expertise and coordination on 17-1, 17-2, and 17-3 related to a CDC State grant on conducting public health hazard vulnerability assessments with priority climate change indicators.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of families receiving environmental home inspection from any HH programs	0	180	200	225
Outcome	Emergency Dept & hospitalization costs averted	124,214	149,056	149,056	161,874
Outcome	Dollars leveraged	587,666	444,773	491,664	573,696
Output	Community Coalition recommendations adopted related to Bedbug interventions	0	0	0	12

**Performance Measure - Description**

 **Measure Changed**

Output: total # of homes receiving home environmental assessments through the Healthy Homes, AIR and CAIR programs has shifted between programs and increased with the advent of CAIR. Outcome: Savings are estimated from ER and hospitalization data and costs averted. Outcome: Measures include the total sum of dollars leveraged in housing program grants by MCEH and revenue acquired through Targeted Case Management billing. Output: # of recommendations developed & adopted by Bedbug Community Coalition.

## Legal/Contractual Obligation

Some activities under this program offer are subject to contractual obligations under the HUD Healthy Homes Demonstration Grant #ORRLHH029-09, the DMAP Healthy Homes State Health Plan Amendment and the PHB CAIR contract.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$438,773	\$211,446	\$492,720	\$340,149
Contracts	\$7,450	\$149,520	\$78,400	\$108,217
Materials & Supplies	\$33,978	\$60,328	\$34,647	\$107,313
Internal Services	\$68,361	\$39,603	\$39,459	\$110,253
Total GF/non-GF:	<b>\$548,562</b>	<b>\$460,897</b>	<b>\$645,226</b>	<b>\$665,932</b>
Program Total:	<b>\$1,009,459</b>		<b>\$1,311,158</b>	
Program FTE	4.73	1.85	4.97	3.88
<b>Program Revenues</b>				
Indirect for dep't Admin	\$27,408	\$0	\$39,795	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$215,040
Intergovernmental	\$0	\$460,897	\$0	\$450,892
<b>Total Revenue:</b>	<b>\$27,408</b>	<b>\$460,897</b>	<b>\$39,795</b>	<b>\$665,932</b>

## Explanation of Revenues

In July 2010, DMAP approved Healthy Homes targeted case management at a reimbursement rate of \$336 per home visit with an estimated annual revenue amount of \$215,040.

The HUD Healthy Homes Demonstration Grant funds the CAIR grant and will provide \$299,700 in grant funding for the 2012 budget. In addition the Portland Housing Bureau will support the CAIR program with a \$34,922 per year contract. The County has an in-kind match obligation of \$96,643 to support this grant.

A \$15,000 state climate change grant is expected, as well as a Portland Housing Bureau Healthy Homes grant of \$78,556. The Program also receives \$22,714 in state funds to provide service to public water systems that result in reduced health risks, monitoring and compliance.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40037, Community Environmental Health

Environmental Health will support leadership in coordinating community efforts to address bedbugs as an emerging issue. Additionally, Environmental Health will operate the new Medicaid Healthy Homes Targeted Case Management program. This new service provides case management and environmental assessments for children diagnosed with asthma and elevated blood lead levels. As a result of these changes, general fund and Medicaid reimbursement will increase by \$302,000 and FTE will increase by 2.27.



**Lead Agency:** Health Department

**Program Contact:** WIGGINS Noelle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Many persistent health inequities are the result of adverse social conditions such as poverty and racism. These conditions are referred to as the social determinants of health. The unifying factor among all these conditions is relative powerlessness or lack of control. Substantial evidence suggests that only by addressing the underlying social determinants of health and increasing people's control over their health can we improve health and reduce persistent health inequities. Previous inattention to the social determinants of health has created a need for skill-building in this area, both among public health practitioners and their community partners. This program helps people both inside and outside the Health Department build their capacity to address the social determinants of health. Activities include training community members as Community Health Workers (CHWs), conducting culturally-specific health promotion in various communities, teaching empowering health promotion approaches including popular education, conducting community-based participatory health research (CBPR), and coordinating the Health Promotion Change Process throughout the Health Department.

**Program Description**

This program helps people both inside and outside the Health Department develop the skills and knowledge they need to improve health and increase health equity by addressing the social determinants of health via five primary strategies: 1) providing credit-bearing training for Community Health Workers (CHWs) who promote health in their own communities; 2) assisting a variety of groups to learn to use empowering strategies such as popular education to promote health; 3) conducting community-based participatory research (CBPR) projects that increase power and improve health in communities affected by inequities; 4) conducting empowering health promotion projects in culturally-specific communities; and 5) leading the MCHD Health Promotion (HP) Change Process. In the last year, CCC staff has provided revenue-producing CHW training courses to eight agencies. Bi-monthly popular education (PE) workshops and ongoing consultation about PE are provided to staff from the Health Department, other County departments, and other organizations. Currently, two proposals for CBPR projects are under review by the Natl. Institutes of Health (NIH). A project aimed at reducing violence affecting youth of color brings together youth and police officers at seven schools, agencies, or faith communities. During 2010 the HP Community of Practice, which leads the HP Change Process: 1) conducted a baseline survey with all Health Department staff; 2) disseminated a new version of the HP Framework; 3) rolled out a series of "Introduction to Empowering Health Promotion" trainings to all HD staff; and 4) engaged in multiple projects aimed at increasing integration between clinical and community health promotion efforts. We collaborate closely with the Health Equity Initiative on a variety of projects, including piloting of the Equity and Empowerment Lens.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of participants in training classes	1,874	2,000	1,200	1,200
Outcome	% of participants in training courses who report increased ability to promote hlt	95.0%	95.0%	96.0%	96.0%
Outcome	% of participants who demonstrate increased knowledge	90.0%	80.0%	67.0%	70.0%
Outcome	% of HD staff who report increased understanding of health promotion	0.0%	50.0%	85.0%	85.0%

**Performance Measure - Description**

 **Measure Changed**

1) Number of participants in training classes represents the sum all participants in each training class offered. The same participant may be counted more than once. 2) Percentage of participants in training courses who report increased ability to promote health is defined as participants who rate this item 1 or 2 on a post-evaluation survey. A score of 1 is the highest score. 3) Percentage of participants who demonstrate increased knowledge is defined as those who increase the number of correct items on a survey from baseline to follow-up. 4) Percentage of HD staff who report increased understanding of health promotion is defined as those who rate any of three items on a survey more positively from baseline to follow-up.

## Legal/Contractual Obligation

CDC standards for local public health agencies will soon make health promotion a mandatory service.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$514,873	\$0	\$565,612	\$0
Contracts	\$0	\$750	\$750	\$0
Materials & Supplies	\$0	\$9,672	\$0	\$10,893
Internal Services	\$41,262	\$12,578	\$52,738	\$7,107
<b>Total GF/non-GF:</b>	<b>\$556,135</b>	<b>\$23,000</b>	<b>\$619,100</b>	<b>\$18,000</b>
<b>Program Total:</b>	<b>\$579,135</b>		<b>\$637,100</b>	
Program FTE	5.35	0.00	5.80	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$1,368	\$0	\$1,075	\$0
Fees, Permits & Charges	\$9,200	\$0	\$0	\$3,000
Intergovernmental	\$0	\$8,000	\$0	\$0
Other / Miscellaneous	\$0	\$15,000	\$0	\$15,000
<b>Total Revenue:</b>	<b>\$10,568</b>	<b>\$23,000</b>	<b>\$1,075</b>	<b>\$18,000</b>

## Explanation of Revenues

Health Promotion & Community Capacity Building is funded with \$619,100 in county general fund. Two revenue contracts, \$15,000 subcontract from Janus Youth Village Gardens Project and \$3,000 subcontract from Parish Health Promoter Program, reimburse the program for providing health promotion and community capacity building services.

## Significant Program Changes

**Last year this program was:** #40038, Health Promotion & Community Capacity Building

Several incremental adjustments were made to existing positions, resulting in an increase of 0.45 FTE and \$57,965. These housekeeping adjustments bring the budget in-line with the actual staffing level required to operate this program.

**Lead Agency:** Health Department

**Program Contact:** Kathleen Fuller-Poe

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Business and Quality Services - Workforce Development Human Resources and Training Unit provides guidance and consultation in the administrative procedures, recruitment, employee/labor management relations, core management competency, personnel policy and labor contract interpretation, web design, webinar facilitation, legislative review and legal compliance. These objectives will be achieved through (a) applying business best practices (b) being collaborative with key stakeholders, partners, and (c) providing reliable data information to measure results and quality performance. We strive to strengthen professional competencies on a continuous basis.

**Program Description**

This Program consisted of three primary operating components that support the Health Department's human resources and workforce development objectives:

- 1) Organizational Effectiveness: Provides staff and organization development opportunities that support high performance, facilitative leadership, change management, and succession planning. Other support includes managing and maintaining Department web content and administrative guidelines dissemination and promoting statutory compliance and related technical training for meeting regulatory and accreditation standards.
- 2) Public Health Competence: Provides training resources to employees to strengthen performance in public health and health provider competencies with attention paid toward continuous learning, quality improvement and cultural competence.
- 3) Human Resources: Ensures human resources systems are implemented and consistently followed to guide and direct all Human Resources activities of the Health Department by providing internal consultation with legal counsel to managers and employees on a wide range of issues regarding human resources, employee and labor relations, performance management, recruitment to attract highly qualified diverse applicants, compliance with county personnel rules, department guidelines and labor contracts to reduce liability and costs of unlawful employment practices.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of probationary employees (EEs) receiving Probationary Reviews (PRs)	125	180	180	180
Outcome	Increase % of EEs receiving PRs by managers and supervisors	72.0%	80.0%	80.0%	87.0%

**Performance Measure - Description**

 **Measure Changed**

The FY10-11 measure was generally achieved as targeted; therefore, Human Resource Workforce Development (HR/WFD) proposed to increase the percentage of Probationary Performance Evaluations completed at the 3/6/9 and pre-12 month mark to increase employee success, training needs and retention. HR/WFD informs supervisors and managers regarding the status of employees' Probationary Performance Reviews (PRs) and date due with the expectation that all required Probationary Performance Evaluations will be completed by the end of the employee's first year of employment.

## Legal/Contractual Obligation

Two collective bargaining agreements; federal, state, county and department regulations covering compensation, disciplinary action, vacation and work schedules.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,678,776	\$0	\$1,817,887	\$0
Contracts	\$114,720	\$0	\$103,000	\$0
Materials & Supplies	\$64,217	\$0	\$58,145	\$0
Internal Services	\$198,781	\$0	\$218,945	\$0
Total GF/non-GF:	<b>\$2,056,494</b>	<b>\$0</b>	<b>\$2,197,977</b>	<b>\$0</b>
Program Total:	<b>\$2,056,494</b>		<b>\$2,197,977</b>	
Program FTE	15.90	0.00	17.53	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Business and Quality - Human Resources and Training is funded by \$910,446 county general fund and \$1,287,531 county general fund indirect revenue.

## Significant Program Changes

**Last year this program was:** #40039, Business and Quality - Human Resources and Training

The Program Coordinator position will support and further the mission of the Health Department's Diversity & Quality Team (DQT) as a function of the Department's activities towards diversity and equity. The Office Assistant 2 position is essential to ensure the Health Department remains in compliance, both County and legal, for all Health Department Personnel and Payroll files. The Human Resources Analyst Sr. and Human Resources Analyst 2 positions are increasing slightly in FTE to more closely support the Health Department in the areas of performance management, investigations, classification and compensation, and systems improvements.

**Lead Agency:** Health Department

**Program Contact:** LEAR Wendy R

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Business and Quality Services - Accounting and Financial Services is responsible for providing all grant accounting, budget development and monitoring, accounts payable, contracts and purchasing services and support for the Health Department. They are liaisons for the Department with County Business Services, coordinating the provision of services such as Information Technology, Facilities and fleet services.

**Program Description**

This group manages all of the financial reporting, billing and collection services for grant-funded programs. It prepares and reviews the Health Department financial reports and develops and maintains the Department's budget. The Contracts Team advises, prepares and processes all contracts, intergovernmental agreements and professional service agreements for the Department. Accounts payable, purchasing and travel and training services are also provided. This group also includes the Facility and Safety Manager who acts as the Safety Coordinator and is responsible for managing compliance with federal, state and county safety regulations. This position is liaison to Facilities and Property Management, FREDS and works closely with the County's Health, Safety and Risk Management Division. Financial and Business Services and support for organizational effectiveness are required for a department responsible for managing over \$130 million in County resources and more than 1,250 personnel.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Percent of contracts executed by start of contract	99.0%	98.0%	99.0%	98.0%
Outcome	Percentage of grant reports submitted on time	98.0%	100.0%	100.0%	100.0%
Quality	Number of repeated audit or unresolved audit findings	1	0	0	0

**Performance Measure - Description**

Performance measures are revised to reflect quality measurements in a number of finance areas.

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$2,372,678	\$0	\$2,404,455	\$0
Contracts	\$69,618	\$0	\$69,593	\$0
Materials & Supplies	\$77,855	\$0	\$119,366	\$0
Internal Services	\$395,148	\$0	\$403,597	\$0
<b>Total GF/non-GF:</b>	<b>\$2,915,299</b>	<b>\$0</b>	<b>\$2,997,011</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,915,299</b>		<b>\$2,997,011</b>	
Program FTE	24.30	0.00	24.30	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$5,878,426	\$0	\$5,941,209	\$0
<b>Total Revenue:</b>	<b>\$5,878,426</b>	<b>\$0</b>	<b>\$5,941,209</b>	<b>\$0</b>

**Explanation of Revenues**

Business and Quality - Accounting and Financial Services is funded by \$1,224,261 county general fund and \$1,731,323 county general fund indirect revenue. The general fund revenue in this program offer the amount of department indirect that is charged to federal/state revenue sources.

**Significant Program Changes**

**Last year this program was:** #40040, Business and Quality - Accounting and Financial Services

**Lead Agency:** Health Department

**Program Contact:** LEAR Wendy R

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Business and Quality Services-Medical Billing Unit is responsible for providing medical billings and cash collection services for the Health Department.

**Program Description**

Provides claims processing services and cash collection services for all of the Health Department's Primary Care and specialty clinics. Responsible for all billing and collection from Medicaid, Medicare, and commercial insurance.

Medical billing is an essential part of any clinical system. This team is responsible for the collection of all patient fees, insurance payments, Medicare and Medicaid claims processing. The Medical Accounts Receivable Team is responsible for collecting nearly \$40 million in annual medical billing revenue. This represents about 1/3 of the Department's total budget.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of encounters processed for payment	256,523	215,000	320,953	325,000
Outcome	Percent of Receivables aged (older than 90 days)	71.0%	20.0%	38.0%	33.0%
Quality	% of FQHC claims unpaid	2.1%	2.0%	3.0%	2.6%

**Performance Measure - Description**

New measures reflect data now readily available and reported monthly to management. # of encounters demonstrates volume of work. % of receivables older than 90% should be a % and declining %. Since older claims are less likely to be collected, claims should ideally be paid and resolved in less than 90 days. Finally there are many reasons why a claim might not be paid (client ineligible for service, didn't have insurance coverage on the date of service) but this should be a small and declining % of total claims.

Note: FY09 encounter number artificially low because of issues with State MMIS system.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,000,081	\$0	\$1,087,176	\$0
Contracts	\$449,000	\$0	\$359,000	\$0
Materials & Supplies	\$1,364,079	\$0	\$1,402,297	\$0
Internal Services	\$225,490	\$0	\$106,147	\$0
Total GF/non-GF:	<b>\$3,038,650</b>	<b>\$0</b>	<b>\$2,954,620</b>	<b>\$0</b>
Program Total:	<b>\$3,038,650</b>		<b>\$2,954,620</b>	
Program FTE	12.00	0.00	12.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

Business and Quality - Medical Billing is funded by \$2,249,817 county general fund and \$704,803, county general fund indirect revenue.

**Significant Program Changes**

Last year this program was: #40041, Business and Quality - Medical Billing



**Lead Agency:** Health Department

**Program Contact:** Sonali Balajee

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The mission of Multnomah County’s Health Equity Initiative (HEI) is to eliminate the root causes of social injustices leading to racial and ethnic health inequities. The definition of health equity that grounds HEI’s mission is the fair/just distribution of resources and power that supports the achievement of full health potential. HEI engages community members and policy makers in understanding the root causes of health inequities experienced by people of color, immigrants, and refugees, highlighting current efforts, and advancing policy and practice solutions. HEI integrates findings from research in racial justice, social justice, community empowerment, community priorities, and local data to advance immediate and long-term solutions to address the root causes of inequities.

**Program Description**

In Multnomah County people of color, immigrants, and refugees experience lower life expectancy, higher rates of disease, higher rates of poverty, lower education and economic attainment, less access to power and decision-making, and over-representation in the criminal justice and mental health systems. This program advocates addressing racial and ethnic health inequities with an explicit focus on justice and equity. To eliminate racial and ethnic health disparities by addressing root inequities, HEI analyzes, educates, and advocates for equitable social policies.

This program offer will continue HEI’s work on three fronts: organizational development, public policy, and community engagement and empowerment. HEI makes change in these areas in two key ways: as a leader (framing policy issues and ensuring a common understanding of key health equity definitions and practices) and as an educator (being a resource in terms of providing education/training on best practices, connections between the '-isms,' social determinants of health, and programs). To advance organizational development, HEI is continuing to pilot the use of an Equity and Empowerment Lens (racial justice focus, E&E Lens) and accompanying training in several service areas in the Health Department, in strong partnership with Business Services. Countywide, HEI provides technical assistance as needed to County leadership and efforts focusing on social justice and equity. To advance public policy, HEI will use policy options generated by HEI and other community policy initiatives to support policy advocacy with local elected officials, community based organizations, and community members promoting an equity policy agenda. To advance community empowerment, the HEI will support health promotion, health equity, and quality improvement trainings for County staff and community members to create common understanding on health equity and disparities, and to provide information on how best to connect with current efforts and conduct policy advocacy.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Community members & organizations engaged in learning about & utilizing the Lens	0	500	300	500
Outcome	Doc. evals of EEQ processes of int./ext. partner use	0	10	8	15
Output	% of curriculum and training materials supporting use of E&E Lens completed	0.0%	0.0%	0.0%	100.0%
Quality	%of defined goals toward incr. integration among Quality, H.Prom, HEI,BPAD,&DQT	0.0%	0.0%	10.0%	60.0%

**Performance Measure - Description**

 **Measure Changed**

1) Community engagement is a valid initial measure of health promotion. These measures are key to maintaining cultural factors that protect against health risks. In FY12, the Initiative will move to community empowerment through community education, policy advocacy training, and community-led policy creation. 2),3) Equity tool adapted from Seattle/King County tool and several other health equity processes across the country. FY12 will focus on strengthening our health equity policy agenda, organizational development changes, and building on existing and potential partnerships within and external to the County based on Foundational Principles and main Questions of E&E Lens. 4)Via greater integration of organizational change initiatives, HEI will continue to advocate for greater and more widespread use of Lens principles and practices in the department, as well as County-wide.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$288,834	\$0	\$293,307	\$0
Materials & Supplies	\$5,607	\$0	\$10,689	\$0
Internal Services	\$37,762	\$0	\$30,317	\$0
Total GF/non-GF:	<b>\$332,203</b>	<b>\$0</b>	<b>\$334,313</b>	<b>\$0</b>
Program Total:	<b>\$332,203</b>		<b>\$334,313</b>	
Program FTE	3.00	0.00	3.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Health Equity Initiative (racial justice focus) is funded with county general fund, \$334,313.

## Significant Program Changes

Last year this program was: #40045, Health Equity Initiative (racial justice focus)

**Lead Agency:** Health Department

**Program Contact:** MANHAS Sonia X

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

The Community Wellness and Prevention (formerly known as Chronic Disease Prevention) Program implements environmental and policy strategies to reduce the burden of chronic diseases most closely linked to physical inactivity, poor nutrition, and tobacco use, including cancer, diabetes, obesity, heart disease, asthma, and stroke. In late FY10, Community Wellness and Prevention received a large Center for Disease Control (CDC) "Communities Putting Prevention to Work" grant. Starting in FY11, the grant is continuing to transform the size and impact of the program.

**Program Description**

Tobacco use is the single most preventable cause of death and disease in Multnomah County, and poor nutrition and physical inactivity closely follow. Each year in the United States, tobacco use accounts for \$96 billion in direct medical expenses, and more than \$147 billion is spent treating obesity-related illnesses. This Program manages six prevention programs which work to change the community conditions that contribute to chronic disease, such as lack of access to safe places to walk and play, low availability of fresh fruits and vegetables, or exposure to second-hand smoke, including: 1) Healthy Active Schools Program, 2) Healthy Communities by Design Program, 3) Tobacco Prevention & Control Program, 4) Community Food Policy Initiatives, 5) Health Promotion Support Services, 6) the Department-wide Office of Public Health Policy & Advocacy. Examples of program responsibilities include enforcement of the Oregon Indoor Clean Air Act and implementation of the County's "It Starts Here" media campaign. In 2010, the Program secured a \$7.5 million grant from the CDC to strengthen the County's capacity to implement a comprehensive obesity prevention program. The new funding enables the Program to contract with over 35 organizations, including school districts, community-based organizations, culturally-specific agencies, and city and regional governmental entities to implement evidence-based strategies to promote healthy eating and physical activity. The Program plays a lead role in the Department to coordinate public health policy efforts in close collaboration with Department Leadership and the Board of County Commissioners. The policies and environmental changes being advanced and implemented by the Program are critical to changing social norms and behaviors, improving the health of county residents, and saving health care costs in the years to come. This program relates to the Climate Action Plan for its work related to the built environment, transportation and land use planning, and sustainable, healthy food policy and practice, specific action items include: 14-1, 15-2, 15-1, 15-2, and 17-1, 17-2, and 17-7 as a key stakeholder in major planning scenarios and adaptation planning.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of community partners in Healthy Active Multnomah County coalition	0	0	0	40
Outcome	Number of policies established to slow and reduce rates of chronic disease	0	5	5	10
Quality	Federal CPPW grant-defined progress milestones are met quarterly.	0.0%	0.0%	0.0%	100.0%
Output	Public exposure to "It Starts Here" media campaign	0.0%	0.0%	0.0%	25.0%

**Performance Measure - Description**

 **Measure Changed**

New: Number of community partners in Healthy Active Multnomah County coalition. New federal grant funding enables the program to partner with and fund a wide network of community partners. Partners will be tracked by # of contracts the program establishes as well as # of non-funded partnerships established through policy teams.

Number of policies established: This is an outcome measure that enables the program to track and monitor whether its partnership activities are resulting in concrete changes in policy.

New: This measure tracks progress towards meeting objectives in the program's Healthy Active Multnomah County action plan. Ratings: In-progress on schedule, in-progress behind schedule, or completed.

New: Public exposure to "It Starts Here" media campaign. Output goal: By February 2012, there will be a 25% increase in those who believe that availability of healthy food and beverages is an important health issue requiring community action. Exposure will be tracked by # of visits to campaign website and exposure to television ads.

## Legal/Contractual Obligation

Communities Putting Prevention to Work is funded through the American Recovery and Reinvestment Act (ARRA) and the County and funded partners must comply with extensive financial and performance reporting requirements. Tobacco prevention and chronic disease prevention programs funded by Oregon Public Health Division must comply with required work plans and assurances. Smoke-free workplaces and public places law must be enforced per Oregon Indoor Clean Air Act and MC 21.500 et seq.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$416,082	\$1,395,196	\$407,269	\$1,373,825
Contracts	\$1,200	\$2,392,745	\$16,033	\$1,582,250
Materials & Supplies	\$22,368	\$112,528	\$12,273	\$68,361
Internal Services	\$26,440	\$492,245	\$24,176	\$457,890
Total GF/non-GF:	<b>\$466,090</b>	<b>\$4,392,714</b>	<b>\$459,751</b>	<b>\$3,482,326</b>
Program Total:	<b>\$4,858,804</b>		<b>\$3,942,077</b>	
Program FTE	3.80	15.20	4.90	15.00
Program Revenues				
Indirect for dep't Admin	\$267,161	\$0	\$208,524	\$0
Intergovernmental	\$0	\$4,392,714	\$0	\$3,482,326
<b>Total Revenue:</b>	<b>\$267,161</b>	<b>\$4,392,714</b>	<b>\$208,524</b>	<b>\$3,482,326</b>

## Explanation of Revenues

Community Wellness and Prevention receives funding from the 2nd year of the federal the American Recovery and Reinvestment Act (ARRA) grant "Communities Putting Prevention to Work", state/federal grant funds through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, a grant from the National Association of Chronic Disease Directors (NACCD) to enable local communities to address chronic disease risk factors, and county general fund.

ARRA Communities Putting Prevention to Work: \$3,065,305  
 State Tobacco Prevention grant: \$300,771  
 Federal Health Communities grant: \$81,250  
 NACCD Achieve grant: \$35,000  
 County general fund: \$459,751

## Significant Program Changes

**Last year this program was:** #40047, Chronic Disease Prevention

The State Tobacco Prevention grant received an increase in funding to continue the Tobacco Prevention and Education Program, resulting in an increase of \$70,700 and 0.90 in FTE.

The ARRA Communities Putting Prevention to Work federal grant ends in March 2012. The Department, along with other jurisdictions who received this ARRA funding, are in discussions with the CDC for a no-cost extension. Due to the complex work undertaken by the grant, activities did not start up as quickly the grant assumed. Staff are funded by the grant for the last quarter of the fiscal year assuming the no-cost extension is approved. Pass through payments to community partners are budgeted at 9 months resulting in a decrease of \$981,088. The department will continue to seek funding to carryout on-going activities initiated by CPPW.

**Lead Agency:** Health Department

**Program Contact:** Robert Johnson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Climate Action Plan

**Executive Summary**

The Community Epidemiology Services (CES) program provides core public health functions to all Community Health Services (CHS) programs. These activities are the "front line" governmental public health essential services required by all CHS programs serving county residents. They include:

- epidemiologic surveillance and outbreak response
- population health data collection and analysis
- application of best and promising evidence-based practices in public health
- effective financial management and fiscal accountability
- quality improvement and performance management
- supportive and strategic communications and health alerts

**Program Description**

The Community Epidemiology Services (CES) program provides the Department's core public health services to CHS programs. Population data are analyzed to assist programs in optimizing quality and accountability to the communities they serve. CHS programs provide clinical, technical, field-based outreach, and community engagement functions across diverse professional disciplines such as medicine, nursing, public health inspections (food and water), entomology (vector control), and health promotion. These programs must operate in compliance with a substantial body of public health and environmental statutes and ordinances to monitor and control disease. Accurate collection and analysis of programmatic, epidemiological, and environmental data is essential to focus resources on preventing disease and promoting health in vulnerable populations.

The CES unit leads CHS programs in implementation of efficient and safe service delivery, coordinated public health data, epidemiologic analysis, and coordinated communication activities. CES optimizes resources to assure quality and effectiveness of clinical services, data management, and prevention projects. The program provides disease surveillance for strategic program planning and to assist our community partners in coordinating efforts. Outbreak response is provided through epidemiologic support, statistical modeling, and standardized Investigative Guidelines. CES also supports the Department with implementation of best practices, coordination with prioritized County initiatives, and Public Health Accreditation. This program assures that all CHS services align with the Multnomah County Health Department Strategic Plan.

Note: This program offer is directly related to the Climate Action Plan because of its vital function of epidemiological surveillance and analysis. Action items are 17-1, 17-2, 17-3 as a key stakeholder in adaptation planning and assessment.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Quality Improvement methods training for identified priority CHS programs	5	7	7	9
Outcome	Timely epidemiology surveillance reports detect unusual public health events	100.0%	100.0%	100.0%	100.0%
Quality	Population data projects completed on time	0.0%	0.0%	0.0%	90.0%

**Performance Measure - Description**

 **Measure Changed**

Three of the major essential public health services provided by CES to CHS programs are epidemiologic surveillance and analysis, population health data management, and quality improvement. A quality measure has been added this year.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$585,619	\$0	\$489,245	\$0
Contracts	\$50,000	\$0	\$50,000	\$0
Materials & Supplies	\$38,700	\$0	\$47,120	\$0
Internal Services	\$68,641	\$0	\$47,000	\$0
Total GF/non-GF:	<b>\$742,960</b>	<b>\$0</b>	<b>\$633,365</b>	<b>\$0</b>
Program Total:	<b>\$742,960</b>		<b>\$633,365</b>	
Program FTE	5.00	0.00	4.30	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Community Epidemiology Services is funded with county general fund, \$624,463.

## Significant Program Changes

**Last year this program was:** #40048, Infrastructure for Public Health Services

In addition to minor housekeeping updates in Community Epidemiology Services, a position was redeployed to #40013A: Early Childhood Services for pregnant/parenting families - N/NE to fund the Maternal Child Health Coordinator, resulting in a decrease of \$119,000 and .70 FTE. The department's ability to provide core epidemiological services is not impacted by this change.

**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Providing health care to detained youth is the responsibility of Corrections Health. JDH health personnel care for 80 detained youth from Multnomah, Washington and Clackamas Counties who are brought in from the streets, other jurisdictions and other community holding facilities. Detainees include females and males who need their health issues addressed in a timely manner in order to prevent emergencies, pain and suffering which is the constitutional measure of quality care. Stabilizing their health allows them to participate fully in their legal processes. Trained, skilled professional nursing staff, scheduled 16hrs/day, provide effective illness screening, evaluation of symptoms and effective, targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 2,000 youth are cared for each year with over 40% having major mental health and unstable health conditions. Routine health screenings include STD and TB screening to protect both the health of the clients, custody staff and the broader public health.

**Program Description**

This offer ensures that the health needs for 80 youth meet the standards that assure access to care, safeguards the health of all those who are in detention and controls the legal risk to the County. JDH health professionals work 16 hours a day, seven days a week providing care for 80 youth daily in 6 individual housing units from three counties. Care ranges from minor ailments to major chronic and emotional diseases resulting from substance abuse, trauma, lack of health care, lack of knowledge of hygiene and self care, frequent infections and a high rate of emotional and mental illness. Registered nurses work one day/week with a provider in clinic, to plan examine and order the care necessary to keep the youth safe. In partnership with the DCJ custody staff, Corrections Health identifies and responds to emergencies and also screens for communicable diseases to keep outbreaks to a minimum. Coordination with other counties occurs so transferring of health care to other jurisdictions is achieved effectively. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of clients visits conducted by a CH nurse per yr	3,300	3,500	3,462	3,500
Outcome	% of detained youth receiving mental health medications monthly	35.0%	40.0%	49.0%	50.0%

**Performance Measure - Description**

Note: that Washington and Clackamas Counties added five beds each to their contract for FY2011. Washington and Clackamas Counties do not plan to purchase the beds in FY2012.

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Access to care, an evaluation by a health professional and the right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs brings harm to individuals entrusted to our care along with increases liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standard of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$526,160	\$0	\$495,552	\$100,004
Contracts	\$102,000	\$0	\$77,407	\$10,000
Materials & Supplies	\$49,388	\$0	\$76,179	\$8,987
Internal Services	\$70,054	\$0	\$61,220	\$10,769
Total GF/non-GF:	<b>\$747,602</b>	<b>\$0</b>	<b>\$710,358</b>	<b>\$129,760</b>
Program Total:	<b>\$747,602</b>		<b>\$840,118</b>	
Program FTE	4.50	0.00	4.40	1.20
Program Revenues				
Indirect for dep't Admin	\$0	\$0	\$7,770	\$0
Fees, Permits & Charges	\$7,238	\$0	\$7,238	\$0
Intergovernmental	\$103,000	\$0	\$103,000	\$129,760
<b>Total Revenue:</b>	<b>\$110,238</b>	<b>\$0</b>	<b>\$118,008</b>	<b>\$129,760</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare, etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. There is no co-pay system for youth, however, those youth in the Alcohol and Drug Treatment Program have OHP cards so some of their clinic appointments with a physician and medications are billed through the community or health department to OHP.

Corrections Health Juvenile Detention/Admissions and Housing is funded by \$710,358 in county general fund. The program estimates to collect \$110,238 in medical fees that are included in the county general fund.

## Significant Program Changes

Last year this program was: #40049, Corrections Health Juvenile Detention/Admissions and Housing



**Lead Agency:** Health Department      **Program Contact:** BURROW Gayle F  
**Program Offer Type:** Existing Operating  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Corrections Health, Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and 3 floors of discipline and evaluation housing. Approximately 160-170 USM detainees are housed in the system daily. Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental/behavioral illnesses.

**Program Description**

This offer represents Corrections Health MCDC basic administration, support, booking and mental health care delivery programs for the right care to be provided in the right setting. MCDC averages 110 newly booked individuals each day. Nurses(24 hrs/7 days/wk) evaluate each detainee to identify critical health issues and make plans for scheduled care for stabilization. Screening includes health history, chronic disease, substance abuse, communicable disease evaluation and current prescriptions. Through these evaluations, treatments, medications, provider appointments, mental health referrals and housing decisions are made. Suicide symptom inventory and TB screening are vitally important at booking for safety while incarcerated. The Mental Health Team is composed of PMHNP, mental health consultants and mental health nurses for evaluation, monitoring and treatment for the many mentally ill clients coming into jail. Over 60% of all medications prescribed are for mental health conditions.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Average # of health screenings completed in an 8 hr shift	31	38	35	40
Outcome	% of + screenings resulting in a referral to the mental health team per year	25.0%	25.0%	33.0%	35.0%

**Performance Measure - Description**

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$2,894,225	\$0	\$2,764,760	\$0
Contracts	\$137,485	\$0	\$219,181	\$0
Materials & Supplies	\$196,525	\$0	\$133,780	\$0
Internal Services	\$169,027	\$0	\$123,200	\$0
Total GF/non-GF:	<b>\$3,397,262</b>	<b>\$0</b>	<b>\$3,240,921</b>	<b>\$0</b>
Program Total:	<b>\$3,397,262</b>		<b>\$3,240,921</b>	
Program FTE	25.30	0.00	23.70	0.00
Program Revenues				
Fees, Permits & Charges	\$39,765	\$0	\$34,972	\$0
<b>Total Revenue:</b>	<b>\$39,765</b>	<b>\$0</b>	<b>\$34,972</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare, etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide care that is needed.

Corrections Health MCDC Base Services and Booking Floor is funded by \$3,240,921 in county general fund. The program estimates to collect \$34,972 in medical fees that are included in the county general fund.

## Significant Program Changes

**Last year this program was:** #40050A, Corrections Health MCDC Base Services and Booking Floor  
 In order to better reflect where services are actually delivered, FTE were shifted from 40050A to 40050C: Corrections Health MCDC Housing Floor 5, 6, 7, & 8. This change resulted in a decrease of \$156,343 and 1.60 FTE.

**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and 3 floors of discipline and classification housing. Approximately 160-170 USM detainees are housed in the system daily. Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide effective screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental/behavioral illnesses.

**Program Description**

This offer represents the MCDC 4th floor which is composed of 46 beds, 2 general & 2 mental health clinic rooms, 1 dental operatory, X-ray & lab services as well as 10 mental health and 10 general infirmary skilled care beds, plus 4 housing areas for high level discipline. Also, a nurses station, chart room & medication/supplies room. Services such as skilled nursing, dialysis, IV therapy, PT/OT, post surgical & terminal care provided in jail instead of high cost hospital care. Mental health is managed by a team of mental health nurses, consultants and providers. The 4th floor is staffed 24/7 with nursing personnel to provide needed care and emergency response. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Avg # inmate medical requests for care evaluated by nurse monthly	720	745	690	720
Outcome	Avg suicide watches per month to prevent inmate injury or death.	38	39	47	50

**Performance Measure - Description**

FY12-- these performance measures reflect care delivered for 5 floors in MCDC as we do not break out suicide watches or medical request evaluations per floor.

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,569,946	\$0	\$1,844,408	\$0
Contracts	\$674,248	\$0	\$425,093	\$0
Materials & Supplies	\$201,344	\$0	\$319,309	\$0
Internal Services	\$80,440	\$0	\$73,503	\$0
Total GF/non-GF:	<b>\$2,525,978</b>	<b>\$0</b>	<b>\$2,662,313</b>	<b>\$0</b>
Program Total:	<b>\$2,525,978</b>		<b>\$2,662,313</b>	
Program FTE	12.04	0.00	14.14	0.00
Program Revenues				
Fees, Permits & Charges	\$18,924	\$0	\$20,866	\$0
<b>Total Revenue:</b>	<b>\$18,924</b>	<b>\$0</b>	<b>\$20,866</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide safety.

Corrections Health MCDC Clinical Services and 4th Flr Housing is funded by \$2,662,313 in county general fund. The program estimates to collect \$20,866 in medical fees that are included in the county general fund.

## Significant Program Changes

**Last year this program was:** #40050B, Corrections Health MCDC Clinical Services and 4th Flr Housing  
 Due to incremental adjustments to several positions, this program offer increased \$136,337 and 2.10 FTE. The increase in permanent FTE will balance staffing needs with in-mate/patient demand and reduce overtime expenses.

**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and 3 floors of discipline and evaluation housing. Approximately 160-170 USM detainees are housed in the system daily. Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide effective screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental /behavioral illnesses.

**Program Description**

This offer represents the health services to all 4 housing floors at MCDC. Approximately 400 detainees are housed in classification (new jail housing), female, male, close custody and mental health housing modules. Ninety-six rooms are designated for those with mental health diagnosis and cared for by a team of mental health nurses, consultants and providers for diagnosis and treatment. Early identification, evaluation and treatment provide safety for clients, especially for suicide prevention. A variety of treatments, such as managing alcohol and drug withdrawal, evaluating chronic diseases, preventing the spread of communicable diseases, medication management and emergency response are provided efficiently by 24/7 staff. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Average # of inmate medical requests for care evaluated by nurse monthly	720	745	690	720
Outcome	Avg suicide watches per month to prevent inmate injury or death.	38	39	47	50

**Performance Measure - Description**

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$801,539	\$0	\$961,038	\$0
Contracts	\$172,861	\$0	\$208,944	\$0
Materials & Supplies	\$84,710	\$0	\$124,527	\$0
Internal Services	\$53,116	\$0	\$54,062	\$0
Total GF/non-GF:	<b>\$1,112,226</b>	<b>\$0</b>	<b>\$1,348,571</b>	<b>\$0</b>
Program Total:	<b>\$1,112,226</b>		<b>\$1,348,571</b>	
Program FTE	7.95	0.00	10.40	0.00
Program Revenues				
Fees, Permits & Charges	\$12,495	\$0	\$15,347	\$0
<b>Total Revenue:</b>	<b>\$12,495</b>	<b>\$0</b>	<b>\$15,347</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide safety.

Corrections Health MCDC Corrections Health MCDC Housing Floor 5, 6, 7 & 8 is funded by \$1,348,571 in county general fund. The program estimates to collect \$15,347 in medical fees that are included in the county general fund.

## Significant Program Changes

**Last year this program was:** #40050C, Corrections Health MCDC Housing Floor 5, 6, 7 & 8

In order to better reflect where services are actually delivered, FTE were shifted from 40050A: Corrections Health MCDC Base Services and Booking Floor to 40050C. Staff were also reclassified to better meet the needs of the patients. These changes resulted in an increase of \$236,346 and 2.45 FTE.

**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Inverness Jail houses 862 men, women, inmate workers for inside and outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 160-170 USM detainees are housed in the system daily. MCIJ health personnel care for all those detainees transferred from MCDC to continue or begin treatment until disposition of their legal process is complete. Sentenced and unsentenced detainees have a plan of care in place to maintain treatment of their health conditions in order to prevent emergencies, pain and suffering which is the constitutional measure of quality care. Trained, skilled professional staff provides effective screening, illness identification, evaluation and effective, targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

**Program Description**

This offer represents MCIJ base and clinical services which is administrative, support, diagnostic and clinical services. Three general provider clinics, 1 dental operatory, 1 mental health and 1 triage/treatment room provides office visits for clients. Triage nurses evaluate client care requests and refer to nurses, the mental health team, providers or dentists for care according to the medical need. Xray and lab services support diagnosing health problems. This area also supports the nursing station, medication room, central records room and administrative offices for various personnel so health care can be delivered. By providing 24/7 skilled health care on site for this vulnerable, under served population, we minimize the high cost of outside medical care. MCIJ is also the center (HUB) for the state inmate transport system. An average of 20-100 inmates stay overnight and receive care for health.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Avg # of inmate medical requests for care evaluated by the Triage Nurse monthly	951	1,000	913	950
Outcome	% of medical requests that are resolved by RN staff	67.0%	75.0%	72.0%	75.0%

**Performance Measure - Description**

FY12 performance measures reflect the entire facility.

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,555,984	\$0	\$1,707,254	\$0
Contracts	\$281,842	\$0	\$236,699	\$0
Materials & Supplies	\$133,202	\$0	\$95,701	\$0
Internal Services	\$159,055	\$0	\$127,047	\$0
Total GF/non-GF:	<b>\$2,130,083</b>	<b>\$0</b>	<b>\$2,166,701</b>	<b>\$0</b>
Program Total:	<b>\$2,130,083</b>		<b>\$2,166,701</b>	
Program FTE	14.16	0.00	13.76	0.00
Program Revenues				
Fees, Permits & Charges	\$19,826	\$0	\$19,525	\$0
<b>Total Revenue:</b>	<b>\$19,826</b>	<b>\$0</b>	<b>\$19,525</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare, etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide safety.

Corrections Health MCIJ Base Services and Clinical Services is funded by \$2,166,701 in county general fund. The program estimates to collect \$19,525 in medical fees that are included in the county general fund.

## Significant Program Changes

**Last year this program was:** #40051A, Corrections Health MCIJ Base Services and Clinical Services

Currently there are 3 dorms closed at MCIJ. Periodically one is opened to accommodate increased needs for beds and we provide care to this population.



**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Inverness Jail houses 860 men, women, inmate workers for inside/outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 160-170 USM detainees are housed in the system daily. MCIJ health personnel care for all those detainees transferred from MCDC for stable housing until disposition of their legal process is complete. Sentenced and unsentenced detainees have a plan of care in place to maintain treatment of their health conditions in order to prevent emergencies, pain and suffering which is the constitutional measure of quality care. Trained, skilled professional staff working 24/7 provide effective screening, illness identification, evaluation and effective, targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

**Program Description**

This offer represents a variety of health, mental health, and dental services to 430 men and women in Dorms 4-10 at MCIJ (Dorms 1,2,3 are closed). Diverse staff work 24/7 to provide evaluation, treatment, referral, medication management, emergency response, communicable disease identification, and suicide prevention. Inside and outside inmate workers are monitored by health for ability to work, injuries and medication management when out of the facility. Chronic disease monitoring is key to prevent hospitalizations for clients with diabetes, hypertension, seizures, heart disease and infections. Special orthopedic and OB/GYN clinics support in jail care. In partnership with custody staff, health responds to emergencies and screens for communicable diseases to keep everyone safe. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Avg # of inmate medical requests for care evaluated by the Triage Nurse monthly	951	1,000	913	950
Outcome	% of medical requests that are resolved by RN staff	67.0%	75.0%	72.0%	75.0%

**Performance Measure - Description**

FY12 performance measures reflect the entire facility.

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$922,693	\$0	\$885,297	\$0
Contracts	\$159,210	\$0	\$137,617	\$0
Materials & Supplies	\$75,256	\$0	\$55,640	\$0
Internal Services	\$89,862	\$0	\$120,308	\$0
Total GF/non-GF:	<b>\$1,247,021</b>	<b>\$0</b>	<b>\$1,198,862</b>	<b>\$0</b>
Program Total:	<b>\$1,247,021</b>		<b>\$1,198,862</b>	
Program FTE	8.00	0.00	8.00	0.00
Program Revenues				
Fees, Permits & Charges	\$11,201	\$0	\$11,352	\$0
<b>Total Revenue:</b>	<b>\$11,201</b>	<b>\$0</b>	<b>\$11,352</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare, etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide safety.

Corrections Health MCIJ General Housing Dorms 1 - 10 is funded by \$1,198,862 in county general fund. The program estimates to collect \$11,352 in medical fees that are included in the county general fund.

## Significant Program Changes

Last year this program was: #40051B, Corrections Health MCIJ General Housing Dorms 1 - 10

**Lead Agency:** Health Department

**Program Contact:** BURROW Gayle F

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Inverness Jail houses 860 men, women, inmate workers for inside/outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 160-170 USM detainees are housed in the system daily. MCIJ health personnel care for all those detainees transferred from MCDC for stable housing until disposition of their legal process is complete. Sentenced and unsentenced detainees have a plan of care in place to maintain treatment of their health conditions in order to prevent emergencies, pain and suffering which is the constitutional measure of quality care. Trained, skilled professional staff working 24/7 provide effective screening, illness identification, evaluation and effective, targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

**Program Description**

Corrections Health provides a variety of health, mental health and dental services to 430 men and women in dorms 11-18 at MCIJ. Diverse staff work 24/7 to provide evaluation, treatment, referral, medication management, emergency response, communicable disease identification and suicide prevention. A 10 bed medical infirmary provides skilled nursing and protective isolation in house and not at higher cost hospitals. Chronic disease monitoring is key to prevent hospitalizations for our clients with diabetes, hypertension, seizures, heart disease and infections. Special OB/GYN and orthopedic clinics support in house care. In partnership with custody staff, health responds to emergencies and screens for communicable disease to keep everyone safe. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Avg # of inmate medical requests for care evaluated by the Traige Nurse monthly	951	1,000	913	950
Outcome	% of medical requests that are resolved by RN staff	67.0%	75.0%	72.0%	75.0%

**Performance Measure - Description**

FY12 Performance measures reflect the entire facility.

## Legal/Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they have lost their freedom to obtain care on their own. Access to care, an evaluation by a health professional and a right to receive care that is ordered is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care. Corrections Health is bound by ethical standards to provide unbiased care to all individuals.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$910,383	\$0	\$864,299	\$0
Contracts	\$159,210	\$0	\$137,617	\$0
Materials & Supplies	\$75,256	\$0	\$55,640	\$0
Internal Services	\$89,862	\$0	\$91,022	\$0
Total GF/non-GF:	<b>\$1,234,711</b>	<b>\$0</b>	<b>\$1,148,578</b>	<b>\$0</b>
Program Total:	<b>\$1,234,711</b>		<b>\$1,148,578</b>	
Program FTE	8.00	0.00	8.00	0.00
Program Revenues				
Fees, Permits & Charges	\$11,201	\$0	\$11,352	\$0
<b>Total Revenue:</b>	<b>\$11,201</b>	<b>\$0</b>	<b>\$11,352</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from 3rd party payers, insurance companies, Medicare, etc. These rules and laws are under review both locally and nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts for a nominal fee for evaluations, clinic visits and medications. Many treatments, screenings, diagnostics tests and communicable diseases are at no charge to the individuals in order to provide safety.

Corrections Health MCIJ Dorms 11-17 Including Infirmary is funded by \$1,148,578 in county general fund. The program estimates to collect \$11,352 in medical fees that are included in the county general fund.

## Significant Program Changes

**Last year this program was:** #40051C, Corrections Health MCIJ Dorms 11-17 Including Infirmary

Due to a reduction in drug costs, this program offer is decreased by \$86,133. There is no change to staffing levels.

**Lead Agency:** Health Department

**Program Contact:** OXMAN Gary L

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Medical Examiner's Office, which is physically located in Clackamas County, determines cause of death for residents who die in special circumstances, such as accidents, violence, drug involvement, and employment.

**Program Description**

The Medical Examiner's Office determines cause of death for residents who die in special circumstances such as accidents, violence, drug involvement, and employment. Approximately 2,500 of the County's 7,000 yearly deaths fall into this category.

The office is responsible for establishing cause and manner of death, notifying the next-of-kin, and protecting the property of the deceased until a personal representative takes charge. Local discretion is limited by the mandates and State Medical Examiner supervision authority arising from ORS 146. The District Attorney's Office provides assistance when necessary. The Medical Examiner's Office is highly visible to the public whenever a death occurs within a community and is directly involved with the families and loved ones of deceased individuals on a daily basis.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of reported cases	2,052	2,250	2,200	2,200
Outcome	Percentage of cases with a positive ID	100.0%	99.9%	99.0%	99.0%

**Performance Measure - Description**

The number of reported cases and the number of death notifications from outside the County combined.  
The percentage of reported cases in which the Medical Examiner's Office made a positive ID.

## Legal/Contractual Obligation

Medical Examiner: ORS 146.085 Deputy medical examiners, 146.088 When medical examiner is officer or employee of public body, 146.090 Deaths requiring investigation, 146.095 Responsibility for investigation. (1) The district medical examiner and the district attorney for the county where death occurs, as provided by ORS 146.100 (2), shall be responsible for the investigation of all deaths requiring investigation.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$785,944	\$0	\$814,318	\$0
Contracts	\$65,500	\$0	\$65,500	\$0
Materials & Supplies	\$11,608	\$0	\$11,933	\$0
Internal Services	\$37,298	\$0	\$45,523	\$0
Total GF/non-GF:	<b>\$900,350</b>	<b>\$0</b>	<b>\$937,274</b>	<b>\$0</b>
Program Total:	<b>\$900,350</b>		<b>\$937,274</b>	
Program FTE	9.00	0.00	9.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

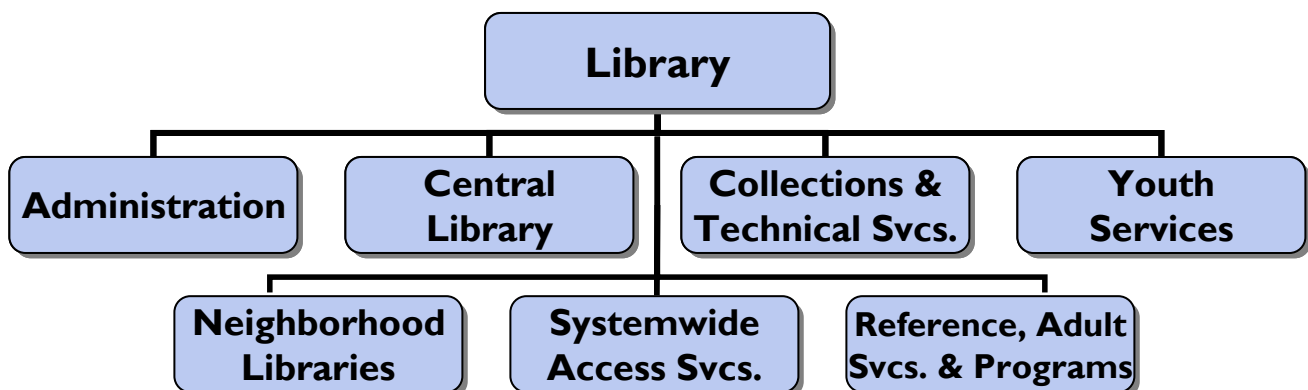
Last year this program was: #15005, Medical Examiner's Office

### Department Overview

Multnomah County Library (MCL) enriches lives by fostering diverse opportunities for all people to read, learn and connect. Multnomah County Library upholds the principles of intellectual freedom and the public’s right to know by providing people of all ages with access and guidance to information and collections that reflect all points of view.

Even with close to 150 years of history in this community, there are still three constants that define the library: a quality collection, excellent service, and welcoming spaces. The seven priorities listed below build upon these constants and help guide the decision-making process to ensure that the Multnomah County Library is providing this community the best services possible with limited resources.

1. Exceptional customer service - MCL patrons consistently receive outstanding customer service that is responsive to change. Patrons easily find staff who are available to assist and interact with them at their points of need.
2. A resource during this economic crisis - Patrons will find resources, programs and support to improve their lives during the current downturn.
3. Efficient materials movement - Patrons will receive their library materials as quickly and cost-effectively as possible. Patrons will be able to access materials in ways that are focused on self-service and ease of use.
4. Early literacy - Children from birth to age five will have programs and services designed to ensure that they will enter school ready to learn to read, write and listen.
5. Success in school: support for K–12 student learning - Students will have the services, materials and resources they need to succeed in school and to improve their literacy.
6. Resources for immigrants - Immigrants will have the information and resources they need to participate successfully in life in the United States.
7. Facilitating civic engagement - Patrons will have access to resources that support, create opportunities for, and inspire participation in our community, as well as address issues of public concern.



### Budget Overview

The Library's FY 2012 budget is \$63.2 million and is \$1.2 million (2.0%) higher than the FY 2011 Adopted Budget. It maintains the level of service outlined in the five-year levy which the voters approved in the fall of 2006. This levy provides funding for the last time in FY 2012.

MCL is funded by a local option levy, the General Fund, and revenue generated from operations. Property tax funding from the levy provides about \$35.4 million (56.6%), the General Fund provides about \$14.5 million (23.1%), and the Library fund balance provides about \$9.2 million (14.8%) of the Library's funding. The use of the fund balance has increased substantially due to higher property tax compression which decreases property tax collections. The remaining \$4.1 million comes from grants, fees, service charges and fines.

Positions decrease by 1.09 to 494 FTE. This change is the result of funding and operational requirements.

<b>Budget Trends*</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2011</b>	<b>FY 2012</b>	
	<b><u>Actual</u></b>	<b><u>Current Estimate</u></b>	<b><u>Adopted Budget</u></b>	<b><u>Adopted Budget</u></b>	<b><u>Difference</u></b>
Staffing FTE	486.51	495.09	495.09	494.00	(1.09)
Personal Services	\$36,065,601	\$38,773,080	\$38,973,740	\$39,688,041	\$714,301
Contractual Services	1,086,976	896,967	1,808,722	1,982,127	173,405
Materials & Supplies	23,162,672	21,016,421	21,196,961	20,798,932	(398,029)
Capital Outlay	<u>235,140</u>	<u>307,800</u>	<u>15,000</u>	<u>737,808</u>	<u>722,808</u>
<b>Total Costs</b>	<b>\$60,550,388</b>	<b>\$60,994,268</b>	<b>\$61,994,423</b>	<b>\$63,206,908</b>	<b>\$1,212,485</b>

\*Does not include cash transfers, contingencies or unappropriated balances.



## Successes and Challenges

Multnomah County Library is one of the best-used urban libraries in the country, ranking second in circulation among all libraries and first among libraries serving fewer than one million people. MCL is also second in circulation per capita among large urban libraries. Use continues to be strong, as seen in these increases from FY 2009 to FY 2010: checkouts up 5.8%, holds filled up 9.4%, public computer use up 4.1%, and the number of people through the doors up 12.4%. With the opening of the Kenton library in FY 2010 and the Troutdale library in early FY 2011, the commitment made to voters in the 2006 levy has been fulfilled.

A major accomplishment in FY 2011 is the completion of the Radio Frequency Identification (RFID) tagging, self-check and security project. This two year project was in response to the explosive increase in the use of the library over the last ten years and the resulting need to handle large materials movement workloads in the most efficient ways possible. The goals of the project are threefold: to provide an easier method of self checkout; to achieve speedier processing of library materials with fewer ergonomic issues for staff; and to improve theft prevention and collection management. Even with three libraries yet to be completed (Belmont, St. Johns, and North Portland), the self checkout rate has gone up 37% overall to 66% and is expected to continue to rise.

In November 2010, Multnomah County voters passed Measure 26-114 with a 72% approval rate. This county charter amendment opens the door for the Board of County Commissioners to refer a library district measure to a future election so that voters can decide whether to form a library district. With the current local option levy expiring in June 2012, a decision will need to be made this spring as to which funding avenue to pursue in the November 2011 election: renewal of the levy or the creation of a library district. In FY 2011, the levy was budgeted to provide 66% of the library's funding, with an additional 24% from the County's General Fund.

Due to the downturn in the local housing market, property tax compression is having a larger-than-anticipated impact on FY 2011 levy revenues and will have an even greater impact in FY 2012. Losses are expected to be \$2.2 million and \$5.6 million, respectively.

Looming large is the impact of the changing reader market. With headlines proclaiming the closure of bookstores and the scrambling of newspapers to stay afloat, Multnomah County Library must be responsive to its patrons' lives and needs. This calls for an ongoing evolution in order to ensure that the library is providing this community valued and critical services that continue to improve its health and quality. The ability to move with MCL's patrons as their use of technology grows and changes requires a level of IT support that is difficult for the County to maintain. This has a direct and growing impact on the library's ability to remain relevant today and into the future.

### Diversity and Equity

Multnomah County Library has always embraced the concept that a public library must be free and open to all. Besides residency in the county, there are no membership requirements, no annual fees, and no restrictions based on age, income, gender, race or creed. Anyone can walk through the library's doors, both physically and virtually, and access all that it has to offer.

Since 2005, the library has made great strides in reflecting the community it serves within its own staff, with a 108% increase in bilingual, bicultural staff.

Recruitment efforts include targeted outreach at specific organizations (such as churches) that provide services to minorities; using random applicant pools for Library Page recruitments in order to ensure greater diversity; analyzing recruitment announcements, tests, and questions to eliminate adverse impact and to add testing and selection criteria for cross cultural effectiveness. Trainings have been created to increase staff cross cultural effectiveness, such as Disability Etiquette; Understanding Vietnamese Culture; and You Can't Judge a Trans-gender Book by its Cover.

The majority of the library's outreach programs are focused on increasing equity in learning opportunities for those who are most at risk. For example, Raising A Reader reaches 40,000 young children, parents and educators through almost 400 partnerships including Head Starts, childcare centers, home health professionals, and non profits. New immigrants and others are offered citizenship classes, GED labs, English learning labs, and Talk Time (English conversation practice). The library is part-way through an assessment grant to determine the best ways to help black children be prepared for kindergarten.

### Budget by Division

Division Name	FY 2012 General Fund	Other Funds	Total Division Cost	Total FTE
Library Administration	\$0	\$5,222,441	\$5,222,441	40.75
Central Library	0	13,696,733	13,696,733	139.25
Collection and Technical Services	0	10,643,659	10,643,659	31.75
Youth Services	0	2,732,992	2,732,992	20.00
Neighborhood Libraries	0	21,383,548	21,383,548	229.50
Systemwide Access Services	0	7,431,463	7,431,463	18.00
Reference, Adult Services and Programming	0	2,096,072	2,096,072	14.75
<b>Total Library</b>	<b>\$0</b>	<b>\$63,206,908</b>	<b>\$63,206,908</b>	<b>494.00</b>

### Department Administration

Department Administration provides executive leadership for the library system; connects the community with the many services the library offers; manages the library's finance and budget operations; promotes the resource management of highly qualified staff; provides flexible staffing coverage for the system; and provides opportunities for people to contribute their time and talents to Multnomah County Library.

The Director's Office works with elected leaders, stakeholders, citizens, and staff to ensure that library services meet the needs of Multnomah County residents;

Marketing and Communications connects the library with the more than 35,000 people that use it each day, both online and in person;

Human Resources/Learning Systems provides assistance with all aspects of the employment cycle, as well as coordinating training for staff and patrons;

System Wide Staffing provides flexible staffing coverage and addresses materials movement issues across the system;

Volunteer Services oversees the recruitment and placement of volunteers for all library locations, outreach programs, and the Title Wave Used Bookstore.

### Significant Changes

The System Wide Staffing unit (8.50 FTE) was transferred from the Neighborhood Libraries division (80016) to Department Administration (80011). This unit was previously focused on providing flexible staffing coverage for staff absences and materials movement needs at neighborhood libraries; with this change, the unit is also involved in covering these same type of needs at Central Library. The library has over 550 employees working in 21 locations; Central Library and the 18 neighborhood libraries are open seven days/week. The System Wide Staffing unit helps ensure adequate staff coverage at all public service locations.

A 0.50 Program Coordinator was added to Volunteer Services during FY 2011 through the reallocation of a vacant position. This position will help with the workload increases brought about by the addition of two new libraries as well as deal with the overall upswing in the number of volunteers requesting placement. Volunteer Services coordinates the efforts of 1,800 volunteers who are expected to contribute over 65,000 hours in FY 2011.

### Central Library

Referred to as “Portland’s Crown Jewel,” Central Library is a cherished historic building, a downtown destination for locals and tourists alike. Over 2,700 people visit Central Library every day, from all around Multnomah County, the surrounding metropolitan areas, and southwestern Washington.

First opened in September 1913 and extensively renovated in 1994-97, Central Library has more than 17 miles of bookshelves. The largest public library building in Oregon, Central Library houses a diverse collection of nearly 800,000 current and historic books and other materials, including the Oregonian newspaper back to the first issue from 1850.

Statistics from the last fiscal year demonstrate the heavy use of the Central Library. Over 200,000 reference questions were answered, from people with diverse needs such as students requesting homework help to entrepreneurs wanting to start a new business. Members of the public spent over 150,000 hours on the Internet in a wide variety of activities such as completing job applications, filing applications for student financial aid, or researching the cost of a new car. Almost 400 school classes and other groups came to tour the library, conduct research, hear stories, and select materials to check out. Over 17,000 new borrowers signed up for library cards. Almost 30,000 people of all ages from babies through seniors attended a wide variety of programs and classes.

### Significant Changes

In January of 2010, the Central Library implemented an RFID system for materials management. The result: in FY 2010, 49% of all checkouts were patron-initiated; in FY 2011, 75% of check-outs are projected to be from the self-check machines. This change in work flow has allowed Central to move toward a new way of serving the public. The majority of reference librarians have been reorganized into four work groups to streamline and focus their professional work in materials selection, collection management, programs, outreach, reference services, and technology. Central Access Services has been realigned in an effort to create a more integrated approach to circulation and materials movement -- from the checking in to the checking out of materials and every step in between -- resulting in the redistribution of 3.75 FTE from Central’s staff to fill staffing needs of the Neighborhood Libraries.

Over the past year, the implementation of system-wide efforts in customer service training and efficient materials handling has allowed Central to deploy and manage staff in a more responsive, flexible, and customer-oriented manner. With the implementation of the RFID system, staff are able to shift some of their work from labor-intensive materials movement and clerical tasks to more personalized customer service. From the public’s point of view, patrons will see all staff practicing a more mobile approach to public service, using portable devices to help get people the information they need in the most effective way.

### Collections and Technical Services

The Collection and Technical Services Division acquires, catalogs, processes and manages the library's collection for all locations. It is organized into four units:

1. The Selections Unit works with vendors, publishers and professional review sources to select materials in all formats (print, CDs, DVDs, electronic) for purchase. This unit monitors collection use by location, age group, and patron requests to determine current needs.
2. The Acquisitions Unit orders, claims, receives, and pays for collection materials. This unit monitors use of collection funds, pays invoices, and maintains fund accounting records.
3. The Cataloging Unit creates database records that show what the library owns, where materials are located, and whether they are available. These records enable patrons to see availability, place holds on copies, and check out materials.
4. The Materials Processing Unit prepares materials for use by applying protective labels, jackets, and packaging. This unit sorts new materials for direct delivery to library locations.

In FY 2011, the Division added 39,000 new titles (340,000 copies) to library locations. It also managed approximately 3,300 periodical subscriptions, more than 120 databases, and a growing number of online resources. The electronic materials can be accessed 24/7 outside the library.

### Significant Changes

In FY 2011, the Library added significant new materials in electronic format to the collection in response to the rapid changes occurring in the publishing industry and changing user expectations. Two notable recent additions are the complete backfile of the Oregonian from 1867 to 1989, and a music download service called Freegal which provides a new way to deliver music to library cardholders.

A package of 22,000 ebooks designed for public libraries is planned for spring 2011. The Library expects that the transition to digital materials will accelerate in FY 2012 and beyond. It is anticipated that this transition to a digital collection will have impact on many aspects of library operations in the future.

## Youth Services

Youth Services serves children from birth through grade 12 in three areas: Youth Services Management, Early Childhood Services, and School-Age Services. Youth Services Management provides planning and oversight, ensuring adequately trained staff and system-wide programming that focuses on young people, such as Summer Reading and the Tapestry of Tales Storytelling Festival. Summer Reading 2010 had 85,000 participants, a 36% increase from 2009.

Early Childhood Services programs impact the literacy levels of children before they enter school by working with their adult caregivers to ensure that they know how to best impact young children's learning. Programs include: working with the county health clinics to provide a prescription for reading (Reach Out and Read); a training program for early childhood care and education providers, on-site mentoring, and a book delivery program (Early Words); a program funded by The Library Foundation to encourage parents to read with their preschoolers (Raising a Reader); a literacy-focused package sent to parents of newborns (New Parent Gifts); and parent education.

School-Age Services works in partnership with school districts and after school programs to improve student success by encouraging pleasure reading (Books 2 U); and by providing instruction in using public library resources while meeting educators' needs for curriculum-support as well as literacy focused after school programs with SUN (School Corps).

## Significant Changes

While there are no significant changes in the FY 2012 budget, both School-Age Services and Early Childhood Services are keeping an investigative eye on emerging technologies and rapidly changing information content delivery systems. Seeking out research, communicating with local school districts and early childhood agencies, and listening to the public will all inform the direction Youth Services takes to utilize new tools and applications.

As the poverty center shifts east, Youth Services staff continues to create new opportunities and refine existing relationships with educational agencies. More time is spent delivering services to East County than ever before. The library continues to prioritize outreach to SUN schools, providing after school extended learning and recreational programming.

Early Childhood Services is in the midst of a federal Library Services and Technology Act grant through the Oregon State Library addressing how the library can best help black students be prepared for kindergarten. This may result in new programming and resources, new partnership opportunities, and refined processes for ensuring inclusion and creating a welcoming environment at the libraries and through outreach programs.

### Neighborhood Libraries

Spread throughout Multnomah County, the 4 regional and 14 neighborhood libraries are essential centers of community life providing books, movies, music, Internet access, programs, and meeting spaces for residents who visited these locations over 4.8 million times last year. These libraries range from historic buildings to landmark modern designs and cozy neighborhood gathering places. Patrons come from a wide variety of locations and backgrounds, with vastly differing needs.

Neighborhood libraries circulate books and other materials, present educational and engaging programs for all ages, and provide free meeting space for community groups. Libraries are open seven days a week, giving patrons access to nearly 2 million books and other materials including collections in Spanish, Russian, Vietnamese, and Chinese. Children and young people participate in story times, after school activities including teen lounges, and a Summer Reading Program that last summer enrolled over 85,000 kids. Adults can develop critical life skills by attending computer classes, taking advantage of job labs, and participating in book groups and language learning programs such as Talk Time. Dedicated volunteers contribute over 40,000 hours of service each year.

Users of the neighborhood libraries truly believe that these are their libraries. Individuals, families, schools, businesses and neighborhood associations all welcome neighborhood libraries as valuable assets in their communities.

### Significant Changes

In FY 2010, and continuing into FY 2011, Neighborhood Libraries converted to RFID (Radio Frequency Identification) technology, and made large scale operational and facilities changes. These changes facilitate the patron's experience at the library by making it easier to check out books and other materials, and to ask for assistance; increase collection security; and improve materials handling efficiency, which will help reduce ergonomic injuries for staff.

Troutdale library opened at the beginning of FY 2011. Along with Kenton library, which opened in FY 2010, it showcases new service models and priorities including: one stop service desks for patrons; opportunities for fast and easy self-service; and staff whose focus has changed from intense materials handling tasks to direct customer service. This year, those same innovations that started at Kenton and Troutdale have expanded to other neighborhood libraries, such as Lucky Day collections of popular, high-demand books; a more proactive approach to customer service, including one stop service desks where possible; and "Lean Your Library" changes that make materials handling more efficient so that staff has more time for welcoming and assisting patrons.

The System Wide Staffing unit (8.50 FTE) transferred from the Neighborhood Libraries division (80016) to Department Administration (80011), to reflect the expansion of their role in covering absences and materials movement needs for both the branch libraries and Central Library.

### Systemwide Access

Systemwide Access Services has three service areas: Information Technology (IT) Services; Facilities and Materials Movement; and Customer Support and Account Management. Together, these programs ensure that library buildings and the library's on-line presence are inviting, safe, and functional; that print and on-line library materials and services are available when and where patrons need them, and that patrons receive excellent customer service in person and online.

IT supports staff computing and maintains nearly 750 computers for public use, plus wired and wireless networks for the public to access resources such as the library catalog, licensed databases, downloadable books and media, and web sites that assist with job hunting, continuing education, and access to government services.

Materials Movement ensures that library books and materials move quickly and accurately among all 21 library locations; this program expects to move 264,000 crates in FY 2011. Library Facilities coordinates the maintenance of 21 library buildings and grounds in a safe, secure, and cost effective manner.

Customer Access and Account Management develops policies and rules to help people use library services, including almost 76,000 new cardholders in FY 2011. It manages IT support, develops and trains staff on new policies and procedures, ensures good stewardship of library collections, and manages projects.

### Significant Changes

In FY 2011, Customer Access and Account Management, with assistance from IT Services, completed conversion of the library's collections to RFID and the installation of RFID check-out equipment and theft-detection gates at the new Troutdale Library and the final 12 library locations.

Implementation of a \$200,000 grant from the Mt. Hood Cable Regulatory Commission, begun in FY 2011, will finish in September 2012, adding approximately 180 new netbook or tablet devices for public use with the library's wireless network.



## Reference, Adult Services and Programs

The Reference, Adult Services and Programming (RASP) Division is responsible for the development, coordination, support, and review of reference, public programming, and adult outreach services in order ensure consistent quality throughout the library.

RASP provides leadership, training, support, information and resources to Multnomah County Library's reference librarians and library assistants so they can quickly and accurately connect the residents of Multnomah County with the resources they want and need. Reference staff are available to assist residents in person, by phone, by email, or online in partnership with L-net, Oregon's state-wide online reference service. In FY 2011 reference staff will answer over 793,000 questions from patrons.

The Family and Adult Programming section of RASP plans, coordinates, supports, and executes approximately 2,500 events and public programs at libraries and other community gathering places each year, all designed to enrich and transform the lives of children, families, and adults.

The Adult Outreach section of RASP provides library services and programs to Multnomah County residents underserved by traditional library means, including older adults, new immigrants, people with disabilities, adult learners, institutionalized people, and homeless people.

## Significant Changes

RASP is in the second year of a \$100,000 FINRA/ALA Smart investing @ your library grant to strengthen financial literacy for two specific target groups: at-risk parents and seniors. The library is one of 19 national recipients of this grant. The grant supplies funds to educate at-risk parents and seniors about money management, online banking, investment, financial fraud, and more. To date, 75 library staff have received training on providing financial literacy assistance, and six workshops have been conducted for 42 library patrons, with 86% of the attendees indicating that they learned something new as a result of the financial workshops.

In 2011, RASP began a mobile reference pilot in five library locations. Staff received training on how to better meet patrons at their point of need within library buildings. Each location received one or more iPads and iPhones as well as training on these devices so that staff have the technology necessary to answer questions via the library's electronic databases and the Internet while they are assisting patrons out on the floor. A reference librarian recently shared an experience where she approached a couple, and, with her iPad, was able to help them with submitting a resume, got them signed up for a CyberSeniors class, shared information about other computer classes and labs, and finished up by directing them to community resources for learning job searching skills. The mobile reference trial will run through November 2011, followed by evaluation and adjustments before rolling out to all library locations.

## Multnomah County Library

The following table shows the programs that make up the departments total budget. The individual programs follow their respective divisions.

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
<b>Library Administration</b>					
80007	Library Director's Office	\$0	\$779,061	\$779,061	5.00
80008	Marketing & Communications	0	1,198,637	1,198,637	8.50
80009	Library Business Services	0	1,344,264	1,344,264	7.75
80010	Volunteer Svcs/Title Wave Book Store	0	468,343	468,343	3.50
80011	Human Resources/Learning Systems/System Wide Staffing	0	1,432,136	1,432,136	16.00
<b>Central Library</b>					
80000	Central Library	0	10,690,650	10,690,650	135.75
80012	Central Director's Office	0	3,006,083	3,006,083	3.50
<b>Collection and Technical Services</b>					
80013	Library Book Budget	0	6,790,000	6,790,000	0.00
80014	Library Books - Acquisition & Processing	0	3,853,659	3,853,659	31.75
<b>Youth Services</b>					
80003	School-Age Services	0	1,147,296	1,147,296	10.00
80004	Early Childhood Services	0	1,032,906	1,032,906	7.50
80015	Youth Services Management	0	552,790	552,790	2.50
<b>Neighborhood Libraries</b>					
80001	Regional Libraries	0	7,900,667	7,900,667	84.00
80002	Neighborhood Libraries	0	12,926,142	12,926,142	141.50
80016	Neighborhood Libraries Management	0	556,739	556,739	4.00
<b>Systemwide Access Services</b>					
80017	IT Services	0	4,979,819	4,979,819	0.00
80018	Facilities & Material Movement	0	1,581,785	1,581,785	13.00
80019	Customer Support & Account Management	0	869,859	869,859	5.00
<b>Reference, Adult Services and Programming</b>					
80005	Family & Adult Programming	0	745,179	745,179	3.00
80006	Adult Outreach	0	711,115	711,115	7.75
80020	Reference Services Coordination	0	639,778	639,778	4.00
<b>Total Library</b>		<b>\$0</b>	<b>\$63,206,908</b>	<b>\$63,206,908</b>	<b>494.00</b>

**Lead Agency:** Library

**Program Contact:** Susan Banks

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Central Library offers books, informational services, public programs and classes, and meeting space. Central Library serves the diverse people and communities throughout Multnomah County: urban core, suburban neighborhoods, disadvantaged, affluent, preschoolers, students, retirees, job hunters, and culture seekers. Central Library provides services seven days per week, including two evenings.

**Program Description**

Central Library engages citizens with ideas and brings them together for community interaction by providing programs, meeting rooms, and public forums as well as books and other informational materials. More than 950,000 people visit Central annually, averaging over 2,700 visits per day. Central Library fosters opportunities and resources for lifelong learning by offering access to more than 761,000 books and other items. Central Library provides 100 public computers with free Internet access used more than 152,000 hours (76.7% utilization rate); answers over 219,000 information queries; offers 1,652 programs; and contributes to sustainability by sharing resources that would have cost \$24 million annually if purchased by individuals.

This offer provides opportunities for diverse neighbors to interact and engender a sense of community. People attend programs done in partnerships with other organizations, such as the PCC co-sponsored "lunch & learn" series that improves work and life skills. Central Library also offers a variety of forums and resource fairs where people meet, gather, and discuss ideas and issues pertinent in the community. Groups use meeting rooms for their own community meetings and events. Central Library provides essential services to those without computers by providing free Internet access through Internet stations, wireless access, and a variety of free computer labs and classes. Central Library provides people from all walks of life with a lifetime of learning through books, magazines, and online resources in an array of subjects - from art & music to job hunting & car repair, from poetry & philosophy to adult literacy & language learning. Breaking down cultural and economic barriers, Central empowers new immigrants, small business owners, seniors, students, and the homeless by providing information survival tools needed to develop life skills.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Books and items checked out or renewed	2,978,419	2,800,000	2,973,392	2,900,000
Outcome	Patrons who found books or items they wanted	91.5%	92.0%	92.0%	92.0%
Efficiency	Books and items checked out per capita	31	29	31	31

**Performance Measure - Description**

Outcome: From the library's annual Output Measures survey.

Efficiency: Checkouts & renewals per capita (circulation/service population): Multnomah County has the second highest circulation per capita in the nation among libraries serving more than 250,000 people. (Source: Public Library Data Service Statistical Report)

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$10,183,097	\$0	\$10,090,722
Contracts	\$0	\$82,380	\$0	\$88,090
Materials & Supplies	\$0	\$245,638	\$0	\$239,303
Internal Services	\$0	\$178,690	\$0	\$262,535
Capital Outlay	\$0	\$15,000	\$0	\$10,000
Total GF/non-GF:	<b>\$0</b>	<b>\$10,704,805</b>	<b>\$0</b>	<b>\$10,690,650</b>
Program Total:	<b>\$10,704,805</b>		<b>\$10,690,650</b>	
Program FTE	0.00	140.25	0.00	135.75
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

✔ Significantly Changed

### Last year this program was:

#80000 - Central Library

Net decrease of 4.5 FTE.

In FY 2011 the Central Library continued to pursue efficiencies in staffing and workflow to serve the public more effectively. Initiatives in mobile reference, flexible staffing of all public service desks, cross-training for a variety of classifications and a revamping of online patron services were undertaken to improve the patron experience.

**Lead Agency:** Library  
**Program Offer Type:** Existing Operating  
**Related Programs:** 80002

**Program Contact:** Rita Jimenez

**Program Characteristics:**

**Executive Summary**

This program offer is for the four regional libraries: Gresham, Hillsdale, Hollywood, and Midland. Regional libraries have more space and larger collections, and offer more services, than the smaller neighborhood libraries. Last year, residents visited regional libraries over 2 million times and benefited from diverse learning, cultural, and recreational opportunities.

**Program Description**

Multnomah County residents currently have access 7 days a week, including some evenings, to over 497,000 items at the 4 regional libraries, including books and other items in Spanish, Vietnamese, Chinese, and Russian. Children and young people participate in storytimes, Summer Reading, and afterschool activities (peak hours for juvenile crime). More than 1,100 groups have used free community space for meetings, thereby fostering meaningful citizen involvement and neighborhood interaction. Residents develop critical life skills through job training resources, book groups, opportunities for civic engagement, and other library programs. Libraries help bridge the digital divide by providing free basic computer classes and free Internet access to those without computers. Language learning and educational programs improve employment opportunities and quality of life for those residents with low English proficiency and limited resources.

The 4 regional libraries offer a variety of programs that provide opportunities for neighbors to interact. Dedicated volunteers from youth to seniors contribute over 15,300 hours of service each year. In addition, libraries serve as a bridge for the diverse cultures within Multnomah County. Residents who are non-English speakers enjoy about 537 bilingual programs and events each year. Regional libraries offer culturally diverse programs such as Dia de Los Ninos and Lunar New Year celebrations. Regional libraries provide opportunities & resources for lifelong learning by providing free access to computers and high-speed wireless Internet (30% of Oregon households do not have fast Internet access). The 104 public computers with Internet access are used for almost 307,000 sessions and more than 576 free computer classes and labs help attendees develop life and job skills. Residents also access information, training, and other resources to increase literacy skills and become citizens. Research indicates that youth participation in summer reading programs results in improved reading skills and enhances all other learning. 8,906 children participated in the 2010 Summer Reading program, and 58,942 people attended youth programs at regional libraries last year.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Books and items checked out or renewed	6,590,357	6,700,000	6,634,282	6,600,000
Outcome	Patrons who found books and items they wanted	89.4%	91.0%	90.0%	90.0%
Efficiency	Cost per item checked out or renewed (requires decimal – see below)	0	0	0	0

**Performance Measure - Description**

Efficiency: Cost per item checked out or renewed (total annual expenditures/total circulation): FY10 actual = \$2.62; FY11 purchased = \$2.64; FY11 estimate is same as FY11 purchased = \$2.64; FY12 offer = \$2.62. Among the nation's busiest libraries, MCL has one of the lowest costs per item checked out. (Source: Public Library Data Service Statistical Report)

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$6,234,400	\$0	\$6,440,084
Contracts	\$0	\$7,250	\$0	\$7,000
Materials & Supplies	\$0	\$77,450	\$0	\$105,041
Internal Services	\$0	\$1,314,179	\$0	\$1,348,542
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$7,633,279</b>	<b>\$0</b>	<b>\$7,900,667</b>
<b>Program Total:</b>	<b>\$7,633,279</b>		<b>\$7,900,667</b>	
Program FTE	0.00	83.75	0.00	84.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

**Last year this program was:** #80001, Regional Libraries  
Net increase of .25 FTE.

**Lead Agency:** Library

**Program Contact:** Rita Jimenez

**Program Offer Type:** Existing Operating

**Related Programs:** 80001

**Program Characteristics:**

**Executive Summary**

This program offer is for the 14 neighborhood libraries: Albina, Belmont, Capitol Hill, Fairview-Columbia, Gregory Heights, Holgate, Kenton, North Portland, Northwest, Rockwood, St. Johns, Sellwood-Moreland, Troutdale & Woodstock libraries. Last year, residents visited neighborhood libraries over 2.8 million times and benefited from diverse learning, cultural, and recreational opportunities.

**Program Description**

Neighborhood libraries serve as community facilities where residents can attend classes, programs, and community forums that provide opportunities for neighbors to interact. County residents have access 7 days a week, including some evenings, to a collection of almost 690,000 books and other items, including materials in Spanish, Vietnamese, Chinese, and Russian. Children & young people participate in storytimes, Summer Reading, and after-school activities (peak hours for juvenile crime). Residents develop critical life skills through job training resources, book groups, civic engagement, and other library programs. Libraries help bridge the digital divide by providing free Internet access and free basic computer classes to those without computers. Language learning and educational programs improve employment opportunities and quality of life for those residents with low English proficiency and limited resources.

The neighborhood libraries offer a variety of programs that provide opportunities for neighbors to interact. Dedicated volunteers from youth to seniors contribute over 30,000 hours of service each year, and over 1,200 groups use free library space for community meetings. In addition, libraries serve as a bridge for the diverse cultures within Multnomah County. Residents who are non-English speakers enjoy over 1,560 bilingual programs and events each year. Neighborhood libraries provide opportunities and resources for lifelong learning by providing free access to computers and high-speed wireless Internet. The 146 public computers with Internet access are used for almost 393,000 sessions, and more than 830 free computer classes and labs help attendees develop life and job skills. Residents also access information, training and resources to increase literacy skills and become citizens. Research indicates that youth participation in summer reading programs results in improved reading skills and enhances all other learning. 11,837 children participated in the 2010 Summer Reading program, and 117,927 people attended youth programs at neighborhood libraries last year.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Books and items checked out or renewed	10,350,689	10,000,000	10,970,610	10,500,000
Outcome	Patrons rated programs as good or excellent	99.0%	98.0%	98.0%	98.0%
Efficiency	Cost per item checked out or renewed (requires decimal -- see below)	0	0	0	0

**Performance Measure - Description**

Efficiency: Cost per item checked out or renewed (total annual expenditures/total circulation): FY10 actual = \$2.62; FY11 purchased = \$2.64. FY11 estimate is same as purchased = \$2.64. FY12 offer = \$2.62. Among the nation's busiest libraries, MCL has one of the lowest costs per item checked out. (Source: Public Library Data Service Statistical Report).

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$10,303,407	\$0	\$10,688,486
Contracts	\$0	\$14,300	\$0	\$14,600
Materials & Supplies	\$0	\$132,969	\$0	\$200,900
Internal Services	\$0	\$2,145,105	\$0	\$2,022,156
Total GF/non-GF:	<b>\$0</b>	<b>\$12,595,781</b>	<b>\$0</b>	<b>\$12,926,142</b>
Program Total:	<b>\$12,595,781</b>		<b>\$12,926,142</b>	
Program FTE	0.00	139.75	0.00	141.50
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

Last year this program was: #80002, Neighborhood Libraries  
Net increase of 1.75 FTE.



**Lead Agency:** Library

**Program Contact:** Katie O'Dell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Measure 5 Education

**Executive Summary**

School-Age Services (SAS) improves kindergarten through high school students' reading and information literacy by training students to effectively use public library online research tools; by connecting students with dynamic book collections and reading motivation programs; and by offering curriculum support, training, and resources for their educators, parents and caregivers. Services are targeted toward students at risk of low literacy.

**Program Description**

SAS staff, who are trained in research, booktalking, and reading promotion, serve students, educators, parents, and caregivers in public and private schools, community agencies, county programs, treatment facilities, and other locations serving school-age youth. Staff provide information, books, training, recreational programs, and technical support to increase students' and invested adults' literacy and information skills. Thousands of quality children's books are delivered to schools and community agencies. School Corps (SC) provides direct service to students, parents, and educators during the school day, after school, and during the summer. Librarians collaborate with educators to increase students' academic success and literacy in the county's K-12 schools & SUN programs by training students to effectively and efficiently use public library resources for student research and pleasure reading. BOOKS 2 U (B2U) staff and volunteers introduce students to high-interest books through booktalking programs and by providing paperback copies of books they promote. Their goal is to introduce Multnomah County Library as an educational partner and significant resource. To that end, they attend and present at parent and family night programs; provide library cards to children served; and promote the library's Summer Reading program, as well as the neighborhood library and its services.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Youth served in B2U & SC in school year programs (duplicated)	164,050	120,000	104,000	104,000
Outcome	% of students whose research skills increase after SC presentation	93.0%	90.0%	90.0%	90.0%
Quality	% of teachers indicating that they will ask for SC services again	100.0%	95.0%	95.0%	95.0%
Outcome	% of schools served that show improvement in 3rd & 5th grade reading scores	65.0%	60.0%	60.0%	60.0%

**Performance Measure - Description**

Measure 1 counts contacts during both in-school and out-of-school hours during the school year. Data for Measure 2 comes from a student pre/post test. Data for Measure 3 comes from online teacher surveys. Data for Measure 4 comes from the Oregon State Department of Education.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$982,845	\$0	\$997,470
Contracts	\$0	\$4,500	\$0	\$0
Materials & Supplies	\$0	\$109,395	\$0	\$116,671
Internal Services	\$0	\$26,129	\$0	\$33,155
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,122,869</b>	<b>\$0</b>	<b>\$1,147,296</b>
<b>Program Total:</b>	<b>\$1,122,869</b>		<b>\$1,147,296</b>	
Program FTE	0.00	10.00	0.00	10.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$38,084 is expected from the State's "Ready to Read" per capita funding. \$176,124 comes from The Library Foundation for Books 2 U.

## Significant Program Changes

**Last year this program was:** #80003, School Age Services  
No significant changes.

**Lead Agency:** Library

**Program Contact:** Renea Arnold

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** Measure 5 Education

**Executive Summary**

Early Childhood Services (ECS) helps children enter kindergarten with the skills they need to learn to read by enhancing their parents' and caregivers' knowledge about and skills in fostering early literacy, early brain development, and hands-on literacy activities, and by providing demonstrations of best practices in sharing books with their children. Services are directed toward families whose children are at risk for low literacy.

**Program Description**

ECS staff, who are trained in child development, brain development, and early reading research, visit parents and caregivers in social service agencies, childcare centers, Head Start centers, teen parent programs, treatment facilities, and any other locations serving adults with children birth to 5. They teach parents and caregivers how to prepare their preschool children for reading. Classes, taught in English, Spanish, Russian, Chinese, and Vietnamese, show adults how to read, talk, sing, and rhyme with babies, toddlers, and preschoolers so that children develop the pre-reading skills they need before they enter kindergarten.

From birth to age 5, children go through a critical window for brain development that supports literacy. Reading, talking, singing, and rhyming with children during this sensitive time determines a child's future as a reader. Many parents and caregivers don't know how early this window opens—and closes—and how tremendous an impact simple actions can have on their children's future ability to read. Children must have early experiences with language, books, and writing tools to become successful readers. Research shows that disadvantaged children start kindergarten with significantly lower cognitive skills than their more advantaged counterparts because of their lack of language and literacy experiences BEFORE they get to school. The most vulnerable children are those who live in poverty, speak English as a second language, have few books in their homes, and whose mothers have limited education and low literacy. ECS reaches these parents on-site and shows them easy ways to help their children gain pre-reading skills during these most important years. Program evaluations show that parents and caregivers gain clear knowledge of their role in their children's preparedness for reading. This program links to the Early Childhood Framework Early Care and Education Goal: "All children benefit from developmentally appropriate active learning opportunities."

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Parents, teen parents and caregivers served	7,019	6,500	6,500	6,500
Outcome	% of participants who show an increase in reading & literacy activities	90.0%	90.0%	92.0%	90.0%
Output	Books delivered	461,555	200,000	450,000	450,000

**Performance Measure - Description**

Outcome - Parents show an increase in five behaviors: 1. Encourage child to participate more often; 2. Point out pictures and talk about them; 3. Read the book more than once; 4. Ask or answer questions while reading; 5. Talk about new words.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$687,432	\$0	\$681,863
Contracts	\$0	\$62,550	\$0	\$19,900
Materials & Supplies	\$0	\$313,270	\$0	\$305,871
Internal Services	\$0	\$22,349	\$0	\$25,272
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,085,601</b>	<b>\$0</b>	<b>\$1,032,906</b>
<b>Program Total:</b>	<b>\$1,085,601</b>		<b>\$1,032,906</b>	
Program FTE	0.00	7.50	0.00	7.50
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$38,084 is expected from the State's "Ready to Read" per capita funding. \$360,080 comes from The Library Foundation for Raising A Reader and New Parent Programs.

## Significant Program Changes

**Last year this program was:** #80004, Early Childhood Services  
No significant changes.

**Lead Agency:** Library

**Program Contact:** Terrilyn Chun

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Family and Adult Programming plans, coordinates and executes a wide variety of public events and programs at libraries and other community gathering places, all designed to enrich the lives of children, families, and adults. Examples include author talks, exhibits, lectures, computer classes, craft programs, civic discussions and cultural events. Teens and adults participate in monthly book groups and in Everybody Reads, Multnomah County's community-wide reading project; children and families attend craft programs and kid-friendly performances; and annual events such as Dia de los Ninos and Lunar New Year highlight and celebrate the diversity of the Spanish, Chinese, Vietnamese and Russian-speaking communities.

**Program Description**

This program provides opportunities for neighbors to read, learn, interact and connect with each other. Programs focus on library priorities, such as being a resource during tough economic times, promoting and supporting early literacy and success in school, providing resources for immigrants, and facilitating civic engagement. Reading and discussion programs such as Pageturners book groups and the annual Everybody Reads facilitate meaningful discussions about current issues and build a sense of community and mutual understanding. Programs also promote and support literacy, education and lifelong learning, especially for those unable to afford other opportunities. Examples include basic computer classes, English language practice sessions for non-native speakers, and financial literacy programs for at-risk parents and seniors. Programs like concerts, opera previews and symphony storytimes also support local culture and recreation. After-school activities for youth include art classes and teen lounges. Partnerships with and support from other organizations help develop new audiences, maximize resources and build mutually beneficial relationships with other agencies. Partners include Oregon Humanities, Portland State University, the World Affairs Council, Delta Society, OASIS, the School and Community Reuse Action Project (SCRAP), the Multnomah County Health Department, Aging and Disability Services, and the Commission on Children, Families and Community.

Family and Adult Programming staff provide the professional and technical expertise to make more than 2,300 programs possible each year and help more than 45,000 residents learn about and interact within their community. Responsibilities include scheduling, grant writing, exhibit building, volunteer coordination, event management, website development, publicity, evaluation, fiscal oversight and maintenance of an online events database.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of financial literacy programs offered	107	50	36	65
Outcome	Attendees who say library programs connect them to their community	47.0%	50.0%	41.0%	50.0%
Outcome	Attendees who say they learned something new at a library program	84.0%	80.0%	81.0%	80.0%
Quality	Attendees of library programs who rate them as "Good" or "Excellent"	99.0%	98.0%	97.0%	99.0%

**Performance Measure - Description**

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$302,738	\$0	\$287,187
Contracts	\$0	\$244,600	\$0	\$281,550
Materials & Supplies	\$0	\$138,250	\$0	\$158,877
Internal Services	\$0	\$12,855	\$0	\$17,565
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$698,443</b>	<b>\$0</b>	<b>\$745,179</b>
<b>Program Total:</b>	<b>\$698,443</b>		<b>\$745,179</b>	
Program FTE	0.00	3.34	0.00	3.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$34,000 will be received from a FINRA/ALA Smart Investing @ your library grant. An additional \$48,000 in revenue will come from the Friends of the Library for the Pageturners book group discussion program.

\$52,965 comes from The Library Foundation for program enhancements.

## Significant Program Changes

**Last year this program was:** #80005, Family & Adult Programming  
Net reduction of .34 FTE.

**Lead Agency:** Library  
**Program Offer Type:** Existing Operating  
**Related Programs:**

**Program Contact:** Jane Salisbury

**Program Characteristics:**

**Executive Summary**

Adult Outreach provides library services and programs to Multnomah County residents underserved by traditional library means, including older adults, new immigrants, people with disabilities, adult learners, institutionalized people, and homeless people. Adult Outreach delivers books and other materials to people who are homebound; provides resources and conducts classes and other programs for immigrants, new readers and GED seekers; and partners with community agencies.

**Program Description**

Adult Outreach delivers books and other library materials and services to Multnomah County residents who are homebound, or who live in assisted living facilities, retirement homes, adult care homes, shelters, transition homes, or jails (the latter in partnership with the Sheriff's Office). Adult Outreach connects these people with their community by providing library services and programs, such as book discussion groups. Adult Outreach, in partnership with other literacy organizations, also supports people whose first language is not English - or who do not know how to speak, read, or write English - by providing assistance, referrals, resources, and library programs, including citizenship classes, GED labs, English learning labs, and Talk Time (English conversation practice). Delivering books, reading to homebound people, providing useful programs with expert speakers, leading book discussion groups for seniors, teaching citizenship classes, leading book groups in the jails, and leading English conversation practice sessions in neighborhood libraries provide meaningful opportunities for volunteers, working with outreach staff, to contribute significantly to the lives of vulnerable citizens.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Book discussion groups for seniors	248	250	250	250
Outcome	Attendees who say book discussion programs connect them to their community	90.0%	90.0%	70.0%	70.0%
Output	Facilitated English conversation sessions for non-native speakers	131	250	130	130

**Performance Measure - Description**

Output: The number of facilitated English conversation sessions (Talk Time) has decreased because of two factors: a natural dwindling of the attendance at one of the groups, and the loss of volunteer facilitators. It is in the nature of this program to ebb and flow: As participants become more fluent, they leave the group, and as volunteers move on to other pursuits, groups end. The existing Talk Time groups are well-attended by enthusiastic participants at three library branches.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$664,053	\$0	\$662,036
Contracts	\$0	\$6,500	\$0	\$0
Materials & Supplies	\$0	\$19,896	\$0	\$19,014
Internal Services	\$0	\$26,802	\$0	\$30,065
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$717,251</b>	<b>\$0</b>	<b>\$711,115</b>
<b>Program Total:</b>	<b>\$717,251</b>		<b>\$711,115</b>	
Program FTE	0.00	8.00	0.00	7.75
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

The Sheriff's Office provides \$35,000 for services to jails from the Inmate Welfare Fund.

## Significant Program Changes

**Last year this program was:** #80006, Adult Outreach  
Net reduction of .25 FTE.



**Lead Agency:** Library

**Program Contact:** Vailey Oehlke

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Library Director's Office provides executive leadership for the library system by working with the Board of County Commissioners (BCC), the Library Advisory Board (LAB), community organizations, businesses, private citizens, and staff to ensure that library services meet the needs of Multnomah County residents.

**Program Description**

The Library Director's Office envisions the library's role and future in the community; translates that vision into strategic direction in partnership with the BCC, the community, and the Library Advisory Board; represents Multnomah County Library on local, regional, and national levels, working with other libraries and library organizations; partners with The Library Foundation and the Friends of the Library to enhance citizen support and fundraising efforts; executes policy development and implementation with the senior management team; and leads with county peers in achieving enterprise-wide objectives. This office is directly responsible to Multnomah County residents for the effectiveness and efficiency of the library system. Every five years, voters have an opportunity to express their opinion about library services through the local option levy election.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Customer comments received and processed (electronic and paper)	2,626	2,500	2,650	2,650
Outcome	Conversations with the Library Director	19	19	28	19

**Performance Measure - Description**

Output: Citizen input received through comment cards and the library's website.

Outcome: Scheduled events for the Library Director to communicate and connect directly with staff regarding library issues.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$608,338	\$0	\$620,286
Contracts	\$0	\$55,000	\$0	\$61,300
Materials & Supplies	\$0	\$52,970	\$0	\$70,998
Internal Services	\$0	\$21,653	\$0	\$26,477
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$737,961</b>	<b>\$0</b>	<b>\$779,061</b>
<b>Program Total:</b>	<b>\$737,961</b>		<b>\$779,061</b>	
Program FTE	0.00	4.00	0.00	5.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$545,000	\$0	\$546,400
Intergovernmental	\$0	\$496,905	\$0	\$484,935
Taxes	\$0	\$40,440,113	\$0	\$35,416,964
Other / Miscellaneous	\$0	\$20,512,405	\$0	\$26,758,609
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$61,994,423</b>	<b>\$0</b>	<b>\$63,206,908</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$681,444 (\$15,000 for this offer) comes from The Library Foundation for program and collection enhancements.

## Significant Program Changes

**Last year this program was:** #80007, Library Director's Office  
Net increase of 1.0 FTE

A 1.0 FTE vacant senior management position has been re-considered in terms of the organization's myriad needs. As a result of this evaluation, the funding for this position has been used to add a lower level analyst position and create a clerical support position.

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:**

**Program Contact:** Jeremy Graybill

**Program Characteristics:**

**Executive Summary**

Marketing & Communications is responsible for creating and coordinating effective and valuable conversations with the library's patrons, staff, community and stakeholders. The group connects the community with library services, promotes the benefit of these services, and constantly seeks effective strategies to engage with the community and adapt to the changing informational needs of the community.

**Program Description**

Marketing & Communications provides essential services to the library and the more than 35,000 people that use the institution each day, either online or in person. Marketing & Communications brings the library to the attention of the public, performs ongoing activities to build a strong public image, keeps the library in the mind of the community through marketing, achieves beneficial and informative coverage in the media, and is responsible for understanding library users to inform strategic decisions on how to best meet their needs. Marketing & Communications also oversees the library's public website — now visited more frequently than the library's physical locations — online presence in social media and e-mail marketing, and the library's intranet.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Visits to the library's website	7,714,746	8,000,000	8,000,000	8,200,000
Outcome	% of customers satisfied with library communications	98.0%	98.0%	97.0%	97.0%

**Performance Measure - Description**

The above performance measures were gathered via an online survey and via Google Analytics.

**Output:** The visits to the library's website are an indicator of use, as well as of usability and return visits. The steady increase in traffic demonstrates both an effective website, an effectively operated website and - approaching eight million annual visits - a website that is becoming the primary tool of library users.

**Outcome:** Among respondents to the survey this year, 97% stated that they were satisfied with library communications. This survey had more than 300 respondents and was administered in late January 2011.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election  
 The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$816,904	\$0	\$815,824
Contracts	\$0	\$52,000	\$0	\$132,800
Materials & Supplies	\$0	\$227,617	\$0	\$215,603
Internal Services	\$0	\$23,226	\$0	\$34,410
Total GF/non-GF:	<b>\$0</b>	<b>\$1,119,747</b>	<b>\$0</b>	<b>\$1,198,637</b>
Program Total:	<b>\$1,119,747</b>		<b>\$1,198,637</b>	
Program FTE	0.00	8.50	0.00	8.50
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

Last year this program was: #80008, Marketing & Communications  
 No significant changes.

**Lead Agency:** Library

**Program Contact:** Becky Cobb

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Business Services manages the library's finance and budget operations, provides administrative clerical support for management and program staff, and provides front-desk reception for the Library Administration building.

**Program Description**

Business Services manages the annual budget preparation and submittal process; monitors and adjusts the budget throughout the fiscal year; manages contracts, procurements, and grants; and processes and oversees accounts payable and receivable for the library system. This program ensures that library funds are budgeted, received, accounted for, and spent appropriately. Administrative staff answer the main phone number for the library system and assist people by explaining policies, answering questions, and referring people to the appropriate library service, while also completing clerical tasks and projects for management and program staff.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Telephone calls answered by administrative support staff	18,954	15,500	17,000	17,000
Outcome	Invoices paid within 30 days	91.0%	88.0%	88.0%	90.0%

**Performance Measure - Description**

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$931,842	\$0	\$957,770
Contracts	\$0	\$3,000	\$0	\$3,000
Materials & Supplies	\$0	\$103,571	\$0	\$91,064
Internal Services	\$0	\$276,836	\$0	\$292,430
Total GF/non-GF:	<b>\$0</b>	<b>\$1,315,249</b>	<b>\$0</b>	<b>\$1,344,264</b>
Program Total:	<b>\$1,315,249</b>		<b>\$1,344,264</b>	
Program FTE	0.00	7.75	0.00	7.75
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

Last year this program was: #80009, Business Services  
No significant changes.

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:**

**Program Contact:** June Mikkelsen

**Program Characteristics:**

**Executive Summary**

Volunteer Services provides opportunities for more than 1,800 people annually who contribute their time and talents to Multnomah County Library. Volunteers are active in all locations, including Central Library, the 18 neighborhood libraries, Library Administration, and the Title Wave Used Bookstore, as well as various outreach programs.

The Title Wave Used Bookstore is a retail outlet that generates revenue for the library through the sale of discarded books and other materials. Opened in 1988, the Title Wave provides an effective means of recycling the library's collection back into the community.

**Program Description**

Volunteer Services oversees the recruitment, screening, placement, and recognition of over 1,800 volunteers. Volunteers enhance the services that the library can provide at all library locations in the community. The scope of volunteer opportunities includes booktalking with Books 2 U, conducting storytimes in child care centers with Raising A Reader, delivering library materials to shelters through Adult Outreach, teaching seniors basic computer skills through Cyber Seniors classes, and searching for reserved items at all library locations. Volunteers are given skills and responsibilities that engage them in their libraries and neighborhoods. About 40% of library volunteers are students, 10-18 years old. Students are given an experience that provides life skills and engages them in their community. Last year, 1,839 volunteers contributed over 65,000 hours to the library.

The Title Wave Used Bookstore recycles and sells discarded library books and materials to the community. The store is open 36 hours per week and is fully staffed by 65 volunteers with the support of one paid staff person. Because the used books are sold at reasonable prices, many of the Title Wave's regular customers are teachers/media specialists buying books for their classrooms and libraries. Many homeschool families buy books for educational purposes as well. Last year, the Title Wave generated over \$218,000 in revenue.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Hours contributed by volunteers	65,335	58,900	65,400	65,500
Outcome	Student volunteers who report using their svc for school/community requirement	42.0%	39.0%	42.0%	43.0%

**Performance Measure - Description**

Outcome: All library volunteers under the age of 18 years old were surveyed to see if their volunteer hours were eligible for school or community service requirements. 42% of the responding volunteers reported that their volunteer hours counted toward school or community service requirements.

## Legal/Contractual Obligation

Measure No. 26-81 "renew Five-year Local Option Levy to Continue Library Services", November 2006 General Election- The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue book delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods in East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$309,181	\$0	\$356,632
Contracts	\$0	\$11,400	\$0	\$59,900
Materials & Supplies	\$0	\$31,205	\$0	\$33,703
Internal Services	\$0	\$11,338	\$0	\$18,108
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$363,124</b>	<b>\$0</b>	<b>\$468,343</b>
<b>Program Total:</b>	<b>\$363,124</b>		<b>\$468,343</b>	
Program FTE	0.00	3.00	0.00	3.50
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

Volunteer Services is receiving \$50,767 from a Library Services & Technology Act (LSTA) grant received from the State Library for the establishment of an internship program.

## Significant Program Changes

**Last year this program was:** #80010, Volunteer Svcs/Title Wave Book Store

Net increase of .50 FTE. This position was added due to the increase in library locations that need volunteer support and the increase in volunteer hours. In FY 2010 there was a 12% increase in the number of volunteer hours contributed by community members.



**Lead Agency:** Library

**Program Contact:** Shelly Kent

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Human Resources/Learning Systems (HR/LS) promotes the resource management of highly qualified staff by providing management consultation and technical assistance with the employment life cycle through recruiting, hiring, and retaining staff; time entry; staff training and development; and consulting with employees and managers, including planning for future workforce needs.

System Wide Staffing provides flexible staffing coverage and addresses materials movement issues across the system through the use of regular and on-call staff. Those employees move between locations as needed to cover planned and last-minute absences and vacancies, as well as to provide relief for temporary workload increases and support for special projects.

**Program Description**

HR/LS supports the library's mission and goals by ensuring HR systems are collaboratively implemented; assisting and consulting with over 560 regular and 132 on-call/temporary employees and supervisors; and assessing, developing, and coordinating employee training needs and learning opportunities. HR/LS provides internal consultation to managers and employees on a wide range of HR, employee, and labor relations issues, including: performance management to ensure a highly functioning workforce; recruitment to attract highly qualified, diverse applicants to serve the changing needs of county residents; legal, contractual, and policy compliance to reduce liability and the costs of unlawful employment actions; and accurate time entry to ensure that employees are paid correctly for hours worked. HR works with staff and managers to assess organizational needs; provide strategic direction, succession, and workforce planning; and provide learning opportunities to ensure highly qualified and competent staff who have the requisite skills to serve their customers. HR/LS partners with central HR/labor relations to develop and implement integrated HR initiatives & solutions.

System Wide Staffing supports the library's mission and goals by providing flexible staffing for temporary projects, workload increases, and absences.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Staff training sessions offered by learning systems	111	150	227	150
Outcome	Increase in number of bilingual/bicultural FTEs	3.7%	0.0%	3.7%	2.0%

**Performance Measure - Description**

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$1,271,236	\$0	\$1,321,251
Contracts	\$0	\$17,000	\$0	\$17,000
Materials & Supplies	\$0	\$33,100	\$0	\$50,726
Internal Services	\$0	\$21,296	\$0	\$43,159
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,342,632</b>	<b>\$0</b>	<b>\$1,432,136</b>
<b>Program Total:</b>	<b>\$1,342,632</b>		<b>\$1,432,136</b>	
Program FTE	0.00	16.00	0.00	16.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #80011, Human Resources/Learning Systems  
Move 8.50 FTE staff and personnel budget from Neighborhood Libraries Management (80016).

**Lead Agency:** Library

**Program Contact:** Susan Banks

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Central Library Director's Office (CDO) sets overall direction for Central Library; directs, develops, and evaluates services, programs, and staff; and administers the Central Library budget.

**Program Description**

CDO consists of the Central Library Director, an administrative specialist, a senior office assistant, and a senior administrative analyst. In collaboration with the Library Director's Office, the CDO determines service, policy, and fiscal priorities for Central Library. This office oversees and supports the Central Management Team, coordinates priorities/needs with those of the 18 other library locations, communicates with the public regarding Central-related issues, helps manage public and county use of meeting space, oversees building security, manages telecommunications for the building, responds to facilities issues, and maintains an active connection with the downtown business and civic communities. Administrative staff provide building-wide administrative support. This office is responsible for the effectiveness and efficiency of Central Library services and the related expenditure of funds. CDO proactively engages with the downtown community and is responsive to the concerns and needs of all Central Library users.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Visits to Central Library	958,406	980,000	975,724	975,000
Outcome	Customers who rated Central's programs good or excellent	98.0%	99.0%	98.0%	98.0%

**Performance Measure - Description**

**Output:** Central Library is a popular destination for area residents. Every day, thousands of people walk through its doors to attend a program, conduct research, use the Internet and more.

**Outcome:** From customer evaluations of Central Library programs.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$348,960	\$0	\$354,452
Contracts	\$0	\$12,000	\$0	\$17,000
Materials & Supplies	\$0	\$9,936	\$0	\$38,792
Internal Services	\$0	\$1,926,329	\$0	\$1,868,031
Capital Outlay	\$0	\$0	\$0	\$727,808
Total GF/non-GF:	<b>\$0</b>	<b>\$2,297,225</b>	<b>\$0</b>	<b>\$3,006,083</b>
Program Total:	<b>\$2,297,225</b>		<b>\$3,006,083</b>	
Program FTE	0.00	3.50	0.00	3.50
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #80012, Central Director's Office

One-time-only expenses for the John Wilson Room fire suppression and security system upgrades have been added to this program offer for FY 2012.

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:** 80014

**Program Contact:** Pat French

**Program Characteristics:**

**Executive Summary**

The Library Book Budget provides funds to add new materials in all formats to the library collection. It purchases new books, music CDs, DVDs, audiobooks, maps, sheet music, periodicals, databases and a variety of materials in electronic and downloadable formats. This is the book budget only; personnel and related processing costs are in the linked program offer.

**Program Description**

Approximately 45% of the book budget is spent on new books in English for children, teens and adults. Five percent is spent on materials in four target languages (Spanish, Chinese, Vietnamese and Russian). Remaining funds are spent on other formats, including 20% on media (DVDs, CDs and audiobooks), 15% on electronic resources (electronic books, electronic journals and databases), and 2% on print periodicals. Multiple copies of each new title are purchased to ensure that people find what they want when they visit a library or access library resources online. The total collection size in June 2010 was 1.97 million items. The library collection gives the community access to a rich selection of current recreational and educational materials that support personal development, enrich civic engagement, support lifelong learning and literacy, expand cultural competency, and help build community identity for adults. The collection also provides materials for preparing to read and learning to read for all ages.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	New titles added to the library collection	39,143	35,000	39,368	39,000
Outcome	Turnover rate	11	11	11	11

**Performance Measure - Description**

Outcome: Turnover rate is a measure of how heavily the library collection is used (defined as circulation/holdings). Nationally, the average for public libraries serving a similar population is 4.3; MCL's rate is the highest in the country for libraries serving 500,000 or more. (Source: Public Library Data Service Statistical Report).

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Materials & Supplies	\$0	\$6,695,000	\$0	\$6,790,000
Total GF/non-GF:	<b>\$0</b>	<b>\$6,695,000</b>	<b>\$0</b>	<b>\$6,790,000</b>
Program Total:	<b>\$6,695,000</b>		<b>\$6,790,000</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

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$40,000 comes from The Library Foundation for collection enhancements.

## Significant Program Changes

**Last year this program was:** #80013, Library Book Budget  
No significant changes.

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:** 80013

**Program Contact:** Pat French

**Program Characteristics:**

**Executive Summary**

Library Books - Acquisition & Processing provides the staff necessary to select, purchase, catalog and process books and other materials added to the library materials collection in order to meet the informational, recreational and cultural needs of Multnomah County residents.

**Program Description**

Selection librarians decide what materials to buy, using professional reviews, customer suggestions, and staff input, along with established criteria. Their purchasing decisions reflect the diverse interests and needs of Multnomah County residents. Acquisitions staff place orders with vendors, receive shipments, approve invoices for payment, and monitor the various funds that make up the library materials budget. Cataloging staff create bibliographic description records and assign classification numbers to enable searching in the online catalog and to ensure logical shelving locations that enable browsing. The online catalog currently lists 687,301 titles with a total collection of 1.97 million physical items. Processing staff prepare each item/volume for shelving and checkout. This includes applying property stamps and barcodes, repackaging materials to stand up to heavy patron use, and creating inventory records. Staff members visit a neighborhood library each month to remove out-of-date and damaged materials to keep the collection current, accurate, and attractive. Program staff are responsible for accurate accounting and expenditure of public funds and private donations. They are also accountable for ensuring that the library collection reflects the needs and interests of Multnomah County residents. Because of the successful management of the library materials collection, residents can enjoy recreational reading, research specific topics, stay current on local, national and global events, and continue to learn at all ages.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Items added to the collection	359,271	340,000	340,000	325,000
Outcome	Patrons who found books and items they wanted	90.1%	91.0%	90.0%	90.0%

**Performance Measure - Description**

Outcome: From the library's annual Output Measures survey.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$2,632,382	\$0	\$2,681,754
Contracts	\$0	\$627,782	\$0	\$704,387
Materials & Supplies	\$0	\$321,421	\$0	\$358,502
Internal Services	\$0	\$72,001	\$0	\$109,016
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$3,653,586</b>	<b>\$0</b>	<b>\$3,853,659</b>
<b>Program Total:</b>	<b>\$3,653,586</b>		<b>\$3,853,659</b>	
Program FTE	0.00	31.75	0.00	31.75
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

**Last year this program was:** #80014, Library Books-Acquisition & Processing  
No significant changes.



**Lead Agency:** Library

**Program Contact:** Ellen Fader

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Youth Services Management ensures that library staff receive training to work with children and teens birth through age 17; offers reading promotion initiatives; and sets overall direction for services to this age group and their adult caregivers.

**Program Description**

Youth Services Management is provided systemwide through four main elements: staff training; youth reading initiatives; coordination, partnerships, and advocacy; and program development and evaluation. The office plans systemwide services; develops and evaluates programs; oversees development and education for staff; advocates in the community for increased use of libraries by children and teens and their parents and caregivers; and explores and engages in community partnerships to increase youth library use, support other organizations' literacy objectives, and improve students' reading scores.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	County children & teens who have library cards	50.4%	51.0%	50.0%	50.0%
Outcome	Staff who report improved/reinforced skills after Youth Services training	93.0%	90.0%	95.0%	90.0%
Output	Cardholding children & teens who use their library card	57.0%	55.0%	55.0%	55.0%

**Performance Measure - Description**

The outcome measure shows the result of training opportunities for staff and volunteers to serve youth in the best manner possible. The two output measures illustrate this program's success at connecting Multnomah County youth with their public library.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$313,838	\$0	\$326,088
Contracts	\$0	\$73,700	\$0	\$61,700
Materials & Supplies	\$0	\$134,650	\$0	\$150,131
Internal Services	\$0	\$11,498	\$0	\$14,871
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$533,686</b>	<b>\$0</b>	<b>\$552,790</b>
<b>Program Total:</b>	<b>\$533,686</b>		<b>\$552,790</b>	
Program FTE	0.00	2.50	0.00	2.50
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

\$37,275 comes from The Library Foundation for Summer Reading and other program enhancements.

## Significant Program Changes

**Last year this program was:** #80015, Youth Services Management  
No significant changes.

**Lead Agency:** Library

**Program Contact:** Rita Jimenez

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Neighborhood Libraries Management (NLM) sets overall direction for 18 regional and neighborhood libraries. NLM plans services; develops and evaluates programs and staff; and administers the budget for all locations. NLM also manages systemwide library services to four target language communities (Chinese, Russian, Spanish and Vietnamese), with over 50 bilingual staff in nine locations.

**Program Description**

NLM consists of the Neighborhood Libraries Director, Neighborhood Libraries Manager, LIBROS Library Outreach Specialist, and a Senior Office Assistant. In collaboration with the Library Director, the NLM: provides general support and oversight to 18 libraries and continual communication with staff at all levels of the organization; develops collaborative relationships with community and governmental organizations to maximize the impact of library services; sets priorities and policies for libraries to best address community needs and county priorities; implements best practices for safe and efficient operations of materials handling tasks; and provides resources to individual managers, staff, and work groups to improve their performance through ongoing training, coaching, leadership development, and assessments.

NLM supports and directs the work of regional and neighborhood libraries, which were visited over 4.8 million times by county residents last year. These libraries provide learning, cultural and recreational opportunities to all county residents, as well as a community space for civic engagement.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Hired front line staff in target languages of Chinese, Russian and Vietnamese	2	2	2	2
Outcome	% of branch managers who received a completed performance review by end of FY	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

**Output:** Target language staffing needs are consistently reviewed as communities change and grow.

**Outcome:** 100% of branch managers have a current performance plan in place with measurable goals, receive a mid-year check-in, and have a completed review by the end of the fiscal year. Performance management is a major effort on the part of the Neighborhood Libraries Director and Neighborhood Libraries Manager.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$443,364	\$0	\$452,290
Contracts	\$0	\$50,300	\$0	\$59,700
Materials & Supplies	\$0	\$63,150	\$0	\$29,415
Internal Services	\$0	\$25,513	\$0	\$15,334
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$582,327</b>	<b>\$0</b>	<b>\$556,739</b>
<b>Program Total:</b>	<b>\$582,327</b>		<b>\$556,739</b>	
Program FTE	0.00	4.00	0.00	4.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #80016, Neighborhood Libraries Management  
Transfer 8.50 FTE staff and personnel budget to Human Resources/Learning Systems/System Wide Staffing (80011).

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:**

**Program Contact:** Cindy Gibbon

**Program Characteristics:**

**Executive Summary**

IT Services maintains more than 700 public computers, related software and servers, high-speed Internet access, and a public wireless network in library facilities for use by the general public. Library users can search the catalog of books and other materials, view and manage their library accounts, use research databases and other electronic resources, and access the Internet for educational, business, and personal use. These services are also available from homes, schools, and offices via the library website. IT services also maintains more than 600 computers, related software, equipment, servers and networks for library staff use.

**Program Description**

IT Services procures, installs, configures, and maintains software, computers, printers, adaptive technology for those with special needs, electronic self-service equipment, servers and related equipment for library patrons and staff. Children and adults use library computers to do personal and business research, complete homework assignments, apply for jobs, find recreational reading, communicate with government agencies, manage their library accounts, and participate in the social web. Public computers also provide office automation software, such as word processing, to accomplish personal, business, or school work. The library has computers and software in training rooms, teen after-school homework lounges, and for checkout to be used in-house with the library's public wireless network. Many public computer users have no access to a computer or the Internet at home, so the library is their only window to the world of 21st century technology, communication, and information.

IT services also maintains equipment and software for library staff, supporting general office computing and library systems such as the library catalog, patron database, circulation system, materials acquisition system, website, provision of electronic resources, and other internal operations.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of public computers	704	760	746	926
Outcome	% of time wired public Internet computers are in use	77.9%	85.0%	73.0%	70.0%

**Performance Measure - Description**

**Output:** Number of public computers (wired and wireless). Additional computers were added with the opening of the new Troutdale Library and through grants from the Gates Foundation; more will be added through a Mt. Hood Cable Regulatory Commission grant.

**Outcome:** % of time wired public Internet computers are in use. This measure is trending downward with the installation of wireless access in all library locations and the addition of loaner laptops through grant funds. This is a positive customer service trend because it translates to shorter wait times for a computer. Eventually, it should mean that users will be allowed a greater amount of computer time each day. Currently, the limit is one hour per day per user on wired computers. Loaner laptops may be used for two hours. The one-hour time limit is not sufficient for those who do not have a computer at home and need a library computer to complete job applications, write resumes, fill out tax forms, complete school writing assignments and other critical tasks.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$31,581	\$0	\$31,581
Contracts	\$0	\$200,000	\$0	\$200,000
Materials & Supplies	\$0	\$574,109	\$0	\$645,646
Internal Services	\$0	\$4,422,330	\$0	\$4,102,592
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$5,228,020</b>	<b>\$0</b>	<b>\$4,979,819</b>
<b>Program Total:</b>	<b>\$5,228,020</b>		<b>\$4,979,819</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

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

This program offer will receive \$200,000 in grant funding from the Mt. Hood Cable Regulatory Commission. This was originally budgeted in FY 2011, but the project has been delayed until FY 2012.

## Significant Program Changes

**Last year this program was: #80017, IT Services**

In FY11 this program supported installation of RFID check-out equipment and security gates at one new library and 12 additional library locations. In FY12, a grant from the Mt. Hood Cable Regulatory Commission will fund the installation of about 180 additional loaner laptops or tablet devices for public use with the library's wireless network.

**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:**

**Program Contact:** Mike Harrington

**Program Characteristics:**

**Executive Summary**

Materials Movement ensures that library books and materials move quickly and accurately among all 21 library locations. Library Facilities coordinates the maintenance of the buildings and grounds in a safe, secure, and cost-effective manner.

**Program Description**

Materials Movement operates the centralized sort center and delivery operations that move library materials to and among library locations, enabling residents to have quick access throughout Multnomah County. This program operates a seven day-per-week delivery system that provides delivery to 42 service points each week day, delivering and receiving all library books and materials, interoffice mail, U.S. mail, library supplies, and bank deposits.

Library Facilities provides central coordination and direction of repair and maintenance activities among county facilities staff, telecommunications, contractors, and vendors for 21 library locations. This program serves all library staff and the public as expert resources on ADA-compliant building access, ergonomics, workflow management, security policy, and safety management.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Crates of books, mail, and supplies moved annually	251,512	254,000	264,087	264,000
Outcome	Staff satisfaction with delivery system	96.0%	95.0%	98.0%	95.0%

**Performance Measure - Description**

Output: In FY 2011 Materials Movement expects to sort and deliver about 264,000 crates. A crate is the library's unit of measurement for transporting library materials, mail, supplies, and other items. This is a 5% projected increase from FY 2010.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to continue Library Services" November 2006 General Election - The levy language reads: "Continue programs for school-age children, story hours for babies and toddlers, summer reading, literacy services for children in childcare, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved areas of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$911,118	\$0	\$928,634
Contracts	\$0	\$2,100	\$0	\$2,100
Materials & Supplies	\$0	\$18,100	\$0	\$29,777
Internal Services	\$0	\$656,773	\$0	\$621,274
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,588,091</b>	<b>\$0</b>	<b>\$1,581,785</b>
<b>Program Total:</b>	<b>\$1,588,091</b>		<b>\$1,581,785</b>	
Program FTE	0.00	12.75	0.00	13.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

**Last year this program was:** #80018, Facilities & Material Movement  
Net increase of .25 FTE.



**Lead Agency:** Library  
**Program Offer Type:** Support  
**Related Programs:**

**Program Contact:** Cindy Gibbon

**Program Characteristics:**

**Executive Summary**

Customer Support & Account Management facilitates the public's use of library collections and services and supports staff delivering library services directly to the public. Staff in this program develop and implement policies, coordinate IT support for all library operations, manage the integrated library computer system (ILS), assist frontline staff and managers with process improvement, develop and deliver systemwide trainings on circulation procedures and customer service, steward the library's collections, and manage special projects.

**Program Description**

This program develops library policies and procedures that ensure equitable and safe access to library services; works with IT management to ensure adequate IT support for library services; manages the ILS; trains and coaches staff and monitors uniform implementation of policies and procedures systemwide; handles escalated customer service issues; oversees the collection of overdue library materials; monitors materials handling workloads, streamlines processes, and recommends staffing adjustments to improve productivity and minimize staff injuries; protects patron privacy; ensures the library's compliance with applicable federal, state, and local law; and manages special projects. The program ensures that Multnomah County Library users have equitable access to library services, that the public's investment in the library's collection is protected, that processes are efficient and effective to meet the public's demand for library resources at best value for the taxpayer's dollar, and that materials move efficiently among neighborhood libraries. Policies and procedures are designed to balance the public values of access and stewardship.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Total new cards/welcome notices issued annually	71,809	76,000	75,930	75,000
Outcome	Average dollar value of customer accounts sent to collection agency (rounded)	126	125	129	132
Efficiency	Cost per item checked out/renewed (see below)	0	0	0	0
Output	% of checkouts done by self checkout	25.0%	40.0%	60.0%	75.0%

**Performance Measure - Description**

**Output:** Total of welcome/address verification postcards issued to new library registrants to verify addresses and to inform parents of the library's Internet access policy for children and teens.

**Outcome:** Average \$ value of customer accounts sent to collection agency annually. (Total dollar value of accounts/total number of accounts.) Trending slightly upward, perhaps due to recession.

**Efficiency:** Cost per item checked out (total annual expenditures/total circulation). FY10 actual = \$2.62; FY11 purchased = \$2.64; FY11 estimate = 2.64; FY12 offer = 2.62. Among the nation's busiest libraries, Multnomah County Library has one of the lowest costs per item checked out.

**Output:** This measure relates to RFID checkout station implementation to be completed systemwide by the end of FY11. Increased use of patron self-checkout should lead to decreased repetitive stress injuries and worker's compensation claims related to materials handling.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$549,616	\$0	\$542,500
Contracts	\$0	\$180,560	\$0	\$115,300
Materials & Supplies	\$0	\$395,500	\$0	\$187,929
Internal Services	\$0	\$277,916	\$0	\$24,130
Total GF/non-GF:	<b>\$0</b>	<b>\$1,403,592</b>	<b>\$0</b>	<b>\$869,859</b>
Program Total:	<b>\$1,403,592</b>		<b>\$869,859</b>	
Program FTE	0.00	5.00	0.00	5.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #80019, Customer Support & Account Management

During FY10 and FY11 this program managed the implementation of the library's RFID check-out and security system. Conversion of collections and installation of equipment at the final 12 library locations will be completed by the end of FY11, resulting in a decrease in the FY12 budget.

**Lead Agency:** Library

**Program Contact:** Brett Lear

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Reference Services provides leadership, training, support, information and resources to Multnomah County Library's reference librarians and library assistants so they can quickly and accurately connect Multnomah County residents with the resources they want and need. Reference staff are available to assist in person, by phone, by e-mail, or online in partnership with L-net, Oregon's statewide online reference service. Staff connect with patrons virtually through Facebook, Twitter, and library blogs.

**Program Description**

Reference Services is responsible for the training and support of the systemwide reference staff through classes and professional development forums. Reference Services continually reviews patrons' needs and trains staff to respond to those needs. Reference Services aligns its work with the library's priorities and the needs of county residents. For example, to help those struggling with job loss, Reference Services maintains a website that links to local agencies providing services, offers classes and workshops for county residents, and provides job labs at several library locations for those seeking employment and assistance.

Reference Services staff work with other library sections and county agencies, such as HR, Learning Systems, Technical Services, and IT to ensure reference staff throughout the system are up to date with the latest trends in technology, have a print and electronic reference collection that helps them serve their patrons, and are trained to use that collection. The Reference, Adult Services, and Programming (RASP) Coordinator is responsible for the development, coordination, support, and review of reference, public programming, and adult services, ensuring consistent quality in collaboration with the Youth Services Director, and the managers of Central Library and Neighborhood Libraries.

The Family and Adult Programming section of RASP plans, coordinates, supports, and executes approximately 2,500 events and public programs at libraries and other community gathering places each year, all designed to enrich and transform the lives of children, families, and adults. The Adult Outreach section of RASP provides library services and programs to Multnomah County residents underserved by traditional library means, including older adults, new immigrants, people with disabilities, adult learners, institutionalized people, and homeless people. L-net, Oregon's statewide online reference service, connects Oregonians to librarians online with 24/7 chat and e-mail reference service. The extended network of libraries allows referral of reference questions among libraries. Librarians and other staff at 36 Oregon public, academic, school, and special libraries who provide the service are supported through ongoing training and quality assurance programs.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of reference questions answered	785,009	800,000	793,000	790,000
Outcome	Increase in the % of reference staff who are contributing shifts to L-Net	8.0%	5.0%	20.0%	7.0%
Output	Number of staff who attend reference forums	235	200	190	205

**Performance Measure - Description**

Output: With the two new libraries and the move to finding patrons that need assistance via mobile reference, the number of reference questions answered should hold steady or increase slightly in FY 2012.

Outcome: In FY 2011 the number of staff that contributed to L-net grew as some staff from the two new libraries began contributing L-net shifts. As staffing "L-net Local" begins in FY 2011, the number of staff systemwide contributing L-net shifts should increase modestly in FY 2012.

Output: In FY 2012 staff will be trained on emerging technologies such as ebooks and ereaders.

## Legal/Contractual Obligation

Measure No. 26-81 "Renew Five-Year Local Option Levy to Continue Library Services", November 2006 General Election – The levy language reads: "Continue programs for school age children, story hours for babies and toddlers, summer reading, literacy services for children in child care, programs for teens; Help teachers and students use library resources; Provide homework helpers to assist children with school work; Maintain free access to information; Update books and materials; Continue books delivery to homebound seniors and nursing home residents; Open planned libraries in underserved neighborhoods of East County and North Portland; Keep libraries open; Maintain current hours and services at Central and neighborhood libraries."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$447,408	\$0	\$451,131
Contracts	\$0	\$101,800	\$0	\$136,800
Materials & Supplies	\$0	\$16,044	\$0	\$30,522
Internal Services	\$0	\$10,902	\$0	\$21,325
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$576,154</b>	<b>\$0</b>	<b>\$639,778</b>
<b>Program Total:</b>	<b>\$576,154</b>		<b>\$639,778</b>	
Program FTE	0.00	4.00	0.00	4.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Library Fund revenue allocated to this program offer represents a pro-rated share of Library Levy taxes (57%), Library Fund balance (15%), and library-generated revenues such as overdue fines, interest earnings, and user charges for services provided to library patrons (5%). General Fund revenue represents about 23% of the library's total revenue.

This program offer will receive \$358,000 from the Oregon State Library for the statewide online reference service, L-Net.

## Significant Program Changes

**Last year this program was:** #80020, Reference Services Coordination  
No significant changes.

## Department Overview

The Nondepartmental budget accounts for those programs and Countywide functions that do not belong to particular departments. Programs include the Board of County Commissioners and its Chair; the Auditor's Office; the County Attorney's Office; the Communications Office; the Offices of Emergency Management, Sustainability, and Diversity & Equity; independent County organizations such as the Commission on Children, Families, and Community; non-County agencies such as the Regional Arts & Culture Council and the Oregon Historical Society; and entities that account for corporate debt service. Fund-level transactions are also budgeted here.

The Board of County Commissioners provides corporate leadership, policy direction, and strategic direction for Multnomah County. The elected Auditor and his staff promote efficient, effective, accountable government. The County Attorney's Office provides legal guidance, advice, and other services. The Communications Office provides information and access to County government for the news media and the public. The County's Office of Emergency Management coordinates countywide emergency disaster preparedness, response, and mitigation activities.

Several independent County agencies provide advice, oversight, analysis, and advocacy on behalf of the County and its citizens. The Commission on Children, Families, and Community works on public policy related to children, families, and economic security. The Local Public Safety Coordinating Council coordinates public safety plans, policies, operations, and strategies of local government agencies in Multnomah County. The Tax Supervising and Conservation Commission oversees budget and tax levy authority for taxing districts in the County; and the Citizen Involvement Committee involves citizens in County policy and decision-making processes.

### Budget Overview

The Nondepartmental budget contains County programs, independent County agencies, corporate functions, and payments to other entities that do not belong to other County departments. The FY 2012 adopted budget for Nondepartmental is \$172,130,340 and 98.60 FTE in all funds.

The FY 2012 proposed budget contains the following structural changes:

- The Office of Information Technology is transferred to the new Department of County Assets, moving \$47,505,408 and 165.14 FTE.
- The Economic Development Office is created by moving 1.00 FTE and other costs from the Office of the Board Clerk, \$206,832.
- Two contracted Commission on Children, Families, and Community (CCFC) programs are moved to DCHS: 211 Info, (\$48,462) and Family Economic Security, (\$54,239).
- The Disaster Preparedness for Vulnerable Populations program is moved from DCHS into the Office of Emergency Management, \$84,070.
- FY 2012 is the first year of the five-year local option levy dedicated to the Oregon Historical Society (OHS). The levy is expected to raise \$1.95 million in its first year, which will be passed through directly to OHS.
- The Government Affairs Office is increased by adding a Legislative Analyst, \$100,000 and 1.00 FTE.

One-time programs proposed for FY 2012 include:

- \$150,000 for a Microlending program, as part of the new Economic Development Office.
- \$52,000 to develop a food system economic cluster.
- \$2,336,000 of one-time General Fund to pay the last two years of debt on the Yeon Annex and to retire revenue bonds associated with Port City.
- \$125,000 for Continuity of Operations planning in Emergency Management.
- \$250,000 for development of an Emergency Coordination Center in the Office of Emergency Management.
- \$225,000 is carried forward for the National Association of Counties (NACo) conference to be held in Portland in July, 2011.

Budget Trends*	FY 2010	FY 2011	FY 2011	FY 2012	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	88.50	96.00	99.14	98.60	(0.55)
Personal Services	\$9,542,673	\$11,367,735	\$11,599,730	\$11,810,539	\$210,809
Contractual Services	24,699,397	25,824,724	26,623,427	30,130,438	3,507,011
Materials & Supplies	6,215,850	7,194,011	7,416,506	7,632,550	216,044
Debt Service	93,250,977	45,289,724	45,289,724	49,914,617	4,624,893
Capital Outlay	0	0	0	20,000	20,000
<b>Total Costs</b>	<b>\$133,708,897</b>	<b>\$89,676,194</b>	<b>\$90,929,387</b>	<b>\$99,508,144</b>	<b>\$8,578,757</b>

\*Does not include cash transfers, contingencies or unappropriated balances. Program Offers DO contain cash transfers, contingencies, and unappropriated balances.

## Successes and Challenges

A selection of FY 2011 successes from Nondepartmental agencies includes:

- Commissioner Loretta Smith took office in District 2 in January, 2011.
- The Tax Supervising & Conservation successfully advocated for legislation that requires taxing districts in Multnomah County to pay half the operating costs of the commission. Previously, the County was entirely responsible for the costs. FY 2011 marked the first year of payments.
- The Commission on Children, Families, and Community leveraged over \$22 million in resources for Multnomah County's children and families.
- The Office of Diversity & Equity launched a two-year cultural change effort, "*What Work Should Be Like*," that will include team-building activities, a county-wide equity inventory, establishment of healthy workplace and diversity policies, and an annual scorecard to measure progress toward diversity and equity goals.
- The Office of Sustainability continues to work on policies and partnerships that enhance the quality of life for County citizens, including work on food equity, energy and the climate, and resource conservation.
- The Auditor's Office plans to release audit reports in FY 2011 on Emergency Management, Land Use Planning, Domestic Violence, Procurement Card Use, and other topics.

## Diversity and Equity

Nondepartmental is the "home" of the County's Office of Diversity and Equity, a hub for county-wide diversity and equity initiatives. The office provides data analysis, training and consulting; policy, practice, and procedure review; coordination of diversity and equity initiatives; equal employment opportunity (EEO) and affirmative action compliance; recruitment outreach audits, and coordination and oversight for the County's Employee Network Groups.

Activities planned for FY 2012 include incorporating behavioral expectations into county-wide trainings; adding a component to the county New Employee Orientation that describes county work culture and behavioral expectations, implementing practice improvements to ensure that county hiring processes reflect behavioral expectations, and creating procedures to ensure that behavior is directly linked to performance expectations and reviews.

# Nondepartmental

fy2012 adopted budget

## Nondepartmental

The following table shows the programs that make up the department's total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
10000	Chair's Office	\$1,260,024	\$0	\$1,260,024	8.50
10001	BCC District 1	482,635	0	482,635	3.80
10002	BCC District 2	482,635	0	482,635	4.00
10003	BCC District 3	482,635	0	482,635	3.80
10004	BCC District 4	482,635	0	482,635	4.00
10005	Auditor's Office	1,282,953	0	1,282,953	8.70
10006	Tax Supervising & Conservation Commission	281,332	0	281,332	2.40
10007	CCFC Administration	0	393,289	393,289	2.50
10008	Community Engagement and Plan Implementation	14,033	428,870	442,903	4.00
10009	Contracts for Services: Birth to 18	0	586,663	586,663	0.00
10013	Communications Office	733,637	0	733,637	6.50
10014	County Attorney's Office	0	3,749,643	3,749,643	22.80
10015	Local Public Safety Coordinating Council	467,440	704,029	1,171,469	2.60
10016	Citizen Involvement Committee	204,867	0	204,867	2.00
10017	Office of the Board	747,270	0	747,270	2.00
10018	General Fund Facilities Charges	4,577,346	0	4,577,346	0.00
10020	County School Fund	0	187,100	187,100	0.00
10021	Pass-Thru Payments to East County Cities	5,203,262	0	5,203,262	0.00
10022	Convention Center Fund	0	20,055,250	20,055,250	0.00
10023	Capital Debt Retirement Fund	0	30,469,235	30,469,235	0.00
10024	GO Bond Sinking Fund	0	16,389,888	16,389,888	0.00
10025	PERS Pension Bond Fund	0	72,325,000	72,325,000	0.00
10026	Revenue Bonds	0	2,680,690	2,680,690	0.00
10028	Office of Emergency Management	675,290	1,327,930	2,003,220	5.00
10029	Office of Emergency Management-UASI Regional Preparedness	0	503,750	503,750	2.00
10030	Government Relations Office	522,346	0	522,346	3.00
10031	OHS Local Option Levy	0	1,945,151	1,945,151	0.00



# Nondepartmental

fy2012 adopted budget

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
10032	Regional Arts & Culture Council	160,206	0	160,206	0.00
10033	Office of Diversity & Equity	608,761	0	608,761	5.00
10034	Office of Sustainability	579,444	0	579,444	5.00
10035A	Economic Development	206,832	0	206,832	1.00
10035B	Microlending	150,000	0	150,000	0.00
10036	NACo Conference	225,000	0	225,000	0.00
10037	Climate Adaptation Plan Specialist	94,199	0	94,199	0.00
10039	Continuity of Operations Planning	125,000	0	125,000	0.00
10040	Emergency Coordination Center Development	250,000	0	250,000	0.00
10041	Disaster Preparedness for Vulnerable Populations	<u>84,070</u>	<u>0</u>	<u>84,070</u>	<u>0.00</u>
Total Nondepartmental		\$20,383,852	\$151,746,488	\$172,130,340	98.60

## Fund Level Programs

The following program offers account for General Fund revenues, the beginning balance in the Behavioral Health Care Fund, and other fund level transactions. General Fund expenditures are budgeted in departments.

Prog. #	Program Name	FY 2012 General Fund	Other Funds	Total Cost	FTE
25101	Mental Health Beginning Working Capital	0	15,618,202	15,618,202	0.00
	<i>This beginning fund balance is not shown in the Nondepartmental detail budget.</i>				
95000	Fund Level Transactions	68,732,787	41,136,292	109,869,079	0.00
	<i>This beginning fund balance is not shown in the Nondepartmental detail budget.</i>				
95001	General Fund Revenues	370,904,851	0	370,904,851	0.00
	<i>This program offer contains the budget for General Fund revenues. Expenses are budgeted in departments.</i>				

(this page intentionally left blank)

**Lead Agency:** Chair  
**Program Offer Type:** Existing Operating  
**Related Programs:**  
**Program Characteristics:**

**Program Contact:** Jeff Cogen

**Executive Summary**

The Chair is the Chief Executive Officer of Multnomah County. The Chair works closely with the Board of County Commissioners to set the policy direction of Multnomah County and implements that direction as mandated by the Home Rule Charter. All Departments and non-departmental offices report to the Chair, including Emergency Management, Office of Diversity and Equity, Communications Office, Board Clerk's Office and the Office of Sustainability.

**Program Description**

The Chair oversees a \$1.3 billion dollar budget and over 4,400 Full Time Employees. Chair Cogen and his staff are focused on improving the health and welfare of Multnomah County residents by leading innovative, creative, cost-effective and practical pathways to community improvement. The Chair develops the Executive Budget; appoints and supervises department directors; has authority over litigation, contracts and financial instruments and manages the Board agenda. The Chair is also the Chief Personnel Officer for the County.

In FY2012, Chair Cogen will continue his commitment to championing programs and efforts that reflect our county's values and promote the common good. The Chair's goals include: restructuring government administration to meet industry standards and best practices; reducing administrative costs to shift resources to direct services; working with our community partners to leverage resources to add or improve services; and to continue to be innovative to while facing deep cuts from the State of Oregon. State cuts will affect many county programs, but the Chair's Office will work to prioritize services for vulnerable populations. Chair Cogen will maintain his focus on solidifying the County's responsibility to underrepresented communities by empowering the Office of Diversity and Equity. The Chair's office will also continue to guide the work of the Office of Sustainability to promote access to fresh food and land for urban farming; share methods of sustainability with the public and emphasize cultural inclusion in the environmental movement.

The Chair's Office values transparency and broad community engagement. The office will continue to work with regional partners on completing the Sellwood Bridge and the East County Courthouse.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Respond within 24 hours to constituent emails, calls and concerns	0.0%	100.0%	95.0%	100.0%
Outcome	Swift action on constituent concerns	0.0%	0.0%	0.0%	100.0%
Output	Convene Multnomah Evolves Steering Committee & Workgroups	0	0	0	1
Outcome	Proposal and approval of FY13 budget	1	1	1	1

**Performance Measure - Description**

 **Measure Changed**

In FY 12 the Chair's office will begin to implement changes to the county's business practices and culture with the following goals: Prioritize direct services, strategically manage county assets, benchmark support services to industry standards, create clear responsibility and accountability, better integrate county-wide values of equity, sustainability and stewardship.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$1,183,044	\$0	\$976,204	\$0
Contracts	\$30,173	\$0	\$30,000	\$0
Materials & Supplies	\$55,720	\$0	\$65,909	\$0
Internal Services	\$226,210	\$0	\$187,911	\$0
Total GF/non-GF:	<b>\$1,495,147</b>	<b>\$0</b>	<b>\$1,260,024</b>	<b>\$0</b>
Program Total:	<b>\$1,495,147</b>		<b>\$1,260,024</b>	
Program FTE	9.50	0.00	8.50	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The Chair's Office is funded by the County General Fund. This budget includes a 2% constraint.

## Significant Program Changes

**Last year this program was:** #10000, Chair's Office

The Chief Operating Officer position has been eliminated for FY 2012.

**Lead Agency:** District 1  
**Program Offer Type:** Existing Operating  
**Related Programs:**  
**Program Characteristics:**

**Program Contact:** Deborah Kafoury

**Executive Summary**

Multnomah County Commissioner Deborah Kafoury is one of five elected officials comprising the governing body of Multnomah County. Commissioner Kafoury represents the citizens of District One. Commissioner Kafoury and her colleagues on the Board are elected to determine the County's priorities, set public policy, and allocate taxpayer dollars in an effective, responsible, and transparent manner.

**Program Description**

District One encompasses all areas of Multnomah County west of the Willamette River, Sauvie Island, and inner southeast Portland. Commissioner Kafoury is the main point of contact for citizens in District One who have questions or concerns about county services or policies. The Commissioner and her staff work to resolve issues constituents bring forward ranging from how to get energy assistance to land use permitting to policy suggestions.

In addition to being responsive to the citizens of her district, Commissioner Kafoury is an advocate for issues of broad concern including affordable housing, homelessness prevention, the health and well-being of Multnomah County's children and families, land use and transportation needs, and ensuring Multnomah County is able to meet the needs of our most vulnerable citizens.

In the last year, Commissioner Kafoury led the planning and fundraising efforts to replace the Sellwood Bridge; secured contingency funding to rapidly rehouse 70 homeless families living in shelter or escaping domestic violence; worked with the Medical Examiner and Street Roots to track homeless deaths; spearheaded an effort to determine the feasibility of renovating the downtown courthouse to address seismic and safety concerns of the facility; changed the county's cell phone policy to utilize resources more effectively; and worked with City Commissioner Nick Fish and the Portland Housing Bureau to streamline programs that serve people experiencing homelessness. Commissioner Kafoury is the Board's representative on the Portland Children's Levy and Metro's Joint Policy Advisory Committee on Transportation (JPACT).

In FY 2011-2012, Commissioner Kafoury will:

1. Create a community action plan to address Bed Bugs in partnership with the Health Department, City of Portland, the Housing Authority of Portland, and the private sector.
2. Establish a feasible plan to renovate or rebuild the downtown courthouse, a building that has been of safety concern to the County since the 1950's.
3. Keep the Sellwood Bridge Replacement Project on time and on budget. In addition, Commissioner Kafoury will advocate for Federal funding to fill the remaining budget gap.
4. Refocus the 10 Year Plan to End Homelessness to better address family homelessness in our County, in conjunction with the City of Portland.
5. Publish the first report on homeless deaths from data collected by the Medical Examiner in conjunction with the Health Department.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Send out a monthly e-newsletter.	0	0	12	12
Outcome	Respond to constituent phone calls and emails within 24 hours (48 if weekend)	0.0%	0.0%	0.0%	100.0%
Output		0	0	0	0

**Performance Measure - Description**

These performance measures are centered around being responsive to constituents, available, and transparent.

## Legal/Contractual Obligation

The Board of County Commissioners Offices are mandated by the Multnomah County Home Rule Charter. Chapter III, 3.10(3).

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$396,779	\$0	\$392,567	\$0
Contracts	\$4,000	\$0	\$15,000	\$0
Materials & Supplies	\$10,754	\$0	\$19,328	\$0
Internal Services	\$65,804	\$0	\$55,740	\$0
Total GF/non-GF:	<b>\$477,337</b>	<b>\$0</b>	<b>\$482,635</b>	<b>\$0</b>
Program Total:	<b>\$477,337</b>		<b>\$482,635</b>	
Program FTE	4.00	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

General Fund Program.

## Significant Program Changes

Last year this program was:  
10001 - BCC District 1

**Lead Agency:** District 2  
**Program Offer Type:** Existing Operating  
**Related Programs:**  
**Program Characteristics:**

**Program Contact:** Loretta Smith

**Executive Summary**

Multnomah County District 2 comprises all of North Portland, the portion of Northeast Portland north of I-84, and most of the area west of I-205, north to the Columbia River. It includes parts of the city of Portland and all of the city of Maywood Park. District 2 includes Portland International Airport, the Rose Quarter, the Expo Center, the Lloyd District, Portland's historically African-American neighborhoods, as well as the ethnically diverse Cully Neighborhood. District 2 is also the home for the University of Portland, Concordia University and the Cascade Campus of Portland Community College, as well as the Oregon bridgehead for the new Columbia River Crossing Project.

Commissioner Smith is one of five elected officials on the Multnomah County Board of Commissioners. Commissioner Smith is dedicated to setting policies for the county that effectively deliver services to the county's residents and protect its most vulnerable citizens.

**Program Description**

The Board of County Commissioners is the policy making body under the County Charter and establishes the county's annual balanced budget. Multnomah County is the government responsible for safety net health care, social service and public safety programs. It also oversees six of the Willamette River bridges, county roads, animal control, libraries and elections. Commissioner Smith places the highest priority on county expenditures that assist Oregon's seniors, youth and the county's vulnerable populations. She is dedicated to ensuring that the criminal justice system effectively protects the public and that the county develop policies that promote job creation and economic opportunity. Commissioner Smith is a liaison to Elders in Action and the Visitor Development Fund. She is also the county's representative on the Metro Policy Advisory Committee. Commissioner Smith is using her 20 years of experience with United States Senator Ron Wyden to assist the county in securing additional federal resources.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Timely response to constituent calls or emails	0.0%	0.0%	0.0%	100.0%
Outcome	Update website and other outreach media frequently	0	0	0	52
Output	Confer with local businesses and hold open community meetings	0	0	0	12
Output	Tour and meet with local service providers and other community partners	0	0	0	12

**Performance Measure - Description**

Commissioner Smith believes that access to elected officials is of paramount importance in our democratic system. Commissioner Smith is committed to responsive constituent services, including comprehensive casework and robust communication with the citizenry and open community meetings. Commissioner Smith will actively use social and online communication methods to reach the varied constituencies throughout the district. Efforts include monthly meetings with local businesses to better understand how they operate in Multnomah County and touring local service providers to get first-hand knowledge of how services are delivered and how that delivery can be improved. Commissioner Smith will also work with neighborhood associations, service organizations and other community partners to bring Multnomah County services to all of its citizens.

## Legal/Contractual Obligation

The Multnomah Board of County Commissioners offices are mandated by the Multnomah County Home Rule Charter, Chapter III, 3.10 (3)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$386,595	\$0	\$395,733	\$0
Contracts	\$14,938	\$0	\$12,000	\$0
Materials & Supplies	\$8,201	\$0	\$15,802	\$0
Internal Services	\$67,603	\$0	\$59,100	\$0
Total GF/non-GF:	<b>\$477,337</b>	<b>\$0</b>	<b>\$482,635</b>	<b>\$0</b>
Program Total:	<b>\$477,337</b>		<b>\$482,635</b>	
Program FTE	3.50	0.00	4.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund program.

## Significant Program Changes

Last year this program was: #10002, BCC District 2

The program offer was from Commissioner Barbara Willer, who served as Commissioner from District 2 until December 31, 2010.



**Lead Agency:** District 3  
**Program Offer Type:** Existing Operating  
**Related Programs:**

**Program Contact:** Judy Shiprack

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Multnomah County Commissioner Judy Shiprack is one of five elected officials composing the governing body of Multnomah County. Commissioner Shiprack represents District 3, the central portion of Multnomah County and will focus on policy priorities impacting her constituency.

Commissioner Shiprack is responsible for setting the priorities of Multnomah County with her colleagues on the Board. The Commissioner also has the shared responsibility of allocating available resources through a budgeting process. The Board is required by law to adopt a balanced budget.

**Program Description**

As poverty and the need for county services shifts to mid and east Multnomah County, Commissioner Shiprack will continue to provide leadership and advocate for effective services for residents. Potentially devastating state cuts are looming; Commissioner Shiprack will work with county departments to find cost saving measures and efficiencies, and advocate with state leaders by representing Multnomah County on state and national platforms.

In January, Commissioner Shiprack implemented the Multnomah Food Initiative, a major county policy and food action plan. She is leading a long-term study of the diversion of mentally ill persons from jail and into treatment. Policy changes and recommendations are slated for 2012. Commissioner Shiprack will continue to focus on the most vulnerable populations the county serves including seniors and children. Her work on partnership programs such as the SUN schools, the Right Brain Initiative and others are vital to ensuring healthier children and families. She is leading the Defending Childhood Initiative in Multnomah County, a program sponsored by the Attorney General, to reduce children's exposure to violence, crime or abuse in their homes. Commissioner Shiprack is also the official liaison to the Commission on Children, Families and Community (CCFC) and continues to serve as Co-Chair of the Local Public Safety Coordinating Council, coordinating local public safety jurisdictions.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Defending Childhood Initiative Planning Phase	0.0%	40.0%	70.0%	100.0%
Outcome	What Works Conference	0	1	0	1
Output	East Portland Action Plan	1	1	1	1
Efficiency	Community meetings regarding issues facing community	135	109	30	135

**Performance Measure - Description**

The Attorney General has launched the Defending Childhood initiative to address a national crisis: the exposure of children to violence as victims and as witnesses. Multnomah County is one of eight communities across the U.S. to receive funding to implement planning for the grant. If we are awarded the grant, the work will encompass 3 years.

On December 10, 2010, legislators, public safety leaders, national policy experts, and other stakeholders came together to discuss what works in public safety reinvestment. The day-long conference featured presentations from national experts, Oregon policy leaders, and a legislative panel. Commissioner Shiprack plans to produce another conference in 2011.

The East Portland Action Plan (EPAP) is a city/county partnership and community driven plan designed to work strategically at short-term opportunities to improve livability, as well as long-term strategies to address some of the challenges facing East Portland. To date, the county has contributed to the implementation of 14 EPAP action items, under Commissioner Shiprack's direction.

Community meetings and the policies resulting from them indicate Commissioner Shiprack's dedication to her constituency by working on issues important to her community. She continues to provide every opportunity for feedback from the public.

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

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$406,432	\$0	\$406,883	\$0
Materials & Supplies	\$10,105	\$0	\$17,553	\$0
Internal Services	\$60,800	\$0	\$58,199	\$0
<b>Total GF/non-GF:</b>	<b>\$477,337</b>	<b>\$0</b>	<b>\$482,635</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$477,337</b>		<b>\$482,635</b>	
Program FTE	3.80	0.00	3.80	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**

General Fund

**Significant Program Changes**

Last year this program was:

**Lead Agency:** District 4

**Program Contact:** Diane McKeel

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

Commissioner Diane McKeel is one of the five elected members that comprise the governing body for Multnomah County. Commissioner McKeel represents the citizens of District 4, the Eastern area of the County.

Commissioner McKeel and her staff are committed to the ongoing engagement of the community, operating in an open and transparent manner, and responding to the needs of constituents in a timely fashion. To learn more about Commissioner McKeel's office please visit the website at <http://www.multco.us/cc/ds4>.

**Program Description**

As poverty and the need for services continue to move east, Commissioner McKeel will continue to provide strong leadership and advocate for services to follow the shifting demographics of our county.

As a member of the Board of County Commissioners, Commissioner McKeel is responsible for introducing legislation, setting policy and working hard to effectively represent the residents of District 4. The Board serves as the County Budget Committee and the Commissioner has the shared responsibility of allocating the County's resources through the budget process. The Board is required by law to adopt a balanced budget.

Commissioner Diane McKeel and her staff were able to accomplish a great deal in FY11 including assisting with the opening of a new Troutdale Library Branch, gaining approval and beginning construction of the East County Court facility, chairing the National Association of Counties 2011 Annual Conference Host Committee and working towards comprehensive legislation to help victims of human trafficking.

Commissioner McKeel will continue her successful work around combating domestic human trafficking, increasing veterans' services, decreasing domestic violence, economic development and representing the county at the State and Federal level.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Respond to constituent calls, letters, emails, and concern	95.0%	95.0%	95.0%	95.0%
Outcome	Effective policy priorities and advocacy to address community need	1	1	1	1
Output	National Association of Counties Annual Conference for over 3,000 attendees	0	0	0	1
Output	Creation of a Business Advisory Council	0	0	0	1

**Performance Measure - Description**

 **Measure Changed**

Commissioner McKeel will work to increase Multnomah County's role in regional economic development efforts. She firmly believes that we have the ability to help create more family wage jobs, retain businesses and attract new companies to the area. The creation of a Business Advisory Council will provide recommendations from various sectors on how best to accomplish these goals.

Commissioner McKeel is chairing the National Association of Counties Annual Conference Host Committee. This conference will bring in over 3,000 county leaders from across the country and will result in an estimated \$9 million dollar economic impact for the region.

Commissioner McKeel is dedicated to providing strong leadership and being accountable to the constituents of her district. She demonstrates this and will continue to do so by engaging the community and responding to concerns in a thoughtful and timely manner.

## Legal/Contractual Obligation

The Board of County Commissioners offices are mandated by the Multnomah County Home Rule Charter. Chapter III, 3.10(3).

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$401,815	\$0	\$397,797	\$0
Materials & Supplies	\$11,874	\$0	\$20,869	\$0
Internal Services	\$63,648	\$0	\$63,969	\$0
Total GF/non-GF:	<b>\$477,337</b>	<b>\$0</b>	<b>\$482,635</b>	<b>\$0</b>
Program Total:	<b>\$477,337</b>		<b>\$482,635</b>	
Program FTE	4.00	0.00	4.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

Commissioner McKeel's budget is funded by the County General Fund.

## Significant Program Changes

Last year this program was: #10004, BCC District 4

**Lead Agency:** Auditor  
**Program Offer Type:** Existing Operating  
**Related Programs:**  
**Program Characteristics:**

**Program Contact:** Steve March

**Executive Summary**

The Auditor's Office promotes efficient, effective, equitable, and accountable government. Authorized by the County Charter, the elected Auditor conducts independent, objective performance audits and specialized studies of the County. Our audits examine program performance, service outcomes, management processes, and general operations. Our work provides the public and County officials with a means of assessing the quality, effectiveness, and value of County services and identifying opportunities for improvements.

**Program Description**

Audit reports and special studies are the primary product of the Auditor's Office and provide internal and external accountability. Audits supply reviews and analyses containing recommendations for improvement to County management and leaders, inform the public about how tax dollars are spent, and ensure that County operations are independently reviewed and held accountable. The Auditor's Office also manages the contract with the external audit firm that audits the County's financial statements and staffs the County's Audit Committee.

Audit reports to be released in FY11 include: Emergency Management; Land Use Planning; Domestic Violence Special Report; Business Income Tax and County Vendors; Procurement Card Use; Biennial Financial Condition; Information Technology follow-up to External Audit. In compliance with auditing standards, the Auditor's Office will undergo a peer review at the end of FY11. In addition, Redistricting of the Board of County Commissioner Districts will be completed by July 2011.

Per the County Charter, the Auditor will appoint and convene a Salary Commission in FY12. The Salary Commission will set the salaries for the Chair, Commissioners, the Sheriff, and the salary supplement for the District Attorney.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of reports issued	6	8	8	8
Outcome	Recommendation implementation rate - within 5 years	90.0%	89.0%	90.0%	90.0%
Quality	Auditees reporting that the audit will improve their organization	71.0%	90.0%	85.0%	90.0%

**Performance Measure - Description**

- (1) Reports counted in year completed. Reduced FTE and staff vacancies in FY10 and part FY11 has delayed or reduced some reports.
- (2) Recommendations implementation rate is 5 year tracking of audit recommendations and include self-reporting by departments except where follow-up audits provide the data.
- (3) "Auditees reporting..." is approximately 3 years old. Fewer reports and responses in FY10 affected this measure.

## Legal/Contractual Obligation

County Charter section 8.10 states, "The auditor shall conduct performance audits of all county operations and financial affairs and make reports thereof to the board of county commissioners according to generally accepted government auditing standards. The auditor may also conduct studies intended to improve the performance of county efforts."

Government auditing standards outline the minimum standards for planning, conducting and reporting of audit work. Auditors are required to complete at least 80 hours of relevant training every two years with no less than 20 hours in any given year. The Office is required to have an outside peer review every 3 years to ensure compliance with standards.

By Charter, the Auditor appoints a Salary Commission every 2 years to set the salaries for the Board of County Commissioners, the Sheriff, and the supplement for the District Attorney. The Auditor's Office provides technical and clerical support for the Audit Committee and the Auditor is a non-voting member of the Audit Committee per the County Code.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$991,072	\$0	\$977,837	\$0
Contracts	\$150,000	\$0	\$150,000	\$0
Materials & Supplies	\$8,265	\$0	\$26,570	\$0
Internal Services	\$143,163	\$0	\$128,546	\$0
Total GF/non-GF:	<b>\$1,292,500</b>	<b>\$0</b>	<b>\$1,282,953</b>	<b>\$0</b>
Program Total:	<b>\$1,292,500</b>		<b>\$1,282,953</b>	
Program FTE	8.13	0.00	8.70	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

The Auditor's Office is a General Fund program.

## Significant Program Changes

Last year this program was:

**Lead Agency:** Tax Supervising &

**Program Contact:** Tom Linhares

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Tax Supervising and Conservation Commission (TSCC) reviews the budget and tax levying authority of all taxing districts that have more real market value in Multnomah County than in any other county. Starting in FY 11, districts with a population under 200,000 have the ability to opt out of the Commission's jurisdiction. For the 2011-12 fiscal year, 12 districts had chosen that option. Perhaps the most important duties of the Commission are to: 1) act as a technical resource to budget staffs for both large and small taxing districts, and 2) publish a comprehensive annual report.

### Program Description

There are five commissioners, appointed by the Governor to four year terms. Administrative employees, currently 2.4 FTE, are appointed by the Commission.

The Commission serves citizens by providing an extensive review of the budgets of the 28 local governments under its jurisdiction. The reviews are both procedural and substantive in nature. Procedural checks establish compliance with local budget law: ensuring that public notice requirements have been met, verifying that the tax levies were approved by the budget committee, and validating that financial information provides adequate detail. A substantive review of program content, the reasonableness of estimates and coordination of financial planning among various units of government is also performed. These types of review and the certification process distinguish TSCC from other regulatory bodies which do not receive copies of the budget document. TSCC's review also differs from the comprehensive audit in that our review is conducted prior to the adoption of the budget and can therefore prevent errors from occurring.

The commission conducts hearings on the largest taxing district's budget (population exceeding 200,000) and must certify any objections and/or recommendations for all districts prior to the district adopting the budget each year. The Commission also holds public hearings throughout the year on new local option levy or general obligation bond measure placed before the voters.

The Commission is required by law to publish an annual report of local governments' budgets, indebtedness, property taxes and other financial information. The report is often cited by citizen activists, news media and government officials as the most comprehensive source of budget and property tax information available in the entire state.

TSCC ensures that violations of local budget law are minimized, especially if the error results in a property tax levy that exceeds authority. TSCC works closely with the county assessor's office as a double check that property tax levies are entered and calculated accurately. TSCC's efforts seek to make the financial affairs of local governments at all levels more accountable to the citizens we serve.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Provide training and technical assistance for districts' budget staff	16	18	14	13
Outcome	Reduce the number of Objections and Recommendations in TSCC Certification Letter	24	10	17	12

### Performance Measure - Description

By reducing the number of errors that are made taxing districts gain credibility with the citizens that they serve. The ideal result would be to have all taxing districts under TSCC's jurisdiction complete their budget process with no objections or recommendations included in the TSCC Certification Letter. Public hearings provide TSCC commissioners as well as citizens an opportunity to learn about and question the financial affairs of taxing districts.

## Legal/Contractual Obligation

TSCC is mandated by ORS 294.605 to 294.705. Counties with a tax supervising and conservation commission are required to establish an account in the general fund for purposes of funding the expenditures of the commission, "as submitted", up to a maximum of \$280,000 (ORS 294.630). This amount increases by three percent (1.03) per year starting in 2011-12

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$266,271	\$0	\$266,312	\$0
Contracts	\$1,500	\$0	\$1,000	\$0
Materials & Supplies	\$7,720	\$0	\$11,300	\$0
Internal Services	\$2,716	\$0	\$2,720	\$0
Total GF/non-GF:	<b>\$278,207</b>	<b>\$0</b>	<b>\$281,332</b>	<b>\$0</b>
Program Total:	<b>\$278,207</b>		<b>\$281,332</b>	
Program FTE	2.40	0.00	2.40	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund Program. Expenditures are included in the Assessment & Taxation Grant Application. As such a percentage of the expenditures are reimbursed from the County Assessment Function Funding Assistance (CAFFA) program. There are direct sources of revenue. See Significant Programs Changes below for a new revenue source (reimbursement) starting in FY 10.

## Significant Program Changes

### Last year this program was:

Last year this program was: 10006 – Tax Supervising and Conservation Commission. TSCC, with considerable help from a number of stakeholders, was successful during the 2009 Legislative Session in securing passage of HB 2074 (Chapter 596, Oregon Laws 2009). For the first time taxing districts under TSCC's jurisdiction are required to cover, via a reimbursement methodology, one-half of the net operating costs of the Commission. This change resulted in \$94,169 of new revenue for the county in 2009-10 and \$97,393 this year.



**Lead Agency:** Commission on

**Program Contact:** Josh Todd

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This aspect of the Commission on Children, Families and Community (CCFC) provides leadership, management, grants accounting, and administrative support. The CCFC is both the County's Children and Families Commission and the Community Action Board. The CCFC is responsible for promoting policies and practices that support the well-being of all children and youth, and for increasing economic security among people living on a low income.

**Program Description**

CCFC Administration ensures that the unit fulfills its obligations as the local Children and Families Commission and the Community Action board. Duties include: (a) staffing the volunteer CCFC Board (currently 16 volunteer community members), which provides policy advice to the Board of County Commissioners, (b) allocating and managing funding resources, (b) implementing the six-year Community Plan to Improve Outcomes for Children and Families, (c) advancing four of the County's policy frameworks (Early Childhood, Poverty Elimination, School Age Policy and Our Bill of Rights: Children + Youth), (d) promoting positive youth development through its Multnomah Youth Commission, and (e) leveraging resources and convening community members to improve opportunities for children, youth, families and persons living on a low-income.

**Program Justification**

The CCFC Administration provides the infrastructure, support and expertise to allow the CCFC to:

- a) Provide opportunities for the community to participate in and understand how County government works, through the CCFC Board and its subcommittees.
- b) Provide opportunities for interaction between community members, County staff and County leadership, in the areas of children, youth, families and people living on a low-income. This interaction increases knowledge of how the process of local government works, including budget development. The CCFC board develops shared goals and visions in partnership with County employees and leadership.
- c) Leverage resources of the public and private sector to solve challenges and remove barriers for children, youth and families in the County.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	volunteer hours leveraged	6,400	7,000	10,000	8,500
Outcome	Stated goals of community plan met	85.0%	85.0%	75.0%	75.0%
Output	# of citizens engaged as volunteers	260	300	300	250
Output	Value of resources leveraged by CCFC investment	20,048,329	22,000,000	22,000,000	20,000,000

**Performance Measure - Description**

- Volunteer hours and dollars leveraged are tracked and reported to the Oregon Commission on Children and Families.
- No. of citizens who are engaged as volunteers (such as committees) are included here. Those who attend events and trainings are tracked elsewhere.

## Legal/Contractual Obligation

The Community Action Board is a federal designation, per ORS, dating from 1964. The Commission on Children and Families system was created in 1993 through HB 2004. It requires that each County, through its Board of County Commissioners, create a local children and families commission.

In 1998, through Ordinance No. 921, the Board of County Commissioners joined the two entities, creating the Commission on Children, Families and Community. In 1999, SB 555 expanded the responsibilities of local children and families commissions (LCCF), including leading development and implementation of a coordinated comprehensive plan. It also stipulates that the resources of the LCCF be used in accordance with that plan.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$274,591	\$0	\$232,357
Contracts	\$0	\$2,000	\$0	\$0
Materials & Supplies	\$0	\$26,380	\$0	\$24,099
Internal Services	\$0	\$120,724	\$0	\$136,833
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$423,695</b>	<b>\$0</b>	<b>\$393,289</b>
<b>Program Total:</b>	<b>\$423,695</b>		<b>\$393,289</b>	
Program FTE	0.00	3.02	0.00	2.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$423,695	\$0	\$393,289
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$423,695</b>	<b>\$0</b>	<b>\$393,289</b>

## Explanation of Revenues

State funds are transferred to the County via the Oregon Commission on Children & Families.

## Significant Program Changes

Last year this program was: #10007, CCFC Administration

**Lead Agency:** Commission on  
**Program Offer Type:** Existing Operating  
**Related Programs:**

**Program Contact:** Josh Todd

**Program Characteristics:**

**Executive Summary**

The mission of the Commission on Children, Families & Community (CCFC) is to impact policy, leverage resources and make strategic investments to build a thriving community. The CCFC serves as the Board of County Commissioners citizen policy advisors on children, families, and poverty policy. One of the most important services the CCFC can offer the board is to inform their decisions with the voices of those most impacted by the County's decisions. To this end the CCFC focuses on engaging several of the County's core constituencies: communities of color, people living on a low-income, and youth.

**Program Description**

The CCFC continues its focus on implementing the 6-year Community Plan, which was adopted by the Board of County Commissioner in January 2008.  
The goal areas and related key activities are:  
1. Academic and life success for all children and youth  
a) reduce barriers to educational success and increase student connection to schools by increasing child and youth access to medical care (#10011B)  
b) advance the recently updated Early Childhood Framework  
c) Improve education equity and reduce drop-out through a focus on family engagement and disproportionate suspensions and expulsions.  
2. Economic security and assets for all individuals and families:  
a) decrease child and family poverty by increasing low-income families' financial and social assets (6-year plan). (Ties to Program Offer #10011A)  
3. Engaged communities to build healthy neighborhoods  
a) Continue collaboration with City of Portland in supporting the work of the Multnomah Youth Commission  
b) Engagement of diverse youth and low-income persons

Additionally, the CCFC excels in leveraging resources to benefit Multnomah County and its residents. In FY11, the 3.85 million investment in the CCFC leveraged over 22 million in resources to our local economy.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Volunteer Hours Leveraged	6,400	7,000	10,000	8,500
Outcome	Stated Goals of 6-Year Community Plan met	85.0%	85.0%	75.0%	75.0%
Output	# of citizens engaged as volunteers	260	300	300	250
Output	value of resources leveraged by CCFC investment	20,650,000	22,000,000	22,000,000	20,000,000

**Performance Measure - Description**

- Volunteer hours and dollars leveraged are tracked and reported to the Oregon Commission on Children and Families.  
- No. of citizens who are engaged as volunteers (such as committees) are included here. Those who attend events and trainings are tracked elsewhere.

State Goals of 6-Year Plan are to:

- 1) Increase youth reports of receiving annual physicals and check ups to 60 percent of all 8th graders and 50 percent of all 11th graders by 2014
- 2) Increase client base of SBHC by 20 percent, or 1015 clients
- 3) 75 percent of low-income working families engaged in program will increase their household income above federal poverty guidelines

## Legal/Contractual Obligation

The Community Action Board is a federal designation, per ORS, dating from 1964. The Commission on Children and Families system was created in 1993 through HB 2004. It requires that each County, through its Board of County Commissioners, create a local children and families commission.

In 1998, through Ordinance No. 921, the Board of County Commissioners joined the two entities, creating the Commission on Children, Families and Community. In 1999, SB 555 expanded the responsibilities of local children and families commissions (LCCF), including leading development and implementation of a coordinated comprehensive plan. It also stipulates that the resources of the LCCF be used in accordance with that plan.

In 2007, Multnomah County and the City of Portland entered into contract #0708066 to enhance youth engagement and involvement with our local jurisdictions. This engagement is primarily through the Joint City/County Youth Commission which the CCFC houses and is charged with staffing.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$375,420	\$14,033	\$388,969
Contracts	\$0	\$50,000	\$0	\$0
Materials & Supplies	\$0	\$20,111	\$0	\$29,613
Internal Services	\$0	\$549	\$0	\$10,288
Total GF/non-GF:	<b>\$0</b>	<b>\$446,080</b>	<b>\$14,033</b>	<b>\$428,870</b>
Program Total:	<b>\$446,080</b>		<b>\$442,903</b>	
Program FTE	0.00	4.36	0.10	3.90
<b>Program Revenues</b>				
Intergovernmental	\$0	\$377,080	\$0	\$428,870
Other / Miscellaneous	\$0	\$69,000	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$446,080</b>	<b>\$0</b>	<b>\$428,870</b>

## Explanation of Revenues

The CCFC receives State funding through the Oregon Commission on Children and Families and Oregon Healthy Kids program as well as federal funding through the Community Service Block Grant program to fulfill its State and Federally mandated functions. Additionally, the CCFC has support from private and nonprofit sources including the Penney Family Fund, Northwest Health Foundation, and the Oregon Hunger Relief Task Force.

## Significant Program Changes

Last year this program was: #10008, Community Engagement & Plan Implementation

**Lead Agency:** Commission on  
**Program Offer Type:** Existing Operating  
**Related Programs:**

**Program Contact:** Josh Todd

**Program Characteristics:**

**Executive Summary**

Part of the Multnomah County Commission on Children, Families and Community's (CCFC) mission is to make strategic investments which help build a thriving community. The CCFC does this by allocating and managing resources received from the Oregon Commission on Children and Families (OCCF) to provide prevention and support services for children from birth to age 18. The CCFC is responsible for promoting policies and practices that support the well-being of all children, youth and families, and to increase the economic security of low income people.

**Program Description**

A primary role of the local Commission on Children & Families is to identify, through a comprehensive community planning process, critical service gaps and collaboration opportunities and to direct State resources to address those local needs. Additionally, the CCFC manages contracts for State services which are under the umbrella of the Oregon Commission on Children & Families system. This program offer includes contracts for services to:

1. Volunteers of America: Relief Nursery
2. Children's Relief Nursery
3. Foundations for Families
4. Community Warehouse.

Both Relief Nursery contracts are pass through contracts directing State allocated resources to two local relief nurseries which provide family support, early childhood education and social/emotional development services, and child abuse prevention services.

Multnomah County is one of 8 counties working to safely and equitably reduce the number of children in the Child Welfare system. The remaining two contracts direct Federal Family Preservation and Support funds to two community-based agencies which are helping provide support services to families whose children are at risk of entering the child welfare system.

Foundations for Families provides in-home, intensive family support services to primarily families of color who have an open investigation by the Oregon Department of Human Services. The goal of these services to help stabilize the family and allow them to maintain their children, safely in their home without DHS involvement.

The Community Warehouse provides furniture and household items to families for whom material items like beds, dressers, etc will help prevent child welfare removal or facilitate their children being returned.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Dollars leveraged to support contracted services	0	85,000	1,115,000	1,100,000
Outcome	FPS- % of families engaged in services whose children do not enter foster care	0.0%	70.0%	97.0%	85.0%
Efficiency	% of contract payments processed in a timely manner	0.0%	100.0%	70.0%	100.0%

**Performance Measure - Description**

CCFC worked with the Oregon Department of Human Services to realign state resources to support intensive, in-home services to prevent removal. DHS allocated 1.1 million in existing resources to this new type of service. This represents a return on investment of \$7.59 for every Commission dollar contracted through FPS.

The service model support through FPS has been extremely successful. Of those families engaged approximately 97% have been able to safely maintain their children in their homes and avoid removal. Historical data shows that 60% of white families will avoid child welfare removal once an investigation is opened. Only 45% of families of color will avoid child welfare involvement. This model dramatically increases family stability and effectively prevents child welfare involvement.

## Legal/Contractual Obligation

The Commission on Children and Families system was created in 1993 (HB 2004). It requires that each County, through its Board of County Commissioners, create a local children and families commission. In 1998, through Ordinance No. 921, the Board of County Commissioners joined the two, creating the Commission on Children, Families and Community. In 1999, SB555 expanded the responsibilities of local children and families commissions (LCCF), including leading development and implementation of a coordinated comprehensive plan.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$0	\$580,574	\$0	\$586,663
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$580,574</b>	<b>\$0</b>	<b>\$586,663</b>
<b>Program Total:</b>	<b>\$580,574</b>		<b>\$586,663</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$580,574	\$0	\$586,663
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$580,574</b>	<b>\$0</b>	<b>\$586,663</b>

## Explanation of Revenues

Contracts are funded through State and Federal funds transferred to the County by the Oregon Commission on Children & Families.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10009, Contracts for Services: Birth to 18

Many services funded in this program offer in past years have been defunded (Child Care Resource and Referral and EDG:E being two examples). The CCFC began managing the Relief Nurseries contract directly in FY11 and reallocated Family Preservation and Support funds in FY11 to align with the goals of the Safe and Equitable Foster Care Reduction Initiative. All service contracts listed in this offer are managed directly by the CCFC.

**Lead Agency:** Public Affairs Office

**Program Contact:** Dave Austin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Communications Office is the central distribution voice to and point of information for taxpayers, the public and the news media, communicating what Multnomah County does and how employees work in the community to provide services. The office – using targeted communications strategies – works directly with the Chair’s Office, the Board, elected officials, and County staff to promote transparency and demonstrate how effectively local government officials use taxpayer dollars to support all residents. Also, the office works with the Chief Operating Officer to handle internal advisory communication for the Chair when it comes to critical information, including – but not limited to – county business, labor practices and negotiations, budget strategies and relevant political issues around labor practices, negotiations and other sensitive topics. Top goals include: providing taxpayers, the public and the media with stories and information about critical county programs; responding to public records requests; responding with urgency and immediacy to the public and media inquiries about the county; strongly carrying and promoting the values of the county Board of Commissioners, both internally and externally; advising the Chair, the Board, elected officials, and county staff on the best approaches with taxpayers, the public and the media; creating materials that increase the county’s visibility; committing to and working with the highest standard of transparency for the sake of the public; and developing new ways to reach out to county residents by inviting them to participate in local government.

**Program Description**

This office will aggressively and consistently inform the public of stories and events that provide a high level of understanding of what the county does with taxpayer dollars and how local government makes a difference in people’s lives. The office will employ a wide range of media – television, newspapers, radio and digital media, as well as direct communications to the public, including appearances and community meetings – to reach a diverse audience and proactively increase the visibility of Multnomah County and the services it provides to all residents. The office will be the lead on ensuring the public that Multnomah County government is efficient, transparent and open to dialogue with its residents.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Multi-media projects & videos put on the County's web site.	0	0	0	25
Outcome	Proactive news stories advancing the County's mission & goals	0	0	0	100

**Performance Measure - Description**

- How often the office connects the Chair, the commissioners, elected officials, and departments with news media that result in clear and understandable stories about the county’s work.
- How fast and thorough the office responds to requests by the public for information, as well as how successful the office is at helping all county departments make decisions about information that goes to the public.
- How quickly the office disseminates public records requests, notifies the Board and staff and then responds in order to ensure that government transparency and access is maintained.
- How strong the relationships are with all news media on an ongoing basis and how those relationships result in coverage where principal characters from the county have a voice and promote the county’s mission.
- How much useful information is able to flow through the Internet – the county website; websites of the Chair and commissioners; Facebook; and Twitter – that effectively communicates to the public and draws citizens into a mode where they feel they can participate and have their voices heard.
- How often the office interacts with all department managers and key county departments to determine what the best stories are to inform the public about the work, the individuals and the structures within local government, and how they work to ensure taxpayer dollars are spent to benefit all residents.

**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>	2011	2011	2012	2012
Personnel	\$612,204	\$0	\$634,260	\$0
Contracts	\$0	\$0	\$10,000	\$0
Materials & Supplies	\$14,000	\$0	\$16,297	\$0
Internal Services	\$92,082	\$0	\$73,080	\$0
<b>Total GF/non-GF:</b>	<b>\$718,286</b>	<b>\$0</b>	<b>\$733,637</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$718,286</b>		<b>\$733,637</b>	
Program FTE	6.50	0.00	6.50	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**

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:**

Last year, this office was called the Public Affairs Office. This year, we are changing the name to the Communications Office. The structure of the office, including the duties of personnel, will be significantly different. The change is being made to provide the county with a more proactive office that find ways to promote Multnomah County's programs and its message.



**Lead Agency:** County Attorney

**Program Contact:** Chip Lazenby

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Office of County Attorney's mission is to provide cost effective legal advice and representation. The Office reviews and advises on the legal aspects of county government operations, defends claims against the County and its employees, and assists with Federal, State, and County legal requirements. The County Attorney collaborates with risk management, provides legal training and strives to provide clients with appropriate advice before legal issues become legal problems.

**Program Description**

The Office of County Attorney prepares and reviews legal documents including contracts, Ordinances, Resolutions, Board Orders, Executive Rules, Administrative Procedures, bonds and others. It provides legal advice and counsel to the Board, the Chair, the Sheriff, the Auditor, County Departments and Divisions, Offices, advisory boards, commissions and committees. It prepares formal written opinions deemed necessary by the County Attorney regarding significant interpretations of federal and state laws, the Charter, Ordinances and other documents. The Office controls and supervises all civil actions and legal proceedings in the the County is a party or has a legal interest. The Office represents and defends the County and its officials and employees in legal matters as appropriate. The Office will initiate, defend, appear or appeal any legal action, matter or proceeding in any court or tribunal and as requested by the Board.

The recent increases in the available damages under the Tort Claims Act, and the possibility of liability in excess of the cap has resulted in increased potential liability. Our Office has continued success in resolving cases through zealous advocacy, motions practice, and at trial.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Attorney Direct Service Hours	24,500	24,500	26,980	25,000
Outcome	Client satisfaction- Attorneys help clients achieve objectives	98.0%	98.0%	96.0%	97.0%
Efficiency	Percentage of attorney time dedicated to direct client services	94.0%	94.0%	94.0%	95.0%
Input	Number of tort claims received	127	180	180	190

**Performance Measure - Description**

The number of attorney direct service hours represents attorney time dedicated to litigation, legal consultation, legal document preparation and review, and client training. Direct service hours exclude time spent on professional development, administrative, clerical, or office related tasks. Office attorneys dedicate the vast majority of their time providing direct services; only 2-4% of attorney time is spent on non-direct service tasks.

A tort claim is a notice of intent to bring a lawsuit for damages against the County or its employees. There is an upward trend of submitted claims which requires increased allocation of County Attorney resources to defend.

## Legal/Contractual Obligation

Multnomah County Code Chapter 25 established the Office of County Attorney and charges the County Attorney to be the Chief Legal Officer of the County.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$3,091,375	\$0	\$3,163,244
Contracts	\$0	\$20,000	\$0	\$25,000
Materials & Supplies	\$0	\$116,000	\$0	\$157,393
Internal Services	\$0	\$453,201	\$0	\$404,006
Total GF/non-GF:	<b>\$0</b>	<b>\$3,680,576</b>	<b>\$0</b>	<b>\$3,749,643</b>
Program Total:	<b>\$3,680,576</b>		<b>\$3,749,643</b>	
Program FTE	0.00	22.80	0.00	22.80
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$3,680,576	\$0	\$3,749,643
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$3,680,576</b>	<b>\$0</b>	<b>\$3,749,643</b>

## Explanation of Revenues

Funding for the Office of County Attorney is generated through a portion of the liability insurance rate on County payroll expenses.

## Significant Program Changes

**Last year this program was:** #10014, County Attorney's Office  
No significant changes.

**Lead Agency:** Local Public Safety

**Program Contact:** Peter Ozanne

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The central purpose of Multnomah County’s Local Public Safety Coordinating Council (LPSCC) is to coordinate the public safety plans, policies, operations and strategies of local government agencies to improve the local public safety system’s cost-effectiveness and responsiveness to the needs of the community. For over 15 years, LPSCC has convened leaders from local governments; public safety, social service and education agencies; private service providers and local communities throughout the County to collaborate on the development of (a) solutions to problems in the intergovernmental operation of the public safety system, (b) coordinated policies to improve that system and (c) evidence-based strategies that address issues important to community safety. The Council also directs the work of several subcommittees and smaller working groups that focus on the most critical issues within the justice system and oversee the operation of DSS-Justice, the County’s public safety data warehouse and decision support system.

**Program Description**

Senate Bill 1145 (1995) established LPSCCs in each of Oregon’s 36 counties to “coordinate local criminal justice policy among affected criminal justice entities” (ORS 423.560). To carry out this mission, LPSCC’s Executive Committee meets monthly to share information, identify issues and problems affecting public safety and oversee development of plans, policies and strategies. The Executive Committee is co-chaired by Multnomah County Commissioner Judy Shiprack and City of Portland Mayor Sam Adams.

LPSCC also directs the work of several subcommittees and smaller workgroups that focus on key issues within the public safety system, such as youth violence prevention, law enforcement agency alignment, pre-trial supervision, coordination between the public safety and mental health systems, and implementation of the County’s 2008 Public Safety Plan. These groups typically report to the LPSCC Executive Committee once every few months, depending on how often the group meets.

In its FY 2010 adopted budget, Multnomah County’s Board of Commissioners formally transferred responsibility for the administration of DSS-J to the County’s Local Public Safety Coordinating Council (LPSCC), which agreed to oversee the development of DSS-J through a Policy Committee and ensure data security through a Security Committee.

The Council currently funds four staff members: a part-time Executive Director, who directs and coordinates inter-agency public safety policy discussions; a full-time Public Safety System Analyst, who examines cross-agency data and relevant policies to identify improvements to the public safety system, a part-time research associate who maintains the County’s Public Safety Brief, and a part-time graduate researcher who is developing a discrete simulation model of the County’s Criminal Justice system.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of LPSCC Executive Committee Meetings	10	10	10	10
Outcome	% of Executive Committee Members satisfied with the results/outcomes of meetings	75.0%	85.0%	80.0%	85.0%

**Performance Measure - Description**

LPSCC facilitates communication and collaboration among public safety and community leaders and oversees development of public safety plans, policies and strategies through monthly meetings of its Executive Committee. Therefore, a major part of LPSCC’s performance is measured by members’ satisfaction with the results of the meetings and the extent to which those members believe meetings encourage collaboration and coordination. LPSCC’s performance in developing and implementing policies and strategies associated with its workgroups will be measured by the satisfaction of its members with the results of these projects.

## Legal/Contractual Obligation

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities" (ORS 423.560)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$312,794	\$0	\$360,652
Contracts	\$0	\$221,090	\$0	\$203,858
Materials & Supplies	\$0	\$28,000	\$0	\$30,364
Internal Services	\$644,795	\$38,287	\$467,440	\$109,155
<b>Total GF/non-GF:</b>	<b>\$644,795</b>	<b>\$600,171</b>	<b>\$467,440</b>	<b>\$704,029</b>
<b>Program Total:</b>	<b>\$1,244,966</b>		<b>\$1,171,469</b>	
Program FTE	0.00	2.00	0.00	2.60
<b>Program Revenues</b>				
Intergovernmental	\$0	\$425,171	\$0	\$425,171
Other / Miscellaneous	\$0	\$175,000	\$0	\$278,858
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$600,171</b>	<b>\$0</b>	<b>\$704,029</b>

## Explanation of Revenues

LPSCC is funded by the State Department of Corrections through SB 1145. The FY 2011 budget contains approximately \$175,000 in one-time carryover funds, which have accumulated in LPSCC's budget over several years. LPSCC plans to devote some or all of its remaining carryover funds to operation and maintenance of DSS-Justice, the justice services database.

## Significant Program Changes

Last year this program was: #10015, Local Public Safety Coordinating Council

**Lead Agency:** Citizen Involvement

**Program Contact:** Kathleen Todd

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

A community of involved citizens is fundamental to building trust and accountability in County government. This offer provides the resources for the Citizen Involvement Committee, through its office, to energetically pursue this goal.

**Program Description**

The CIC maintains an office accessible to the public to provide a central point for information about and entry into county citizen opportunities of all kinds. CIC provides continuous independent assessment of citizen participation opportunities, and identifies and works to remove barriers to participation through its Departmental Reviews, Diversity Outreach Trainings & Traveling Recruitment Campaign. The CIC works in partnership with other governmental and non-governmental organizations to advocate for citizen involvement in policy and decision-making. The CIC coordinates the independent Citizen Budget Advisory Committees (CBACs); implements the citizen-driven annual Dedicated Fund Review; and recognizes the time and energy of the county's volunteers by hosting the annual Volunteer Awards Ceremony for all county departments. The CIC and OCI convey citizen input and proposals to officials and departments through reports, recommendations & meetings, providing direct citizen voice into program development and direction as early as possible in the decision process. This makes citizen input more valuable and gives citizens a greater sense of ownership in the process.

This offer supports county accountability strategies in multiple ways: 1) by adding to and building the county's community of citizens actively engaged in its government; 2) by enhancing the public's awareness of what the county is doing and providing avenues for citizens to contribute to program development and direction; 3) by focusing efforts on seeking out and engaging those who do not normally participate; 4) by providing enhanced support to citizens engaged in county government; 5) by providing a single entry point for citizens to access volunteer information; 6) by completing regular updates to the volunteer opportunity website, databases & publications; and 7) by creating consistent expectations and processes for citizen involvement activities. This offer will ensure these strategies will be realized by providing the resources to: maintain a centralized and current database of volunteers and interested citizens; maintain an up-to-date website listing volunteer information and opportunities; create consistent expectations and processes for citizen involvement activities; expand training and support of county volunteers; and increase community outreach, especially to those who do not normally participate in county government.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	database of volunteers is current & available at all times	0.0%	100.0%	100.0%	100.0%
Outcome	percentage of participants in activities who felt time was well spent	0.0%	80.0%	95.0%	95.0%
Output	substantive response to citizen emails, calls, concerns, within 3 working days	100.0%	95.0%	100.0%	95.0%
Output	new citizen involvement opportunities are publicized within 3 working days	0.0%	0.0%	90.0%	90.0%

**Performance Measure - Description**

 **Measure Changed**

The performance measures for this program offer capture essential measurements needed to provide for the successful operation of a 'one-stop shopping' facility for citizen involvement opportunities, citizen involvement information and active policy issues. The current upgrade of both the web page and the on line database increases the quality and quantity of citizen involvement activities in the County

## Legal/Contractual Obligation

Chapter Re: Chapter 3.75 Multnomah County Home Rule Charter; Resolution 8-86, Resolution 95-245, Multnomah County Code 2.30.640; 3.30-3.306 1. The County Charter states that the commission “shall appropriate sufficient funds for the operation of the office and the committee”.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$158,048	\$0	\$162,200	\$0
Materials & Supplies	\$12,912	\$0	\$11,888	\$0
Internal Services	\$34,270	\$0	\$30,779	\$0
Total GF/non-GF:	<b>\$205,230</b>	<b>\$0</b>	<b>\$204,867</b>	<b>\$0</b>
Program Total:	<b>\$205,230</b>		<b>\$204,867</b>	
Program FTE	2.00	0.00	2.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

General Fund

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10016, Citizen Involvement Committee

The CIC through its office is engaged in pro-active work with county officers, county employees and the larger community to enhance the understanding and acceptance of the value of active citizen participation in county governance. This has been and remains the core mission of CIC. The addition of an expanded Diversity Outreach Training component as well as the Traveling Recruitment Campaign during the summer and fall have expanded CIC partnerships throughout the county community.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Lynda Grow

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Office of the Board accounts for all functions and expenditures necessary for efficient operation of the Board of County Commissioners, who work on behalf of citizens individually and as members of the Board. The Office of the Board supports the Board as a body by providing those things necessary for the Board to function effectively and collectively; providing information on briefing and voting issues, public notice, information and referral, meeting space and equipment.

The Office's Economic Development/Strategic Policy staff provide advice and advocacy and serve as the Board's voice on economic development, project management and other strategic policy matters.

**Program Description**

The Office manages all Board meetings, agendas, records, indices and schedules; adopted resolutions, orders, ordinances and proclamations. Board clerks serve as parliamentarians at all meetings, take minutes, prepare meeting records and notices and provide internal and external customer service, information and referral. The Office pays for the County's memberships in advocacy organizations including the National Association of Counties, Association of Oregon Counties and Leader's Round Table.

The Policy Advisor supports the Chair and Board's project management and policy strategies focused on business retention, expansion and recruitment, workforce development, urban renewal and capital issues. This position represents the County on associations, boards, committees and task forces including the Oregon Economic Development Association, Portland Regional Partners for Business and the East Metro Economic Alliance, and promotes the Board's efforts to achieve sustainable economic opportunities for County citizens. This position is focused on economic issues and building relationships with private industry and public organizations.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of Board meetings scheduled	134	160	0	0
Outcome	Number of Board meetings held	128	100	109	110
Output	Number of Board meeting documents processed and distributed	3,762	680	3,800	3,800

**Performance Measure - Description**

Board voting meetings are scheduled on Thursdays throughout the year. The Board meets Tuesdays and other days as needed for executive sessions, briefings, work sessions, budget hearings and other public hearings. Each of these meetings is individually convened and adjourned. Board clerks are responsible for notifying internal and external customers of scheduled meetings and cancellations; processing, posting and distributing all agenda submissions and official documents that result from board action and directives of those documents and ensure ease of access for future internal and external inquiries.

## Legal/Contractual Obligation

Commissioners affirm to support the Constitutions of the United States, the State of Oregon, the Multnomah County Home Rule Charter and Multnomah County laws. The Board adopts and publishes rules for the conduct of Board meetings; and is the governing body for Dunthorpe-Riverdale Sanitary Service District No. 1; Mid-County Street Lighting Service District No. 14; sits as the County Budget Committee; The Hospital Facilities Authority; Public Contract Review Board, the Multnomah County Board of Health and in other capacities. Board clerks insure that meetings and notices comply with Board Rules, Oregon Public Meetings Law and other statutory requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$357,200	\$0	\$176,905	\$0
Contracts	\$30,195	\$0	\$30,000	\$0
Materials & Supplies	\$172,292	\$0	\$186,729	\$0
Internal Services	\$422,216	\$0	\$353,636	\$0
Total GF/non-GF:	<b>\$981,903</b>	<b>\$0</b>	<b>\$747,270</b>	<b>\$0</b>
Program Total:	<b>\$981,903</b>		<b>\$747,270</b>	
Program FTE	3.00	0.00	2.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund program.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10017, Office of the Board

For FY 2012, one position and the economic development program functions have been moved to a new program offer, #10035A, Economic Development.



**Lead Agency:** Non-Departmental - All

**Program Contact:** Michael Crank

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer accounts for Facilities charges for the State Courts and for the Tax Supervising & Conservation Commission. ORS 1.185 requires that counties provide court space for the operation of the state's courts.

Beginning with FY 2012, this program offer includes funding for operations of the new East County Court facility. Groundbreaking for construction of this new court facility occurred in January, 2011, with an estimated completion date of March, 2012. Additionally, this offer accounts for debt service on the bonds sold for construction of the East County Courts facility. This obligation will end in 2030.

This program offer also accounts for the costs associated with maintaining the Wapato Jail in its current "mothballed" state. These costs--for security, routine maintenance, utilities, and groundskeeping--are estimated to total \$372,544 in FY 2012. This is the same amount as was estimated for FY 2011.

**Program Description**

The County's Facilities Division provides services ranging from planning, construction, and building operations and maintenance to cleaning the buildings and maintaining the grounds for courtrooms located in Multnomah County's owned and leased facilities. Construction of a new court facility, the East County Courts, will continue throughout FY 2012, with an estimated opening date of March, 2012.

County-provided courtroom space is a key resource in the County's criminal justice system. Multnomah County courts' central locations allow easy access to the court system, provide visibility to the community of the public safety system at work, and allow the justice system to hold offenders accountable.

The Wapato Jail is a never-opened detention facility located in North Portland. Facilities maintains the grounds, interior, and exterior of the building, and incurs costs for this maintenance and for utilities in order to minimize deterioration of the building.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	All customer service requests are begun within 10 days of receipt.	95.0%	95.0%	0.0%	95.0%
Outcome	Customer service satisfaction rating	85.0%	90.0%	0.0%	90.0%

**Performance Measure - Description**

These performance measures are the same as those used for the County's other building operations (see program offer 72069, Facilities Property Management.) Facilities customers are emailed a link for a Zoomerrang Customer Service satisfaction survey. Replies and results are reviewed and utilized for continuous quality improvement.

## Legal/Contractual Obligation

ORS 1.185 reads "County to provide courtrooms, offices, and jury rooms. (1) The County in which a circuit court is located or holds court shall: (a) provide suitable and sufficient courtrooms, offices, and jury rooms for the court, the judges, other officers, and employees of the court and juries in attendance upon the court, and provide maintenance and utilities for those courtrooms, offices, and jury rooms. (b) Pay expenses of the court in the county other than those expenses required by law to be paid by the state. (2) Except as provided in subsection (1) of this section, all supplies, materials, equipment, and other property necessary for the operation of the circuit courts shall be provided by the state under ORS 1.185. (Formerly 1.165)"

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Materials & Supplies	\$0	\$0	\$161,303	\$0
Internal Services	\$4,370,910	\$0	\$4,416,043	\$0
<b>Total GF/non-GF:</b>	<b>\$4,370,910</b>	<b>\$0</b>	<b>\$4,577,346</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,370,910</b>		<b>\$4,577,346</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$0	\$320,800	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$320,800</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund obligation of the County

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10018, General Fund Facilities Charges

The East County Courts are expected to be operational in spring, 2012. This will increase annual operating costs to the County's obligations for the courts. Debt service costs are \$321,000 per year (net) from FY 2012 through 2020, and will be \$1.7 million per year from 2020 through 2030.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mike Jaspin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer distributes revenues received from the sale of timber cut on federal forest land and property tax associated with railroad cars to local school districts. This is a statutory responsibility of Oregon counties and these revenues are dedicated to a County School Fund.

**Program Description**

Since 1908, all counties in Oregon have received payments from the US government from revenue generated by the sale of timber cut on federal forest lands. State law specifies how the revenue is to be allocated.

The federal law authorizing federal timber payments to counties, PL 106-393, sunset as of September 30, 2006. It was reauthorized by Congress for one year in 2007, and was renewed in 2008 for a four-year period, during which time the amount received would decline each year. FY 2012 will be the fourth year in this 4-year extension; we will receive XX% of the amount received in FY 2007.

The County School Fund also receives a portion of the ad valorem tax that is assessed on the value of rail cars as outlined bystate statute. (ORS 308.505 to ORS 308.665)

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

The County School Fund provides a very small amount of the total revenue available to schools in Multnomah County. Arguably, this amount is not large enough to contribute meaningfully toward student academic achievement.

## Legal/Contractual Obligation

ORS 328.005-035 outlines the requirement to establish a County School Fund. The apportionment of revenue from the sale of timber on federal forest lands is described in ORS 294.060 which states "...moneys received by each county...shall be divided 75 percent to the Road Fund and 25 percent to the school fund of the county."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$0	\$191,500	\$0	\$187,100
Total GF/non-GF:	<b>\$0</b>	<b>\$191,500</b>	<b>\$0</b>	<b>\$187,100</b>
Program Total:	<b>\$191,500</b>		<b>\$187,100</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$20,000	\$0	\$20,000
Taxes	\$0	\$170,000	\$0	\$166,000
Other / Miscellaneous	\$0	\$1,500	\$0	\$1,100
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$191,500</b>	<b>\$0</b>	<b>\$187,100</b>

## Explanation of Revenues

The County School Fund is credited with 25% of the revenue received from the statewide assessment of railroad cars apportioned to each county. Revenues have averaged \$15,000-\$20,000 over the past several years.

Federal timber payment revenue was estimated based on actual spending during years when Multnomah County received full timber payments.

## Significant Program Changes

**Last year this program was:** #10020, County School Fund

Federal legislation re-authorizing timber payments was renewed in FY 2008 for a four-year period. FY 2012 will be the fourth year in this period.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mike Jaspin

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer accounts for Business Income Tax (BIT) collected on behalf of and passed through to the east county cities of Gresham, Troutdale, Fairview, and Wood Village. These payments are prescribed in an intergovernmental agreement (IGA) that shares revenue from the BIT. Under the terms of this agreement, the four cities share 25% of the first 0.6% of BIT collections.

This offer also includes the County's obligation to share Community Service Fee revenues generated through the Strategic Investment Program (SIP) with the City of Gresham.

**Program Description**

The BIT is imposed on the net income derived from business activity within Multnomah County. The BIT was originally set at a rate of 0.6% of net income. In 1985, the tax was increased to 0.95%. In 1987, the tax was further increased to 1.46%. In 1993 the rate was reduced to 1.45% due to the consolidation of collections with the City of Portland's Business License Fee (BLF). The County entered into a tax sharing agreement with the four east county cities, in part to acknowledge the value of business income derived from those cities. The County acts as a fiduciary agent for the four east county cities.

The County entered into a SIP agreement with Microchip Technologies, Inc., in FY 2004. Under terms of that agreement, the company agrees to pay 25% of property tax abated in the form of a Community Service Fee. State statutes direct that the County share that revenue with the City in which the company receiving the SIP exemption is located.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description**

County pass-through payments represent a significant share of the four east county cities' General Fund revenues. Prompt handling of these payments on Multnomah County's part helps the cities manage their cash flow needs.

### Legal/Contractual Obligation

The program is mandated under terms of the IGAs with Gresham, Troutdale, Fairview, and Wood Village. The county is obligated to transfer 25% of the revenue associated with the first 0.6% BIT increment.

The SIP contract specifies that Gresham receives 47% of revenue derived from the Community Service Fee.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$4,526,024	\$0	\$5,203,262	\$0
Total GF/non-GF:	<b>\$4,526,024</b>	<b>\$0</b>	<b>\$5,203,262</b>	<b>\$0</b>
Program Total:	<b>\$4,526,024</b>		<b>\$5,203,262</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Taxes	\$327,626	\$0	\$511,256	\$0
Total Revenue:	<b>\$327,626</b>	<b>\$0</b>	<b>\$511,256</b>	<b>\$0</b>

### Explanation of Revenues

The BIT pass-through is 25% of the first 0.6% of BIT collections.

Community Service Fee is 25% of the taxes abated under the Strategic Investment Program.

### Significant Program Changes

**Last year this program was: #10021, Pass-Thru Payments to East County Cities**  
No significant changes are anticipated for FY 2011.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer budgets the revenue and expenditures associated with the County's commitment to fund the Oregon Convention Center and the Visitor's Development Initiative. This program operates under intergovernmental agreements (IGAs) between Multnomah County, the City of Portland, and METRO. The program accounts for proceeds of the Transient Lodging Tax and Motor Vehicle Rental Tax that are passed through to METRO, for operation of the Oregon Convention Center, and other tourism related entities.

**Program Description**

This program accounts for a portion of taxes collected from area hotels, motels, and vehicle rental agencies. The Transient Lodging Tax has supported the Oregon Convention Center since 1986. The tax is set at 11.5% on all hotel and motel room rentals in Multnomah County. Cities retain 5% of the tax generated within their boundaries. Another one percent supports regional tourism promotion. The remaining 5.5% supports programs associated with the Oregon Convention Center, the Regional Arts & Culture Council (RACC), and the Visitors Development Board. The Motor Vehicle Rental Tax was increased by the Board of County Commissioners (BCC) in April, 2000. This 2.5% increment is entirely dedicated to support of the activities noted above.

This program supports the Oregon Convention Center which hosts programs, conferences, and events that bring visitors and business groups to Portland. The tourism and travel industry is among the leading private sector employers in Oregon. Large conventions generate significant activity for local hotels, restaurants, and retail establishments. Travel Portland (formerly POVA) has estimated that a typical out-of-town convention delegate will spend between \$600-\$700 during a three-day stay in the region. A report prepared in early 2011 by Crossroads Consulting Services documents the dollar impact of the visitors facilities managed by METRO. The report estimates the economic impact at just less than \$682 million per year.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	\$ (in Millions) Impact of Convention Center Visitors to Multnomah County	350	380	403	425
Outcome	# of Employees in Travel/Tourism Industry	0	4,300	4,410	4,760

**Performance Measure - Description**

New measure added in last year's budget provides an estimate of the number of people employed in the travel/tourism industry. Multnomah County accounts for 2/3rds of tourism related activity. Travel/tourism accounts for approximately 10% of metropolitan area employment.

## Legal/Contractual Obligation

This program is mandated by IGAs that dictate how the revenues received in the Special Excise Tax Fund are allocated. There is no discretion in allocating the revenue - all receipts are turned over per County Code and pursuant to terms specified in the IGAs.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$0	\$19,014,000	\$0	\$20,055,250
Total GF/non-GF:	<b>\$0</b>	<b>\$19,014,000</b>	<b>\$0</b>	<b>\$20,055,250</b>
Program Total:	<b>\$19,014,000</b>		<b>\$20,055,250</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Taxes	\$0	\$18,800,000	\$0	\$19,700,000
Other / Miscellaneous	\$0	\$214,000	\$0	\$355,250
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$19,014,000</b>	<b>\$0</b>	<b>\$20,055,250</b>

## Explanation of Revenues

The transient Lodging Tax was originally established in 1972. A supplemental Countywide tax of 3% was adopted in February 1986 and is dedicated primarily to operations of the Oregon Convention Center. Effective April 1, 2000, an additional tax of 2.5% was adopted by the BCC and is dedicated to the Visitor's Development Initiative.

The Motor Vehicle Rental Tax was originally established in 1976. The tax was increased to 12.5% in April 2000, with the additional 2.5% dedicated to the Visitor's Development Initiative.

## Significant Program Changes

Last year this program was: #10022, Convention Center Fund



**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer accounts for principal and interest payments on various full faith and credit obligation bonds, capital leases, and intergovernmental agreements that were entered into to finance various capital improvements or capital acquisitions.

**Program Description**

Multnomah County is currently making payments on the following obligations:

- Series 2004 Advance Refunding (\$54.2 million) - Full Faith & Credit
- Series 2003 Refunding (\$9.6 million) - Full Faith & Credit
- Series 2010A (\$9.8 million) - Full Faith & Credit
- Series 2010B (\$15 million) - Full Faith & Credit
- Sellwood Library 2002 (\$1.1 million) - Capital Lease

The outstanding debt issues have funded a number of capital improvements and acquisitions. These include, among others, purchase of the Multnomah, McCoy, and Mead buildings, health clinic equipment and improvements, deferred capital maintenance, construction of the East County Courthouse, and various computer applications. All binding obligations were approved by the Board of County Commissioners. The facilities and equipment purchased with these bond issues support many of the County programs.

Careful management of debt obligations contributes to sound financial management practices. Debt payments are recovered from departments who benefit from specific projects. In FY 2009, the County transferred \$24.2 million to a debt sinking fund that has been used for early debt retirement and to smooth the impact of escalating debt payments on departments.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Moody's Rating of Aa3 or Better	1	1	1	1
Outcome	Debt Service Payments Made as Scheduled	1	1	1	1

**Performance Measure - Description**

Maintaining an investment grade bond rating limits the amount the County might otherwise have to pay towards annual debt service.

(1)-indicates Moody's Aa2 or Aa3 rating, (0)-represents a rating lower than Aa2 or Aa3.

All principal and interest payments are made on time in order to maintain an investment grade rating on the bond issue. Multnomah County has never defaulted on a debt payment.

## Legal/Contractual Obligation

Principal and interest on the full faith and credit obligations, certificates of participation, capital lease and intergovernmental agreements are a binding debt obligation of the County. All debt issues and refundings were approved by various resolutions adopted by the Board of County Commissioners.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$5,000	\$0	\$20,000
Debt Service	\$0	\$19,187,381	\$0	\$21,923,822
Unappropriated & Contingency	\$0	\$11,589,131	\$0	\$8,525,413
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$30,781,512</b>	<b>\$0</b>	<b>\$30,469,235</b>
<b>Program Total:</b>	<b>\$30,781,512</b>		<b>\$30,469,235</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$16,062,852	\$0	\$18,292,399
Intergovernmental	\$0	\$0	\$0	\$150,000
Other / Miscellaneous	\$0	\$14,718,660	\$0	\$12,026,836
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$30,781,512</b>	<b>\$0</b>	<b>\$30,469,235</b>

## Explanation of Revenues

Debt service payments are collected from departments in their facilities charges and passed through to the Capital Lease Retirement Fund.

The fund balance represents the remaining portion of the \$24.2 million General Fund transfer that was made in FY 2009.

## Significant Program Changes

**Last year this program was:** #10023, Capital Debt Retirement Fund

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The GO Bond Sinking Fund program accounts for the payment of General Obligation Bond principal and interest approved by the voters in May 1993 and May 1996. The 1993 GO Bond (issued in February 1994) to restore the historic Central Library and build the Midland Library. The 1996 GO Bond was issued in October, 1996 to remodel, construct, or purchase various Library and Public Safety facilities and equipment. Revenue to pay the debt is derived from property taxes and interest earned on the cash balances.

**Program Description**

Multnomah County's General Obligation debt was refinanced in FY 2010 to take advantage of historically low interest rates. The 1994 and 1996 debt issues were rolled into one debt payment with the Series 2010 Refunding General Obligation Bonds. The savings to taxpayers as a result of this refinancing is estimated at \$5.2 million.

Bond payments are made on time to maintain an investment grade rating on the bond issue. Managing debt carefully provides for strong financial management.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Moody's Rating of Aa1 or Better	1	1	1	1
Outcome		0	0	0	0

**Performance Measure - Description**

Maintaining an investment grade bond rating limits the amount the County might otherwise have to pay towards annual debt service. Moody's recently upgraded the rating on the County's General Obligation debt to Aaa. This is the highest rating assigned to municipal debt issues.

(1)-indicates Moody's Aa1 rating, (0)-represents rating lower than Aa1.

## Legal/Contractual Obligation

Principal and interest on the voter approved General Obligation Bonds are a binding debt that the County must pay. The property tax levy used to pay the debt is outside of the property tax constitution limits imposed by State Ballot Measure #5 approved in 1990 and State Ballot Measure #50 approved in 1997.

Multnomah County has never defaulted on any debt issues.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Debt Service	\$0	\$9,252,873	\$0	\$8,469,675
Unappropriated & Contingency	\$0	\$6,542,484	\$0	\$7,920,213
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$15,795,357</b>	<b>\$0</b>	<b>\$16,389,888</b>
<b>Program Total:</b>	<b>\$15,795,357</b>		<b>\$16,389,888</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Taxes	\$0	\$8,190,000	\$0	\$8,735,000
Other / Miscellaneous	\$0	\$7,605,357	\$0	\$7,654,888
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$15,795,357</b>	<b>\$0</b>	<b>\$16,389,888</b>

## Explanation of Revenues

Revenue to pay the debt is derived from property taxes and interest earned on the cash balances.

## Significant Program Changes

Last year this program was: #10024, GO Bond Sinking Fund

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The PERS Pension Obligation Bond Sinking Program accounts for principal and interest payments on pension obligation revenue bonds issued December 1, 1999 in the amount of \$184,548,160 to retire the County's PERS unfunded actuarial accrued liability. Revenues that support debt payments are derived from charge backs to departments based on their departmental personnel cost.

**Program Description**

The County passed Resolution No. 99-218 on November 4, 1999, authorizing the issuance of up to \$200,000,000 of bonds to finance the estimated unfunded accrued actuarial liability of the County to the Oregon Public Employees Retirement System.

Senate Bill 198-B, effective October 23, 1999, authorized the County to pledge taxes that the County may levy within the limitations of sections 11 and 11b, Article XI of the Oregon Constitution not subject to annual appropriation. On December 1, 1999 the County issued \$184,548,160 in Pension Obligation Bonds to fund its PERS unfunded liability. Multnomah County took a leadership role in PERS reform and was the second jurisdiction in the State to issue Pension Obligation Bonds. As a result of issuing Pension Obligation Bonds the County will save an estimated \$35 million (present value) in pension costs. This is based on forecast rates that PERS would have had to charge if the County's liability had remained on a pay-as-you-go basis.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Moody's Rating of Aa2 or Better	1	1	1	1
Outcome		0	0	0	0

**Performance Measure - Description**

Maintaining an investment grade bond rating limits the amount the County might otherwise have to pay towards annual debt service.

(1)-indicates Moody's Aa2 rating, (0)-represents rating lower than Aa2.

## Legal/Contractual Obligation

Principal and interest on the PERS Pension Obligation Bond are a binding debt obligation. The County passed Resolution No. 99-218 on November 4, 1999, authorizing the issuance of up to \$200,000,000 of bonds under the Uniform Revenue Bond Act.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Contracts	\$0	\$25,000	\$0	\$50,000
Debt Service	\$0	\$15,201,805	\$0	\$16,098,430
Unappropriated & Contingency	\$0	\$45,613,195	\$0	\$56,176,570
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$60,840,000</b>	<b>\$0</b>	<b>\$72,325,000</b>
<b>Program Total:</b>	<b>\$60,840,000</b>		<b>\$72,325,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$18,000,000	\$0	\$16,500,000
Other / Miscellaneous	\$0	\$42,840,000	\$0	\$55,825,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$60,840,000</b>	<b>\$0</b>	<b>\$72,325,000</b>

## Explanation of Revenues

Interest earnings on the fund balance and service charges assessed to departments as a percentage of payroll. In FY 2012, departments will pay 6.5% of payroll costs toward the retirement of the Pension Obligation Bonds. This is down slightly from the past few years.

## Significant Program Changes

Last year this program was: #10025, PERS Pension Bond Fund

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Revenue Bond program accounts for the principal and interest payments on two bonds issued by the County on behalf of non-profit organizations.

The bonds were issued in support of Port City Development and the Oregon Food Bank. These bonds are authorized per Oregon statutes and County policy. They are backed by Motor Vehicle Rental Tax revenues and are scheduled to be completely paid off by the end of FY 2017.

**Program Description**

The County's Debt Policy includes a section on issuing revenue bonds in partnership with a 501(c)(3) nonprofit agency. The agency must demonstrate that it cannot obtain conventional financing at a reasonable cost. The County assists small to medium size agencies that have total annual revenues from all sources of at least \$1 million but not greater than \$10 million. The planned use of the revenue bond proceeds must be consistent with County policy priorities and mission.

The County will assist the agency by issuing tax exempt revenue bonds to finance no more than 60% of the capital project and related allowable debt issuance costs. The agency is responsible for raising the remaining project funds. The agency is responsible for all bond issuance costs. The County must have title, or first lien rights if the escrow agent holds title on behalf of the lender, to the property while debt is outstanding. Once the project is completed, the County leases the project back to the non-profit. The agency is responsible for all ongoing costs related to the financing. These include annual debt payments, paying agent costs, or other related costs. Once the bonds are paid off, the County transfers title to the project back to the non-profit. County policy also limits the amount of revenue bonds that will be issued in partnership with nonprofits to \$8.5 million.

Proceeds of the outstanding revenue bonds were used to support programs and services to people with disabilities (Port City Development) and to provide food to the less fortunate throughout the State of Oregon (Oregon Food Bank).

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Moody's Rating of Aa3 or Better	1	1	1	1
Outcome		0	0	0	0

**Performance Measure - Description**

Maintaining an investment grade bond rating limits the amount the County might otherwise have to pay towards annual debt service.

(1)-indicates Moody's Aa3 rating or above, (0)-represents rating lower than Aa3.

## Legal/Contractual Obligation

Bond covenants and repayment schedules. Multnomah County has never defaulted on a debt payment.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$0	\$8,000	\$0	\$8,000
Debt Service	\$0	\$547,665	\$0	\$2,672,690
Unappropriated & Contingency	\$0	\$1,136,835	\$0	\$0
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$1,692,500</b>	<b>\$0</b>	<b>\$2,680,690</b>
<b>Program Total:</b>	<b>\$1,692,500</b>		<b>\$2,680,690</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$35,000	\$0	\$38,280
Other / Miscellaneous	\$0	\$1,657,500	\$0	\$2,642,410
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,692,500</b>	<b>\$0</b>	<b>\$2,680,690</b>

## Explanation of Revenues

Port City pays \$3,190 per month toward retirement of their debt obligation.

Beginning Working Capital represents Oregon Food Bank prepayment of their debt obligation.

## Significant Program Changes

Last year this program was: #10026, Revenue Bonds



**Lead Agency:** Non-Departmental - All

**Program Contact:** HOUGHTON David B

**Program Offer Type:** Existing Operating

**Related Programs:** 10029

**Program Characteristics:** Climate Action Plan

**Executive Summary**

Emergency Management coordinates disaster preparedness activity in Multnomah County. This includes planning, training, exercise and equipment procurement for County staff and departments as well as coordination with cities, special districts and non-governmental organizations. By developing relationships with community partners, Emergency Management bolsters citizen preparedness community resilience.

In an emergency, Emergency Management functions as the state-mandated conduit for obtaining state and federal resources to support local emergency response for the County, cities and districts, and coordinates emergency and disaster declarations. After an emergency, Emergency Management coordinates with state and federal agencies that provide financial assistance.

**Program Description**

This is the core Multnomah County Office of Emergency Management (MCEM) Program offer and the basis for the Emergency Management UASI Regional offer (10029). Program focus includes: 1) County departmental preparedness; 2) Intergovernmental preparedness; and 3) Citizen and community preparedness and resilience. This work is done with strategic and policy guidance from the Emergency Management Leadership Team, which is made up of senior representatives from County departments with emergency response or support functions. MCEM also receives input from local jurisdictions, districts and agencies engaged in emergency planning. MCEM understands that a resilient community can potentially reduce the burden on limited emergency response capacity in a severe emergency. For that reason, MCEM works with businesses, non-governmental organizations, churches and synagogues, volunteer organizations and directly with citizens to encourage disaster resilience and create a coordinated response to disasters.

MCEM contributes to Climate Action Plan Objectives 17-1 to assess climate-related vulnerabilities, strengths and resiliency; and 17-5 to collaborate with Metro and state agencies to update hazard mapping and inventories.

During an emergency, MCEM activates and manages the County Emergency Coordination Center (ECC) which is staffed by employees from various County departments to provide a single location where strategic direction, response coordination and resource support for incident response is carried out.

Overall program activity is guided by the Emergency Management Performance Grant plan, which includes staff training plans, a rigorous disaster exercise schedule, disaster plan management and coordination with volunteer, state and federal partners.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Annual exercise performance objectives successfully tested.	100.0%	100.0%	100.0%	100.0%
Outcome	Oregon Emergency Management requirements met for annual performance grant.	100.0%	100.0%	100.0%	0.0%

**Performance Measure - Description**

Output: Annual exercise of Emergency Coordination Center and evaluation of performance of established objectives in an After Action Report (AAR). Exercises are expected to reveal performance deficiencies and lead to focused improvements. Actual emergency activation may substitute for an exercise and a self-reported AAR is submitted to the State (as in FY09-10 H1N1 activation).

Outcome: There are 5 project areas, each with multiple activities, in the annual FY 11 Emergency Performance Grant (EMPG). This annual measurement covers required activities for a competent emergency management program. EMPG grant performance projects overlap County Fiscal Years.

## Legal/Contractual Obligation

ORS 401 requires Multnomah County to develop and maintain an effective emergency management program and Multnomah County Ordinance 1138 establishes the County's Office of Emergency Management. ORS 401 requires resource requests and emergency/disaster declarations be submitted by the County Emergency Management Director to the Director of Oregon Emergency Management.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$317,506	\$295,555	\$322,275	\$274,499
Contracts	\$38,700	\$429,124	\$38,950	\$918,928
Materials & Supplies	\$53,502	\$429,438	\$50,880	\$130,346
Internal Services	\$201,584	\$3,000	\$263,185	\$4,157
Total GF/non-GF:	<b>\$611,292</b>	<b>\$1,157,117</b>	<b>\$675,290</b>	<b>\$1,327,930</b>
Program Total:	<b>\$1,768,409</b>		<b>\$2,003,220</b>	
Program FTE	2.50	2.50	2.50	2.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,125,040	\$0	\$995,853
Other / Miscellaneous	\$0	\$32,077	\$0	\$332,077
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,157,117</b>	<b>\$0</b>	<b>\$1,327,930</b>

## Explanation of Revenues

In addition to General Fund, MCEM also receives Emergency Management Performance Grant monies which provide a 50% match to eligible program costs paid for by the County general fund up to approximately \$300,000 for FFY 11. MCEM also applies for and receives State Homeland Security Grant Program funds on behalf of the County and to pass through to other jurisdictions with the County. Additionally, MCEM applies for and receives FEMA Flood Hazard Mitigation Plan funding; and Urban Area Security Initiative funds, which are primarily for regional planning staff and related planning costs described in Program Offer 10029.

## Significant Program Changes

Last year this program was: #10028, Emergency Management

**Lead Agency:** Non-Departmental - All **Program Contact:** HOUGHTON David B  
**Program Offer Type:** Existing Operating  
**Related Programs:** 10028

**Program Characteristics:**

**Executive Summary**

This offer is built on the core Emergency Management program offer 10028. Multnomah County maintains active engagement in the Department of Homeland Security Portland Urban Area Security Initiative (UASI) region emergency policy, planning and preparedness efforts. UASI provides funds to jurisdictions and agencies within the region for regional planning staff, supplies, equipment, training and planning.

**Program Description**

The UASI region includes Clackamas, Columbia, Washington, Multnomah and Clark (WA) counties, and the City of Portland as the administrative agency. UASI grant funds are used regionally for a wide range of preparedness and response capacities in areas such as transportation, law enforcement, IT security and citizen preparedness. The County's Emergency Management Director and regional counterparts serve as the policy group for this grant. This offer reflects MCEM's staffing positions for UASI support to the following inter-jurisdictional working groups/Committees : Maritime and Civil Aviation, UASI Points of Contact (POC) Group, Urban Area Working Group, Public Health and Medical Working Group, Resource Management Committee and Regional Training Committee.

Projects include Multnomah County Continuity of Operations/Government (COOP/COG) Project, Regional Logistics Support Team, Resource Inventory and Typing Project, and development of a regional GIS integration proposal.

Other Public Health/Medical Working Group-related activities include City Readiness Initiative exercise support, EMTrack (electronic patient tracking) Project Implementation Team, Northwest Renal Emergency Preparedness Coalition.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Project expenditures and reports within administrative requirements	0.0%	0.0%	0.0%	100.0%
Outcome	Assigned planning processes/products are on time or ahead of schedule	100.0%	100.0%	100.0%	100.0%

**Performance Measure - Description**

**Output:** UASI Regional Staff are responsible to monitor and report expenditures and project progress through project completion. Reports are submitted at least quarterly.

**Outcome:** Planning projects assigned to staff funded by UASI will change in focus and number over time, based on priorities identified by the UASI Region Points of Contact (POC) Group. This measure is based on planning staff reports to the UASI POC. Planning periods will overlap the budget year.

## Legal/Contractual Obligation

Intergovernmental Agreement with City of Portland, which administers the UASI grant.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Personnel	\$0	\$429,041	\$0	\$503,750
Materials & Supplies	\$0	\$2,379	\$0	\$0
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$431,420</b>	<b>\$0</b>	<b>\$503,750</b>
<b>Program Total:</b>	<b>\$431,420</b>		<b>\$503,750</b>	
Program FTE	0.00	2.00	0.00	2.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$431,420	\$0	\$503,750
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$431,420</b>	<b>\$0</b>	<b>\$503,750</b>

## Explanation of Revenues

Department of Homeland Security Urban Area Security Initiative (UASI) regional funding to Multnomah County through Intergovernmental Agreements with the City of Portland. These funds are expected to continue for at least into FY 13.

## Significant Program Changes

**Last year this program was:** #10029, Emergency Management UASI Regional  
No significant changes.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Nancy Bennett

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Office of Government Relations serves a vital function in protecting the interests of Multnomah County before the Oregon Legislature and before Congress. The Office represents the Board of Commissioners before the federal, state, and local governing bodies to advance Multnomah County's annual legislative agenda.

**Program Description**

The Office of Government Relations is managed by two Co-Directors of Government Relations. They are responsible for managing the federal and state legislative agenda set by the Board of Commissioners. The Co-Directors serve as state lobbyists for the county, manage budget and compliance issues, manage the County's federal government relations contract, represent the County with coalitions and at stakeholder meetings, lead county government relations meetings, and provide regular updates to the Board of Commissioners.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Comprehensive state and federal legislative agenda	0	0	0	1
Outcome	Number of County policy priorities that are supported and advanced by the County	0	0	0	0
Output	Annual Report on state and federal legislative outcomes	0	0	0	1
Output	Number of priority bills passed or halted during Legislative session.	0	0	0	0

**Performance Measure - Description**

The Office of Government Relations will focus on four performance measures: 1) produce a comprehensive state and federal legislative agenda that is consistent with the County's budget and policy priorities; 2) produce an annual report on state and federal legislative outcomes; 3) report the number of priority state and federal bills/amendments that passed or were halted during the legislative session; and 4) report the number of county policy priorities that are supported and advanced by members of the Multnomah County delegation.

## Legal/Contractual Obligation

All government relations activities shall be consistent with federal laws and policies, State of Oregon statutes, the Multnomah County Home Rule Charter and Multnomah County Laws.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$240,510	\$0	\$388,619	\$0
Contracts	\$136,000	\$0	\$100,000	\$0
Materials & Supplies	\$13,500	\$0	\$11,579	\$0
Internal Services	\$28,528	\$0	\$22,148	\$0
Total GF/non-GF:	<b>\$418,538</b>	<b>\$0</b>	<b>\$522,346</b>	<b>\$0</b>
Program Total:	<b>\$418,538</b>		<b>\$522,346</b>	
Program FTE	2.00	0.00	3.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This program is funded by County General Fund.

## Significant Program Changes

**Last year this program was:** #10030, Government Relations Office  
The Chair's FY 2012 executive budget adds a legislative analyst position.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Mark Campbell

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

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Oregon Historical Society (OHS) is a private not-for-profit entity founded in 1898. Since 1899, it has received appropriations from (1) state government (except 2002-6) in recognition of its operation of the state history museum and a large Oregon history research library; and (2) Multnomah County (\$335k per year, 1999-2003) as a participant in the county library levy. Passage of special purpose levy 26-118 in November 2010 provides for levy support at the rate of \$0.05 per thousand of assessed value. Four east county historical societies (Fairview-Rockwood-Wilkes, Gresham, Troutdale, and Crown Point Country) will together receive \$150,000 per year from the levy proceeds. The levy allocates the balance, estimated at \$1,795,151 in FY 2012, to the Oregon Historical Society for purposes described below.

**Program Description**

OHS operates the state history museum, the Davies Family Research Library (Oregon and Oregon Territory), and educational programs for adults and school groups. After nearly a decade of cuts in appropriations, programs, and service hours, the levy funding will provide basic operational support, as well as funding to underwrite improved hours of service in the library, free admission to residents of Multnomah County and all school groups, improved collections development and care, and new and exciting public programming.

OHS is committed to serving the diverse communities of the region and the state, and reflects that commitment in its programs and collections.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Multnomah County citizens admitted free of charge	100	0	100	10,000
Outcome	Improved library hours per week	12	0	12	32
Output	Increased number of public programs	12	0	15	28
Quality	Care of Collections through additional curator	0	0	0	1

**Performance Measure - Description**

In addition to providing basic operational support, the levy will increase OHS's public services. By adding library staff, OHS will be able to extend library hours to 32 per week (Tuesday-Saturday). Free admission means we will serve a much larger audience in both the museum and library. In the past, library levy support and consequent free library admission brought heavy use by citizens. OHS will add a dedicated position for development and management of public programs. The result will be an increased number of programs for the public. Levy funding will also support the addition of one or more curators for museum collections. Curators are responsible to collections care, developing the collections to address future needs, and creating changing exhibits from the Society's own holdings.

### Legal/Contractual Obligation

Measure 26-118 provides the Oregon Historical Society with a five-year property tax levy at the rate of \$0.05 per thousand dollars of assessed value. Four east county historical societies (Fairview-Rockwood-Wilkes, Gresham, Troutdale, and Crown Point Country) will together receive \$150,000 per year from the levy proceeds.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$0	\$0	\$0	\$1,945,151
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,945,151</b>
Program Total:	<b>\$0</b>		<b>\$1,945,151</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Taxes	\$0	\$0	\$0	\$1,945,151
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,945,151</b>

### Explanation of Revenues

This is a dedicated local option property tax levy collected by Multnomah County on behalf of the Oregon Historical Society (OHS). OHS receives no other County funding.

### Significant Program Changes

✔ Significantly Changed

#### Last year this program was:

This is a new program for FY 2012, and represents the first year of the levy.



**Lead Agency:** Non-Departmental - All

**Program Contact:** Julie Neburka

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Regional Arts & Culture Council (RACC) provides contract services to Multnomah County and its residents. Formerly a county bureau (the Metropolitan Arts Commission), RACC is now an independent 501(c)(3) organization that leverages significant support from other regional government partners and private donors before re-investing the County's allocation in programs and services that are creating vibrant neighborhoods, enhancing our children's education, and fueling a creative economy with measurable economic benefits. This request reflects RACC's contractual increase of 1.5% and honors the County's directive to apply a 2% reduction over last year.

**Program Description**

RACC plays a vital role in the county's economic and community development efforts. Specifically, RACC provides services in five key areas: (1) Through Advocacy, RACC helps build support and resource for arts and culture. (2) RACC Grants provide artists and arts organizations with the base financial support they need to continue serving our community. (3) RACC's nationally acclaimed Public Art program, including the Multnomah County 2% for Art Ordinance, integrates a wide range of art into public spaces. (4) RACC provides other Community Services including workshops for artists, consulting for arts organizations, and a variety of printed and electronic resources; and (5) RACC is developing comprehensive Arts Education solutions for our community.

Arts and culture activities add measurable value to our region's economy and to our quality of life. Artists and arts organizations bring residents together for shared cultural experiences that stimulate creativity which in turn supports more innovative businesses and a richer educational experience for our children. A vibrant arts community serves as a magnet for young creatives, and Multnomah County's investment in the arts contributes to the competitive advantage we have over other regions in the country that are all competing to attract sustainable businesses and a creative, well-educated workforce. Multnomah County is home to a vast majority of the region's artists and arts and culture organizations, which together generated more than \$318 million for the local economy last year.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Multnomah County children directly served	9,000	9,000	10,000	10,000
Outcome	Purchasing & Payroll power of funded nonprofit arts organizations in the County	76,417,000	76,000,000	76,000,000	76,000,000
Input	Multnomah County General Fund invested in arts and culture	165,291	161,060	161,060	160,206
Efficiency	Dollars leveraged by RACC from other public & private partners	6,818,000	7,611,000	7,000,000	7,100,000

**Performance Measure - Description**

County dollars help RACC develop strategic partnerships and build more support from public and private partners throughout the region. Last year, RACC secured more private funds for arts and culture than ever before, including \$426,000 in gifts from businesses and individuals through Work for Art, RACC's workplace giving program.

## Legal/Contractual Obligation

None.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$161,060	\$0	\$160,206	\$0
Total GF/non-GF:	<b>\$161,060</b>	<b>\$0</b>	<b>\$160,206</b>	<b>\$0</b>
Program Total:	<b>\$161,060</b>		<b>\$160,206</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

This is a General Fund program.

## Significant Program Changes

**Last year this program was:** #10032, Regional Arts & Culture Council

In FY11, support from the County is being combined with City of Portland funds, Work for Art proceeds, and other sources to fund more than \$2.2 million in grants to 79 Multnomah County artists and 132 Multnomah County nonprofit organizations. In FY12, RACC will reduce the amount of Multnomah County funds allocated to grants by \$854.

The County contracts with RACC to build and maintain its public art collection, and those programs are funded through a separate percent-for-art ordinance. (These dedicated revenues are not included in this request.)

RACC provides valuable resources to artists and arts organizations at no cost to them through the RACC website ([www.racc.org](http://www.racc.org)), monthly newsletter (ArtNotes) and other information services. In addition, hundreds of artists and arts administrators are served each year through RACC workshops and other technical assistance programs.

Facing difficult budget cuts of their own, our public schools have been reducing or eliminating arts education programs. RACC is working to reverse this trend through "The Right Brain Initiative," a public/private collaboration to integrate arts education into the standard curriculum for every K-8 student in the region. County investments last year helped build a coalition of school district superintendents, parents, teachers, artists, arts organizations, foundations, businesses, and other governments who are committed to a more equitable arts education delivery system, and leveraged \$750,000 from other public and private sources that will be used to serve 10,500 students in the region this year. The County's FY12 renewed investment of \$30,000 will leverage an additional \$700,000 from other sources to help RACC serve 11,000 students.

RACC's management and general expenses are a low 7%. This includes costs associated with our website, which is chock-full of resources for artists and arts advocates, receiving over 750,000 unique visits in 2010.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Kalissa Canyon-Scopes

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Office of Diversity and Equity (ODE) is a hub for Multnomah County diversity and equity initiatives. The ODE mission is to hold Multnomah County accountable to ensure access, equity, and inclusion in our services, policies, practices, and procedures. Diversity is a workforce reality and an advantage, positively affecting creativity, problem solving and organizational flexibility and enabling the county to provide stronger services and better serve all county citizens. ODE services include: data analysis, training and consulting, policy, practice, and procedure review, coordination of diversity and equity initiatives, equal employment opportunity (EEO) and Affirmative Action compliance, stakeholder and community relations, coordination and oversight for the County's Employee Network Groups, educational resource library, identifying institutional barriers to inclusiveness and opportunity, recruitment outreach audits, public employee diversity conference sponsorship and outreach support and consultation.

**Program Description**

A healthy workplace with open, respectful communication has been shown to reduce turnover, absenteeism, and employee health problems and to increase job satisfaction and client/customer satisfaction. Successful Diversity, Equity and Inclusion efforts are championed from the top with the whole workforce held accountable for a culture based on healthy behavior, open communication and respect.

In FY 12 ODE launches a two year culture change effort, "What Work Should Be Like" to be completed in four stages (I. Courageous Leadership, II. Courageous Conversation, III. Courageous Action, IV. Courageous Commitment), over two years. Outcomes and activities from that effort will include:

**Team building:** Establishing a county-wide Diversity Committee to communicate and coordinate existing work across the county and an Equity Council to review policy and practices and make recommendations for change and engaging all staff in identifying healthy vs. harmful behaviors so that standards of behavior are agreed upon throughout the organization

**Assessment:** A county-wide equity inventory is being conducted within the FY12 budget process. "ODE-to-Go" ODE staff travels to a county building for a brown bag lunch to meet employees, explain ODE services, better understand county departments and cultures and to field questions. (FAQ are posted to the ODE website), the Chief Diversity and Equity Officer uses "Field Trip Fridays" to meet with employees throughout the county to gain in-depth understanding of culture, challenges and successes of county programs and services.

**Implementation:** Establishment of Healthy Workplace and Diversity policies, creating a robust informal complaint mechanism including a hotline, tracking system, mediation program, and Ombudsman position and program. A variety of educational interactive efforts including book groups, Face book and Twitter campaigns, educational videos and focus questions for county-wide discussion. Enhanced communication and best practice sharing strategies will include ODE Website toolkits, social media, video messaging and desktop training,

**Accountability and Evaluation:** Establishing an annual scorecard to measure progress including employee satisfaction, performance, and retention; recruitment and hiring, and complaint resolution satisfaction.

**Sustaining Change:** Incorporating behavioral expectations into county-wide trainings, adding a component to the county new-employee-orientation that describes county work culture and behavioral expectations, implementing practice improvements to ensure county hiring processes reflects behavioral expectations and creating procedures to ensure that behavior is directly linked to performance expectations and review. Toolkits will be available on the ODE website for internal use and for other organizations to use, and presentations at national conferences will share the county model nation-wide.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# Monitoring Reports	10	10	10	10
Outcome	Minority Employment vs Labor Market	113.9%	100.0%	100.0%	100.0%
Output	# of county-wide policies, plans, quantitative and qualitative reports	8	16	20	20
Output	county-wide diversity and equity inventory/assessment and strategic plan	0	1	1	1

## Legal/Contractual Obligation

Implement Board Resolution NO. 07-072, Affirmative Action Plan 2007-2009. Maintain complaint procedures in accordance with Article 24(b) of Local 88 agreement. Carry out intent of Presidential Executive Orders 11246, (as amended) and 11478 Congressional Federal Register; Title 41 Part 60-2 Revised Order No. 4 Title VII of the Civil Rights Act of 1964, as amended by the President on March 24, 1972, CFR Titles 28, 29 and 43 Vietnam-era Veterans Readjustment Act of 1974 and American with Disabilities Act (Public Law 101-336); Oregon Revised Statutes ORS 659A.030; Multnomah County's Municipal Code 3.10.270; Multnomah County Personnel Rule 3-40, Discrimination and Harassment-free Workplace Multnomah County Code 9.060 Equal Employment Opportunity that prohibits discrimination in any employment action; Multnomah County Personnel Rules - Chapter I General Provisions, 1-10-040, requiring affirmative action to prevent current or future discriminatory conditions and eliminate unlawful discrimination.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$511,851	\$0	\$547,672	\$0
Contracts	\$48,000	\$0	\$9,000	\$0
Materials & Supplies	\$5,300	\$0	\$17,940	\$0
Internal Services	\$27,934	\$0	\$34,149	\$0
Total GF/non-GF:	<b>\$593,085</b>	<b>\$0</b>	<b>\$608,761</b>	<b>\$0</b>
Program Total:	<b>\$593,085</b>		<b>\$608,761</b>	
Program FTE	4.00	0.00	5.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund program.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10037A, Office of Equity & Diversity

1.0 FTE added for office manager to coordinate social and other media, equity council meetings, provide employee network group and library and reference support.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Kat West

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:** One-Time-Only Request, Climate Action Plan

**Executive Summary**

The Office of Sustainability is the central hub for sustainability efforts (environmental protection, economic development, and social equity) within Multnomah County government. The office works directly with elected officials and county departments to ensure that county operations and services are efficient, innovative, and save taxpayer money. For the larger community, the office is a major convener and resource for sustainability initiatives by working with state and local governments, universities, and community leaders on issues that matter the most to our residents - healthy neighborhoods, a thriving economy, and enhanced quality of life. The Office of Sustainability (1) saves the county money by championing innovative and efficient operations/services/projects; (2) provides critical support to county departments in meeting the goals in the county's 35+ sustainability policies; and (3) convenes and partners with the community on targeted initiatives to promote a healthy, equitable, and prosperous community.

**Program Description**

Multnomah County is one of the greenest and most efficient local governments in the nation. The Office of Sustainability has led this effort by providing critical direction, policy analysis, project management, and accountability to this continuing accomplishment, thus ensuring that the county saves resources and money. In addition, Sustainability champions a healthy, equitable and prosperous community by leading and partnering on projects and policies that shape and enhance the quality of life for our residents. The three program areas for FY12 are: Food Equity, Energy/Climate, and Resource Conservation. Key efforts include: (1) implementing the goals of over thirty-five Board adopted sustainability policies, including our 2009 Climate Action Plan and 2008 Green Building Policy; (2) continually identifying new and innovative strategies for operational efficiency, including the launch of a Sustainable Jail Project and construction of the Sellwood Bridge; (3) working with the community on health and equity projects, including the Multnomah Food Action Plan; and (4) partnering with regional stakeholders to implement sustainability strategies, including creating an Economic Development Food System Strategy with Clackamas County. (CAP: 1-2, 1-3, 3-3, 9-1, 10-1, 11-4, 14-1, 14-2, 15-1, 15-2, 15-3, 15-4, 15-5, 15-6, 16-1, 16-2, 16-6, 17-1, 17-2, 17-3, 17-6, 17-7, 18-1, 18-2, 18-4, 18-7, 18-8, 18-9, 18-11 + Program Management)

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Dollar value of fresh, healthy produce donated to emergency food organizations	25,000	30,000	30,000	35,000
Outcome	Greenhouse gas emission reduction from county operations below 2001 levels	30.0%	25.0%	32.0%	35.0%
Outcome	Recycling rate for County operations	42.0%	0.0%	45.0%	50.0%
Output	Graduate 10 beginning farmers + release economic opportunity foodshed study	0	0	0	10

**Performance Measure - Description**

 **Measure Changed**

Output: Dollar value of fresh, healthy produce donated to emergency food organizations from county CROPS farm and garden projects.

Outcome: The county's newly adopted climate goal is to reduce greenhouse gas emissions 40% below 1990 levels by 2030 and 80% by 2050. This performance measure demonstrates county operation greenhouse gas reductions from our 2001 baseline level when the county adopted its first climate action plan and began tracking data.

Outcomes: The county's recycling goal is 75% by the end of 2012.

Outcomes: Sustainability is launching a pilot beginning farmer apprenticeship program build off the CROPS program and to decrease barriers for new farmers; and is co-commissioning an economic opportunities strategy for our foodshed with Clackamas County to develop our local food economy and create jobs. (new measure)

**Legal/Contractual Obligation**

None.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$431,200	\$11,300	\$478,240	\$0
Contracts	\$10,949	\$600	\$32,000	\$0
Materials & Supplies	\$11,138	\$14,821	\$23,008	\$0
Internal Services	\$58,048	\$29	\$46,196	\$0
<b>Total GF/non-GF:</b>	<b>\$511,335</b>	<b>\$26,750</b>	<b>\$579,444</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$538,085</b>		<b>\$579,444</b>	
Program FTE	5.00	0.00	5.00	0.00
<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$26,750	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$26,750</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

This is a General Fund program that receives various grants and donations. This program offer includes \$10,000 in in-kind donations for the County CROPS program for FY12, and \$10,000 in the Chair's executive budget for construction of a community garden in east Multnomah County.

The adopted budget contains \$52,000 of one-time General Fund for a program to establish a food system economic cluster. (See below)

**Significant Program Changes**

**Last year this program was:** #10038A, Office of Sustainability

The adopted budget contains \$52,000 of one-time General Fund for a program to establish a food system economic cluster. There is tremendous economic potential in our region's food economy. Multnomah County, Clackamas County, and PSU have proposed to jointly develop a Regional Food System Cluster Strategy and implementation tool (e.g. foodshed mapping tool) which will promote our local food economy, create jobs, protect the integrity of our natural resources, and increase equitable access to local food. The partnership will focus on answering three key questions: (1) what are the opportunities for economic growth in the regional foodshed? (2) How can the region brand itself as a destination for agri-tourism and gastro-tourism?, and (3) are there opportunities for renewable energy production in the food system that could increase earnings or expand production?. The elements addressed will include: supply, demand, diversification of land use and production, supply chain inefficiencies, socio-economic trends, and regulatory barriers that may be hindering growth across the producer and consumer sectors. Building off of the partnerships established with the Multnomah Food Action Plan, local business, non-profit and governments will be invited to participate in this effort. The desired outcome is to maximize an untapped market by developing a linked-industry economic development cluster that supports our regional food economy (from the farmer to the restaurant to the home-cooked meal) to foster productivity, innovation, and job creation for Multnomah County residents. (CAP: 12-1, 12-2, 12-5)

The resources requested in this offer will fund:

- 1 limited duration .5 FTE Project Manager to develop partnerships, obtain grant funding, coordinate meetings, provide input on research activities and communicate with researchers
- Jobs & Food System Cluster Strategy & \$14,000 grant match
- Resource mapping of food system job & economic opportunities

**Lead Agency:** Non-Departmental - All  
**Program Offer Type:** Innovative/New Program  
**Related Programs:**  
**Program Characteristics:**

**Program Contact:** Marissa Madrigal

**Executive Summary**

The Economic Development Program works closely with the Multnomah County Board of Commissioners to drive county-wide economic development policy, expand relationships with Multnomah County businesses, promote job creation and staff the Multnomah County Business Advisory Committee.

**Program Description**

The Economic Development Program is run by the Economic Development Advisor. The program is responsible for identifying opportunities for Multnomah County to promote economic development, including: job creation and retention, job training for youth and adults, business recruitment and access to capital for small businesses and underserved communities. The program works with the Multnomah County Board of Commissioners to partner with businesses, trade associations, labor groups and non-profits to set and achieve Multnomah County's economic development goals and is counseled by the Business Advisory Committee.

The program also collects information and reports annually on the expenditures of State of Oregon Lottery Funds for economic development; oversees Multnomah County's Microlending program (Offer #10035); manages Multnomah County's contribution to Summer Youth Connect, a summer internship program for youth working in city and county government; and staffs the Multnomah County Business Advisory Committee.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Compile annual report on Oregon Lottery Fund expenditures.	0	0	0	1
Outcome	Multnomah County Economic Development activities available on line	0.0%	0.0%	0.0%	100.0%
Output	Execute contract for Microlending program	0	0	0	1

**Performance Measure - Description**

By compiling economic development expenditures and providing them to the public, Multnomah County will increase transparency and begin a dialogue about its economic development strategies. The microlending program (program offer number 10035B) will support local small businesses and leverage federal dollars.

**Legal/Contractual Obligation**

None.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Personnel	\$0	\$0	\$130,332	\$0
Contracts	\$0	\$0	\$30,000	\$0
Materials & Supplies	\$0	\$0	\$36,000	\$0
Internal Services	\$0	\$0	\$10,500	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$206,832</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$206,832</b>	
Program FTE	0.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

This program is funded in the General Fund.

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

In FY 2011, the activities in this program were budgeted in the Board Clerk's Office.



**Lead Agency:** Non-Departmental - All  
**Program Offer Type:** Innovative/New Program

**Program Contact:** Marissa Madrigal

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program offer funds \$150,000 in small business microlending to a Multnomah County focused non-profit partner with an active microlending program. The county's \$150,000 commitment finances a loan loss reserve, leveraging additional outside bank or U.S. Small Business Administration capital up to \$425,000, for a net impact of up to \$500,000. This program will provide 100 to 150 small and start-up business clients located in Multnomah County access to loan capital, financial education and training, and other support services. By lending to small business clients who are otherwise unable to access business financing, the county's investment in this program creates jobs and opportunities for underserved populations.

**Program Description**

Many small businesses and new start-ups in our community lack adequate access to credit. While banks provide loan capital to the most credit worthy borrowers, many small and start-up businesses in our community cannot meet the necessary criteria to access traditional bank financing. In addition, County residents interested in starting or expanding small business ventures often lack specific business skills, necessitating that training & support be paired with the loan. Microlending organizations (which compete with credit cards, loans from family and friends, and even with disreputable 'loan sharks') fill this borrowing gap. In addition, the microlending programs currently active in Multnomah County do not have an adequate capital base to serve more than a small fraction of their potential clients.

Microlending Programs have had a strong and growing presence in Multnomah County, in the United States, and around the world over the past 20 years. The service provided by this program offer awards \$150,000 to one Multnomah County focused Microlending organization, via competitive procurement, to fund a loan loss reserve. This loan loss reserve will enable the selected Microlending organization to obtain up to an additional \$425,000 in outside capital. This net \$575,000 in new loan capital, enabled by County one-time funding, permits a significant ramp-up of lending to microenterprises (and attendant job creation) in Multnomah County.

By improving small and start-up business access to capital and by coupling that financial support with intensive training and support services, this program makes available opportunities for entrepreneurship and self sufficiency. Small business support services provided by local microlending institutions include: business plan writing, cash flow projections, accounting and marketing training, and ongoing business coaching and counseling. This program offer itself does not fund training and support directly, but it will enable additional business owners to access those services by increasing available microloan capital by up to \$575,000. The loan loss reserve funded by this program offer shall make up no less than 20% of the total new funds enabled by this funding stream. The U.S. Small Business Administration' (SBA) Microlending Program requires a 15% loan loss reserve in order to obtain capital at a heavily subsidized interest rate. Bank and Community Development Financial Institution loan loss reserve requirements for microlending vary widely. The SBA typically awards funds for microlending business support services in conjunction with grants of SBA loan financing.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of microenterprises served	0	0	0	100
Outcome	Dollars leveraged by loan loss reserve	0	0	0	425,000
Outcome	Percent of clients served at or below 60% of regional median family income (MFI)	0.0%	0.0%	0.0%	25.0%

**Performance Measure - Description**

**Legal/Contractual Obligation**

None.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2011	2011	2012	2012
<b>Program Expenses</b>				
Contracts	\$0	\$0	\$150,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$150,000</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**

This program is funded with one-time General Fund resources.

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

This is a new proposal for FY 2012.

**Lead Agency:** Non-Departmental - All

**Program Contact:** Corie Wiren

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Multnomah County has the honor of hosting more than 3,200 county commissioners from around the country for the National Association of Counties (NACo) 2011 Annual Conference.

Multnomah County was selected through a competitive bidding process, the 2011 NACo annual conference will be held in Portland, Oregon for the second time (the first time was in 1998)— a strong statement about the draw of the city as well as Multnomah County and counties in the surrounding region.

**Program Description**

Counties provide tremendous value in ensuring quality of life for residents of all ages in rural, suburban and urban areas. This year, our nation's counties, which employ more than 2 million professional, technical and clerical personnel, will deliver health services, circulate 6.4 billion library books, and add or improve miles of roads to keep our communities running efficiently, while being responsive to the changing needs of its residents.

As the single largest gathering of county leadership and service organizations in the country, NACo 2011 will draw key county leadership and decision-makers, including elected and appointed county government executives, directors of departments and financial, information, technology and purchasing officers. National office holders for NACo and its affiliated organizations will also be in attendance.

Because of the significant growth in visibility and recognition of Portland as a tourism and conference destination, NACo 2011 will have a profound economic impact on the county, the surrounding region, and the state of Oregon. In fact, expenditures by NACo, the host counties, and conference attendees and exhibitors is expected to generate \$9 million in local economic impact from lodging, food, transportation, entertainment, tourism and gifts.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	NACo 2011 Conference	0	0	0	1
Outcome	Economic impact for Multnomah County and the region	0	0	0	1
Outcome	Increased role for Multnomah County at the regional, state and federal level	0	0	0	1

**Performance Measure - Description**

## Legal/Contractual Obligation

Contract between NACo and Multnomah County.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$750,000	\$0	\$75,000	\$0
Materials & Supplies	\$0	\$0	\$150,000	\$0
<b>Total GF/non-GF:</b>	<b>\$750,000</b>	<b>\$0</b>	<b>\$225,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$750,000</b>		<b>\$225,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Other / Miscellaneous	\$375,000	\$0	\$75,000	\$0
<b>Total Revenue:</b>	<b>\$375,000</b>	<b>\$0</b>	<b>\$75,000</b>	<b>\$0</b>

## Explanation of Revenues

All revenues will come from fundraising efforts and hotel room rebates.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #10031B, NACo Conference Fundraising

In FY 2011, there was a large emphasis on fundraising and planning for Multnomah County's responsibilities as host. This one-time-only request is to cover labor costs and paying off any remaining invoices associated with the July conference.

**Lead Agency:** Non-Departmental - All  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 10028

**Program Contact:** Joe Partridge

**Program Characteristics:** One-Time-Only Request, Climate Action Plan

**Executive Summary**

This program offer supports the Multnomah county 2009 Climate Action Plan (CAP) which serves as the 40-year roadmap for the institutional and individual change needed to climate change resilient community. Because many climate adaptation planning activities are closely related to other hazard mitigation activities, Multnomah County Emergency Management has a critical role in coordinating climate adaptation planning across county departments. This program offer will create a limited-duration position in Multnomah County Emergency Management Office that will be the main point of contact for county climate adaption planning and will coordinate climate adaptation planning across departments.

**Program Description**

This Program Offer is designed to implement actionable items in the Climate Action Plan by focusing on initiatives that intersect between traditional emergency management activities (hazard mitigation) and climate change preparedness (climate adaptation planning.) This is a scaled offer requesting 1.0 FTE limited-duration Program Development Specialist to accomplish these efforts.

Specifically the resource requested in this offer will:

- 1) Lead MCEM efforts to meet its obligations under Action #17-1 and #17-5 dealing with climate adaptation planning
- 2) Lead a countywide climate vulnerability assessment in conjunction with operating departments. Work with other emergency management agencies regionally to coordinate climate change adaptation efforts.
- 3) Work with county departments to identify and implement climate adaptation planning activities within those departments.
- 4) Provide a single point of contact for internal and external stakeholders who want information about climate adaptation planning and county efforts to accomplish such planning.

A 1.0 Program Development Specialist will be required to support the four actions identified above.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	# of Climate Adaptation activities accomplish with departments	0	0	0	12
Outcome	# of Climate Adaptation action plans developed with departments and stakeholders	0	0	0	6

**Performance Measure - Description**

# of Climate Adaptation activities accomplish with departments: This position will work with operating departments to conduct activities related to understanding climate change and how anticipated changes will effect departmental operations.

# of Climate Adaptation action plans developed with departments and communities we serve: Development of plans that address the needs identified above.

**Legal/Contractual Obligation**

None.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$0	\$94,199	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$94,199</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$94,199</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**

This is funded for FY 2012 with one-time General Fund resources.

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

This program is a new request for FY 2012.

This Program Offer will allow MCEM to meet its obligations under Action Items 17-1 and 17-5 in the Climate Action Plan.

**Lead Agency:** Non-Departmental - All  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 10028

**Program Contact:** HOUGHTON David B

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Continuity of Operations and Government (COOP/COG) planning is essential to assure that limited resources are effectively distributed to assure core County functions continue when a disaster strikes. County Departments have received training and have access to a web-based COOP planning tool. Departments and elected offices within County government are at differing levels of COOP planning. Plans are not coordinated across departments. This one-time-only program offer will provide intensive full-time project management to assure that COOP/COG plans are completed, plan maintenance strategies are in place and plans are coordinated across Departments.

**Program Description**

COOP plans are critical when the County is struck by a catastrophic event like an earthquake, and also important when operations are compromised by events like utility disruptions such as severed communications cables that shutoff a building's phone, internet or power services. In 2008, County Departments benefited from Emergency Management's grant-funded acquisition of a web-based COOP planning tool and training on how to conduct COOP planning. Subsequent maintenance of departmental plans has been inconsistent. There has been substantial turnover among trained Department staff who had COOP plan maintenance responsibilities and there has not been coordination of COOP plans across Departments. Operational plans to support continuity of government need updating.

This program offer will provide one-time-only funding for a project management function to work with Departments to finalize COOP/COG plans, develop a systematic plan maintenance strategy and assure plans are coordinated across departments. Emergency Management expects to be able help Departments and elected official staff maintain plans once the COOP/COG planning process has matured and the plans are de-conflicted.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	COOP/COG plans current, de-conflicted and maintenance strategy in place	0.0%	0.0%	0.0%	100.0%
Outcome	COOP training, plan sessions completed in all departments	0.0%	0.0%	0.0%	100.0%
Outcome		0	0	0	0
Output		0	0	0	0

**Performance Measure - Description**

**Outcome:** Departmental plans are documented on the web-based COOP planning tool, and documented plans for regular ongoing plan maintenance are available.

**Output:** Tailored COOP training and planning sessions with all departments and with elected staff are integral to successful plan completion and an effective maintenance strategy.

**Legal/Contractual Obligation**

NA

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$0	\$0	\$125,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$125,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$125,000</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**

This program is funded with one-time General Fund resources.

**Significant Program Changes**

Last year this program was:



**Lead Agency:** Non-Departmental - All

**Program Contact:** HOUGHTON David B

**Program Offer Type:** Program Alternative /

**Related Programs:** 10028

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

A new primary Multnomah County Emergency Coordination Center (ECC) will be developed at the Juvenile Justice Center (1401 NE 68th Ave, Portland, OR) and the current ECC will be maintained as a secondary ECC. This will help mitigate operational risks of relying on the current facility during a major disaster.

**Program Description**

The current Emergency Coordinating Center (ECC) located in the basement of 501 SE Hawthorne will be replaced as the primary ECC but will continue to be maintained and used by Multnomah County Office of Emergency Management as a secondary ECC.

The existing ECC has several significant shortcomings; it is likely to suffer significant damage in an earthquake and it has inadequate HVAC systems support. This creates a situation where the ECC would be unavailable to support countywide resource coordination activities during and after a significant natural disaster. Security and access control to this location is limited as it is in a building that is open to the public.

The Multnomah Building ECC does not have heating, ventilation and air conditioning (HVAC) when the building is on generator power. Past experience tells us that with even fewer than 6 people in the ECC, the room air becomes a problem within a few hours due to CO2 and heat from computers, radios, etc. Connecting the generator to the building HVAC system and related HVAC engineering will be required. Once done, the generator will have to support the entire building's HVAC, rather than just an ECC module. This will draw down generator fuel at a more rapid rate. We are not clear on the possible viability of the Multnomah Building in a significant earthquake.

The new ECC will be located at the Multnomah County Juvenile Justice Center. This facility is built to a higher earthquake standard, has better HVAC systems to support longer-term operations during non-business hours and has superior access control. This program offer will focus on minor modifications of existing space, build-out of telecommunications, IT, radio and furnishings for the ECC.

The existing ECC will continue to be maintained by MCEM as a secondary ECC. In the event that the new primary ECC isn't available the backup ECC can be used. The back-up ECC could also be used as a support facility during a very large incident that required the use of Multi-Agency Coordination Groups or other disaster-related activities.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	New ECC facility	0	0	0	1
Outcome	Ability to operate an ECC after a significant natural disaster, like and earthquake, that renders the facility	0	0	0	1

**Performance Measure - Description**

Both output and outcome relate to creating a more resilient ECC location for the County's role in incident support and coordination during a disaster.

**Legal/Contractual Obligation**

NA

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Materials & Supplies	\$0	\$0	\$100,000	\$0
Internal Services	\$0	\$0	\$130,000	\$0
Capital Outlay	\$0	\$0	\$20,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$250,000</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**

One-time General Fund resources fund this program.

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

This is a new program for FY 2012.

**Lead Agency:** Non-Departmental - All  
**Program Offer Type:** Innovative/New Program  
**Related Programs:** 10028

**Program Contact:** HOUGHTON David B

**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program offer will build on a regional vulnerable populations emergency planning framework to integrate the needs of populations with physical, sensory, mental health, cognitive or developmental conditions into the County's disaster planning. The project funded by this offer will tie vulnerable population needs into the County Emergency Operations Plan, and include building mapped information into Emergency Management's web-based mapping tool used for planning and response coordination.

**Program Description**

A Regional Vulnerable Populations Emergency Annex was developed in 2010 to assist counties in our region in understanding the functional needs of individuals in an emergency. This document provides a framework for integrating vulnerable populations into the County's disaster planning. These individuals can be challenged by rapid onset events, isolating events, power failure or large-scale and prolonged events. Issues such as appropriate alert and notification, transportation, evacuation, shelter requirements, durable medical needs and behavioral health issues in shelter populations will be addressed by this offer.

Using the framework document and subsequent analysis based on RAND Institute and National Council on Disability reports, this offer will fund a project to build vulnerable population needs into the current County Emergency Operations Plan (EOP). The project will work with departments including Department of County Human Services and Health as well as community stakeholders to integrate departmental planning with the EOP. Additionally the project will work with IT/GIS to facilitate the use of geo-coded information including demographics, service sites, and transportation routes into planning and response tools. Requirements for a vulnerable populations registry that would more readily integrate with alert and notification systems and 911 call/data system will be identified.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Documented planning sessions with stakeholders	0	0	0	24
Outcome	Vulnerable population County planning annexes completed	0.0%	0.0%	0.0%	100.0%

**Performance Measure - Description**

Output measure documents processes, data and agreements used to inform written planning annexes

Outcome

EOP annexes provide guidance to Departments, agencies and emergency coordinators who are activated in a disaster situation.

### Legal/Contractual Obligation

The Older Americans Act requires emergency/disaster preparedness planning for older adults in Multnomah County.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Contracts	\$0	\$0	\$84,070	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$84,070</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$84,070</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

\$84,070 - County General Fund

### Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Carol Matteson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The funds in the county's Behavioral Health Fund, which are maintained by the county, represent the accumulation of any unspent Medicaid dollars annually and interest earned on the fund balance throughout the fiscal year. The use of these funds is restricted by the federal government. The money only can be used for those individuals who are Medicaid eligible and are in need of mental health services authorized by the county according to Center for Medicaid & Medicare Systems (CMS) definition of medical necessity.

This program offer accounts for the reserve account that makes up the fund. It includes the accumulated fund balance and is otherwise described as beginning working capital (BWC). The Mental Health Organization (MHO) is responsible for maintaining a reserve account so that in the event of unforeseeable circumstances those needs could be addressed.

**Program Description**

The state requires the MHO to have a minimum reserve of \$250,000. Given the mental health responsibilities in our county and the number of Verity - Oregon Health Plan (OHP) members Multnomah County is responsible for, it would not be prudent to maintain the reserve at this minimum level. Best practice would support the need to maintain a minimum reserve account balance of \$5 million dollars that could support a system of Multnomah County's size. This would cover any reasonable but unexpected cost increases within our system.

Nationally, there has been a trend that has been referred to as "Pay For Performance" (P4P) - providing incentive payments for organizations to make improvements within their service delivery system. Multnomah County initiated a P4P incentive program in 2009 for a number of issues but has found that organizations take anywhere from several months to a year or more before they begin to realize the full benefit of the incentives and make significant changes. All of the P4P incentives have been directed at the OHP population (Medicaid members only) and therefore eventually will be funded through our reserves.

As the Behavioral Health Fund reserves have increased each year for the past two years, it presents an opportunity for us to make changes and improve our system. At the same time, we will be compensating our mental health providers for the modifications that make within their organizations, including the use of pay for performance incentives.

Current plans for using the reserve funds and managing the fund to maintain a prudent balance include the following within the next 12-16 months: 1) an adult integrated health care model for individuals presenting severe and persistent mental health issues; 2) development of an evidence-based practice set of intensive case management services for adults; 3) a nationally recognized approach for our adult providers to measure service outcomes across the system; 4) a child welfare mental health pilot; and 5) peer operated services.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	N/A	0	0	0	0
Outcome	N/A	0	0	0	0

**Performance Measure - Description**

**Legal/Contractual Obligation**

Oregon Revised Statutes Chapter 294 and County Financial Assistance 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>	2011	2011	2012	2012
Unappropriated & Contingency	\$0	\$14,972,699	\$0	\$15,618,202
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$14,972,699</b>	<b>\$0</b>	<b>\$15,618,202</b>
<b>Program Total:</b>	<b>\$14,972,699</b>		<b>\$15,618,202</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$14,972,699	\$0	\$15,618,202
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$14,972,699</b>	<b>\$0</b>	<b>\$15,618,202</b>

**Explanation of Revenues**

\$15,540,500 - Beginning Working Capital  
 \$77,702 - Interest Earned

**Significant Program Changes**

Last year this program was: #25101, Mental Health Beginning Working Capital

**Lead Agency:** Overall County

**Program Contact:** Mike Jaspin

**Program Offer Type:** Revenue/Fund

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer budgets a number of 'fund level' transactions. These include cash transfers between funds, fund contingencies, and reserves.

**Program Description**

This offer includes the following cash transfers:

- General Fund to Library Fund - \$14,445,810
- General Fund to Facilities Fund - \$380,000
- General Fund to Revenue Bond Sinking Fund - \$1,500,000
- General Fund to Capital Lease Retirement Fund - \$836,000
- General Fund to Capital Improvement Fund - \$2,621,059
- General Fund to Asset Preservation Fund - \$227,175
- General Fund to Information Technology Fund - \$1,000,000
- Road Fund to Bridge Fund - \$5,597,305
- Road Fund to Bike Path Fund - \$73,000

The offer accounts for the General Fund Contingency, which is established at \$1,950,000. The General Fund Contingency also contains \$5,529,675 for the ramp down of state programs, \$1,490,000 for radio replacement and emergency communications, \$600,000 for the SCAAP grant (if received), \$4,882,500 for a BIT reserve, and \$1,808,420 for various Board earmarks (see Budget Director's message for more information).

The offer accounts for the 10% General Fund revenue reserve as described in the Financial and Budget Policies. The Library Fund contingency (\$6,014,594) and the Risk Fund Contingency (\$1,765,000) and unappropriated balance (\$25,000,000) are recorded here too.

Reserve and contingency accounts reflect prudent financial management of county resources. The reserve has been established at 10% - a level that Moody's Investor Services uses as benchmark. The goal in developing the reserve policy was to shield the county from fluctuations in revenues available to fund ongoing programs. The policy articulates the conditions under which reserves will be used and outlines a process for replenishing them should they fall below the goal. The General Fund contingency cannot be accessed unless the BCC takes affirmative action to transfer it. Conditions under which the contingency can be used are limited, in most cases, to one-time-only expenditures.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	% of Reserve Goal Met	100.0%	100.0%	100.0%	100.0%
Outcome	Moody's Bond Rating	0	0	1	0
Output	Transfers from Contingency	7	8	8	10

**Performance Measure - Description**

The level of reserves in one indicator of the County's financial position. Transfers from the General Fund contingency should be limited to events that could not be foreseen when the annual budget was prepared. With few exceptions, all transfers from the contingency should follow the Board's adopted Financial & Budget policies.

Change in bond rating: (0) = no change, (1) = upgraded rating, (-1) = downgraded rating

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2011	2011	2012	2012
Cash Transfer	\$19,863,244	\$5,829,000	\$21,010,044	\$5,670,305
Unappropriated & Contingency	\$37,118,081	\$39,455,493	\$47,722,743	\$35,465,987
<b>Total GF/non-GF:</b>	<b>\$56,981,325</b>	<b>\$45,284,493</b>	<b>\$68,732,787</b>	<b>\$41,136,292</b>
<b>Program Total:</b>	<b>\$102,265,818</b>		<b>\$109,869,079</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$5,668,000	\$0	\$5,670,305
Other / Miscellaneous	\$0	\$39,693,043	\$0	\$35,465,987
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$45,361,043</b>	<b>\$0</b>	<b>\$41,136,292</b>

**Explanation of Revenues**

**Significant Program Changes**

Last year this program was: #95000, Fund Level Transactions



**Lead Agency:** Overall County

**Program Contact:** Mike Jaspin

**Program Offer Type:** Revenue/Fund

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer budgets the countywide, or 'corporate', revenues that make up the General Fund. The General Fund is the primary source of discretionary revenue that supports County programs across all departments and service areas.

**Program Description**

In FY 2012, General Fund resources are estimated to total about \$412.1 million, which includes \$51.3 million of beginning working capital. The revenues budgeted in this program offer represent approximately 90.0% of the total General Fund. The primary ongoing revenue sources are Property Tax, Business Income (BIT), Motor Vehicle Rental Tax (MVRT), and state shared revenues. The remaining General Fund revenues are budgeted within departmental program offers.

Accurate revenue forecasting is crucial to the development of long range financial plans. It is the goal of the Budget Office to produce revenue estimates that fall within a range of (+/-) 2% of actual collections. The assumptions used to develop revenue forecasts should be clearly articulated to, and understood by, all decision makers in the budget process. The County's Financial & Budget Policies outline the forecast process.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output		0	0	0	0
Outcome		0	0	0	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>	2011	2011	2012	2012
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$0</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$5,448,173	\$0	\$6,813,270	\$0
Intergovernmental	\$7,907,479	\$0	\$9,786,707	\$0
Taxes	\$289,744,603	\$0	\$301,299,021	\$0
Other / Miscellaneous	\$50,230,997	\$0	\$53,005,853	\$0
<b>Total Revenue:</b>	<b>\$353,331,252</b>	<b>\$0</b>	<b>\$370,904,851</b>	<b>\$0</b>

## Explanation of Revenues

There are a handful of revenues that make up the bulk of the General Fund. These include (in order of size) – Property Tax, BIT, Motor Vehicle Rental Tax, and Video Lottery proceeds, and other state shared revenues. The Property Tax is the single largest revenue in the General Fund at approximately two-thirds of ongoing revenue. It is governed by state statute and its' growth is limited by two constitutional measures which have been approved by the Oregon electorate. An explanation of the limitations imposed by Measure 5 and Measures 47/50 can be found in the Appendix section of the budget documents.

A more complete discussion of the forecast assumptions can be found on the Budget Office website.

## Significant Program Changes

Last year this program was: #95001, General Fund Revenues