# Budget for FY 2010

The DCHS adopted budget for FY 2010 is \$193.4 million or \$5.7 million more than the FY 2009 adopted budget. The adopted staffing level of 697.72 FTE is 3.67 FTE higher than the FY 2009 budget.

The General Fund supports \$45.5 million and is \$1.4 million less than the FY 2009 adopted. The General Fund decrease is due largely to the following reductions:

- Elimination of Touchstone School Based Case Management (program 25146A) \$1,009,529 and 6.47 FTE.
- Elimination of At Risk Girls Programming (program 25153) \$61,409.
- Wage freeze and cost of living adjustments for Local 88 and management employees \$619,526.

Non-General Fund appropriations are \$147.8 million, \$7.1 million higher than the FY 2009 adopted. Most of the increase is in Energy Services (program 25119). This program increased nearly \$9.0 million from 2009 with \$4.4 million awarded from the American Recovery and Reinvestment Act (ARRA). Additionally, \$1.4 million ARRA funds were award for Anti-Poverty Services (program 25139).

The adopted budget includes the following new programs:

- 25061 Bridgeview Building Redevelopment one-time-only funds in partnership with the Housing Authority of Portland to redevelop the University Place Apartments to become home to Bridgeview, the county's only transitional housing program for persons with serious mental illness.
- 25095 Oregon Partnership Community Response to Minor in Possession engage youth to create media messages with the purpose of influencing community attitudes and norms to reduce underage drinking.
- 25114A Bridges to Housing services are transitioning from the initial pilot project supported with one-time-only funds to on-going case management to 40 high resource using homeless families.
- 25115A Homeless Benefits Recovery Pilot Project assists 120 chronically homeless individuals with mental illness, addictions and disabilities in accessing federal benefits which they are entitled but have been unable to receive because their disabilities prevent them from navigating the system.
- 25134 Family Warming Center establishes ongoing services for homeless families with children during the winter months (November March).

Budget Trends		FY 2009	FY 2009	FY 2010	
	FY 2008 Actual	Current Estimate	Adopted Budget	Adopted Budget	Difference
Staffing FTE	631.75	676.55	694.05	697.72	3.67
Personal Services	\$50,289,095	\$55,282,329	\$58,580,309	\$59,958,471	\$1,378,162
Contractual Services	119,174,049	115,878,594	115,331,711	118,360,569	3,028,858
Materials & Supplies	13,490,406	12,787,734	13,766,386	15,085,600	1,319,214
Capital Outlay	<u>0</u>	<u>80,000</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>Total Costs</b>	\$182,953,550	\$184,028,657	\$187,678,406	\$193,404,640	\$5,726,234

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# Department of County Human Services FY 2010 Summary by Program Offer

		FY 2010		Total	
		<b>General Fund</b>	Other	Program	Tota
Prog #	Name	Adopted	Funds	Cost	FTE
<u>Operatir</u>	ng Programs				
25012	Developmental Disability Services for Adults	\$952,897	\$13,914,348	\$14,867,245	57.00
25013	Developmental Disability Services for Children	363,387	5,198,953	5,562,340	35.50
25014	Abuse Investigations and Eligibility for Individuals with DD	1,600,489	992,117	2,592,606	18.20
25015	Coordinating, Monitoring & Business Unit	0	3,682,178	3,682,178	10.25
25020A	ADS Access & Early Intervention Services	2,703,914	5,115,869	7,819,783	16.90
25021	ADS Emergency Basic Needs for Vulnerable Adults	871,039	0	871,039	1.50
25022	ADS Adult Care Home Program	73,325	1,736,181	1,809,506	12.50
25023A	ADS Long Term Care	1,945,481	22,774,463	24,719,944	215.10
25024	ADS Adult Protective Services	1,044,505	4,158,175	5,202,680	37.60
25026	ADS Public Guardian/Conservator	1,295,553	0	1,295,553	9.90
25030	Elders in Action Personal Advocacy and Commission Activities	175,540	0	175,540	0.00
25040	Domestic Violence Victims Services and Coordination	1,825,825	1,656,873	3,482,698	6.77
25050B	MHASD Administration Scaled Offer	0	95,389	95,389	1.00
25050C	MHASD Administration Scale C	173,278	0	173,278	2.00
25055A	Mental Health Crisis Services - Base	1,213,594	4,170,781	5,384,375	20.56
25055B	Mental Health Crisis Services-Scaled CGF	103,611	0	103,611	0.00
25055D	Mental Health Crisis Services - SGF Restoration Assumption	0	655,277	655,277	0.00
25057	Inpatient & Residential MH Services for Children	0	2,261,646	2,261,646	0.00
25058A	MH Commitment Services	1,636,454	2,982,125	4,618,579	21.30
25058D	MH Commitment Services - SGF Restoration Assumption	0	879,708	879,708	5.00
25060A	MH Residential Services	1,209,205	2,852,766	4,061,971	6.50
25060C	MH Residential Services SGF Restoration Assumption	0	197,196	197,196	0.00
25061	Bridgeview Building Redevelopment	250,000	0	250,000	0.00
25062	Mental Health Services for Adults	0	19,658,192	19,658,192	0.00
25063A	MH Treatment & Medication for Uninsured/Indigent	1,959,819	0	1,959,819	0.00

# Department of County Human Services (cont.) FY 2010 Summary by Program Offer

		FY 2010		Total	
		<b>General Fund</b>	Other	Program	Total
Prog #	Name	Adopted	Funds	Cost	FTE
	ng Programs (cont.)				
25063B	MH Treatment & Medication for Uninsured Indigent (Scale Up)	500,000	0	500,000	0.00
25064A	Early Assessment and Support Alliance	0	608,857	608,857	6.20
25066	Mental Health Organization Provider Tax (Verity)	0	2,414,825	2,414,825	0.00
25067	Community Based MH Services for Children & Families	1,960,155	13,861,059	15,821,214	24.25
25075	School Based Mental Health	371,451	1,253,468	1,624,919	12.54
25078A	Culturally Specific Mental Health Services	1,614,392	0	1,614,392	0.00
25080A	Adult Addictions Treatment Continuum	3,269,653	2,607,168	5,876,821	0.00
25080C	Adult Addictions Treatment - SGF	0	2,170,082	2,170,082	1.00
25085	Addiction Services Gambling Treatment and Prevention	0	899,274	899,274	0.00
25086	Addiction Services Alcohol and Drug Prevention	0	335,791	335,791	0.00
25088A	Coordinated Diversion for Persons with Mental Illness	319,726	655,310	975,036	8.00
25090	Addictions Detoxification and Post- Detoxification Housing	873,285	1,975,624	2,848,909	0.00
25091	Sobering	468,812	0	468,812	0.00
25094A	Family and Youth Addictions Treatment Continuum	352,816	537,443	890,259	0.00
25094C	Family and Youth Addictions Treatment Continuum Scale-C	127,373	0	127,373	0.00
259095	Oregon Partnership Community Response to Minor in Possession (MIP)	100,000	0	100,000	0.00
25096	Sexual Offense and Abuse Prevention	127,428	275,810	403,238	0.00
25098A	Enhanced Family Involvement Team	0	1,008,494	1,008,494	0.60
25114A	Bridges to Housing	234,820	0	234,820	0.00
25115A	Homeless Benefits Recovery Pilot Project	399,000	0	399,000	0.00
25119	Energy Services	564,477	19,705,356	20,269,833	20.46
25123	Youth Gang Prevention	1,252,588	64,000	1,316,588	1.00
25127	Court Care	34,595	26,496	61,091	0.00
25133	Housing Stabilization for Vulnerable Populations	1,332,757	662,056	1,994,813	3.00
25134	Family Warming Center	183,925	0	183,925	0.00
25136	Homeless Youth System	2,597,556	1,100,928	3,698,484	0.83
25137	Native American Child Development	46,578	0	46,578	0.00

# Department of County Human Services (cont.) FY 2010 Summary by Program Offer

		FY 2010		Total	
		<b>General Fund</b>	Other	Program	Total
Prog #	Name	Adopted	Funds	Cost	FTE
<b>Operati</b>	ng Programs (cont.)				
25138	Runaway Youth Services	896,151	189,476	1,085,627	0.17
25139	Anti-Poverty Services	720,180	3,843,337	4,563,517	1.00
25140	Housing	165,188	712,922	878,110	1.54
25145A	SUN Community Schools	3,459,926	529,475	3,989,401	1.50
25145B	SUN Community Schools - Scale	93,000	0	93,000	0.00
25149	Social & Support Services for Educational	2,308,840	332,351	2,641,191	1.00
25151	Parent Child Development Services	1,308,739	165,090	1,473,829	1.00
25154	Alcohol, Tobacco & Other Drug Services	240,845	0	240,845	0.00
25155	Services for Sexual Minority Youth	126,670	0	126,670	0.00
25156A	Bienestar Social Services	480,385	0	480,385	3.30
25156B	Bienestar Mental Health Services	275,254	0	275,254	2.80
n/a	Wage Freeze and COLA Adjustments	<u>(619,526)</u>	<u>(1,097,244)</u>	<u>(1,716,770)</u>	<u>0.00</u>
	<b>Total Operating Programs</b>	\$45,584,955	\$147,819,685	\$193,404,640	567.77

(see next page for administration and support programs)

# Department of County Human Services (cont.) FY 2010 Summary by Program Offer

Administrative & Support Programs provide supervision or support to some or all of the operating programs above. Their costs are "spread" to the operating programs and are factored into the costs above. Note that FTE were not "spread" to get the total FTE.

		FY 2010		Total	
		<b>General Fund</b>	Other	Program	Total
Prog #	Name	Adopted	Funds	Cost	FTE
<u>Adminis</u>	tration & Support Programs				
25000	DCHS Director's Office	\$553,744	\$262,079	\$815,823	3.00
25001	DCHS Human Resources	205,814	498,312	704,126	5.50
25002	DCHS Business Services	1,602,814	1,407,723	3,010,537	20.85
25003	DCHS Contracts	724,279	264,807	989,086	10.00
25010	Developmental Disabilities Administration &	611,030	2,526,066	3,137,096	23.30
	Support				
25027	ADS Administration	143,450	952,802	1,096,252	5.80
25050A	MHASD Administration	862,807	1,873,039	2,735,846	17.50
25052	Medical Records for Mental Health &	697,756	0	697,756	8.00
	Addiction Services				
25053A	MH Quality Management & Protective	665,544	1,040,794	1,706,338	14.00
	Services				
25054	MHASD Business and Finance	430,256	1,084,640	1,514,896	9.00
25118	Community Services Division Administration	662,833	0	662,833	5.50
25143	SUN Service System Administration	988,857	0	988,857	7.50
	Total Admin/Support Programs				129.95

# Department of County Human Services FY 2010 Summary of One-Time-Only Funds

This supplemental table contains a list of program offers partially or completely funded one-time-only resources.

		FY 2010		OTO Only	% OTO
		<b>General Fund</b>	Other	General	General
Prog #	Name	Adopted	Funds	Funds	Funds
25061	Bridgeview Building Redevelopment	\$250,000	\$0	\$250,000	100.0%
	Total One-Time-Only Funds	\$250,000	<b>\$0</b>	\$250,000	100.0%



#### Program # 25000 - DCHS Director's Office

**Priority:** 

Accountability Administration

Program Offer Type: 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.

# **Program Justification**

The DCHS Director's Office supports the county's Accountability Priority - "I want my government to be accountable at every level" - by providing responsible leadership, sound financial management, and results that are in line with the county's stated priorities. 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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
•	Number of formal communications about department policy to employees <sup>1</sup>	40	45	45	45
	Advisors agree/strongly agree w/statement: Overall, D.O. does its job well <sup>2</sup>	0.0%	75.0%	0.0%	0.0%
Output	Legislative contacts <sup>3</sup>	10	10	20	10

#### **Performance Measure - Description**

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

<sup>2</sup> This outcome is measured by a survey of advisory group members in alternating years. The next survey will be conducted Fall of 2009.

<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.

# Version 6/22/2009 s

Lead Agency: Program Contact: County Human Services Joanne Fuller

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$264,788	\$165,298	\$233,151	\$229,450
Contracts	\$146,772	\$0	\$266,574	\$0
Materials & Supplies	\$12,206	\$9,570	\$17,096	\$17,808
Internal Services	\$14,472	\$10,701	\$36,923	\$14,821
Subtotal: Direct Exps:	\$438,238	\$185,569	\$553,744	\$262,079
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$438,238	\$185,569	\$553,744	\$262,079
Program Total:	\$623,807		\$815	5,823
Program FTE	1.86	1.14	1.50	1.50
Program Revenues				
Indirect for dep't Admin	\$1,046	\$0	\$0	\$0
Fees, Permits & Charges	\$776,317	\$0	\$732,262	\$0
Intergovernmental	\$0	\$185,569	\$0	\$262,079
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$777,363	\$185,569	\$732,262	\$262,079

# **Explanation of Revenues**

OHP Premium - \$144,874 Title XIX - \$102,535 State Mental Health Grant Local Admin - \$14,670 County General Fund - \$548,141

# Significant Program Changes

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



#### Program # 25001 - DCHS Human Resources

**Priority:** 

Accountability Support

Program Offer Type:

Related Programs:

**Program Characteristics:** 

# **Executive Summary**

DCHS Human Resources support over 670 regular and 20 temporary employees located throughout the County. HR services include recruiting, hiring and retaining staff; workforce and succession planning; new employee orientation and training; employee/labor relations; records management; management and employee training; employment law and labor contract compliance; and performance management consultation.

#### **Program Description**

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

#### **Program Justification**

DCHS Human Resources operates within the Accountability Priority, aligned with Strategy 1, which focuses on "creating and communicating a clear vision and direction for county government, removing barriers to employment, information and participation; and to hold the county accountable to achieve results both at the program level and at the employee level. HR also is directly tied to Strategy 2, "managing resources and service delivery costs effectively and to recruit, train and retain an (effective) workforce".

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of recruitments conducted	45	60	61	50
	Increased management satisfaction with HR consultation and services	50.0%	60.0%	45.0%	70.0%

**Performance Measure - Description** 

# Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Joanne Fuller

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$290,932	\$340,605	\$188,963	\$428,898
Contracts	\$6,853	\$30,897	\$3,774	\$0
Materials & Supplies	\$0	\$12,886	\$0	\$14,320
Internal Services	\$12,143	\$74,067	\$13,077	\$55,094
Subtotal: Direct Exps:	\$309,928	\$458,455	\$205,814	\$498,312
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$309,928	\$458,455	\$205,814	\$498,312
Program Total:	\$768	3,383	\$704	l,126
Program FTE	2.77	3.23	1.64	3.86
Program Revenues				
Indirect for dep't Admin	\$5,528	\$0	\$0	\$0
Intergovernmental	\$0	\$458,455	\$0	\$498,312
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$5,528	\$458,455	\$0	\$498,312

#### **Explanation of Revenues**

OHP Premium - \$102,488 Title XIX - \$364,005 Local Admin - \$31,819 County General Fund - \$205,814

#### Significant Program Changes

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

This FY10 Program Offer reflects the reduction of .50 FTE Human Resources Analyst Senior position. This reduction was necessary to be made in order to meet the County General Fund constraint target and will result in a delay in responding to HR issues.



#### Program # 25002 - DCHS Business Services

Priority:

Accountability Support

Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

The Department of County Human Services (DCHS) Business Services provides administrative 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; and research and evaluation. Business Services serves as liaison between the department and internal service providers such as County Finance, Budget and Evaluation, Facilities Managment, and Information Technology. DCHS Research and Evaluation conducts divisional and departmentwide studies, analyzes data, writes and presents reports, consults with and trains department staff.

#### **Program Description**

Business Services supports the work of the department by providing: budget development, management and reporting; accounts payable and receivable; grant accounting and reporting for approximately 150 funding sources; and implementation of, and compliance with, all county, state and federal fiscal policies and procedures related to the business of this department. Business Services personnel provide administrative and support services for the department; work with the Department of County Management in coordinating the provision of information technology, facilities management and FREDS; function as liaison to the DCHS Citizen Budget Advisory Committee; and represents the department on several Countywide workgroups and committees.

#### **Program Justification**

DCHS Business Services supports the county's Accountability priority – "I want my government to be accountable at every level" – by providing responsible leadership; sound budgetary and financial management; managing assets and service delivery costs effectively; and delivering results that are consistent with the department's and county's stated priorities. Research and evaluation insures that appropriate and objective assessment is conducted at all levels of the department.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Percent of invoices paid in 30 days or less	85.0%	95.0%	82.0%	85.0%
Outcome	Percent of DCHS managers reporting R&E services are very good or excellent <sup>1</sup>	80.0%	95.0%	0.0%	0.0%
Quality	Percent of grant financial reports submitted to the grantor error free	97.0%	98.0%	98.0%	98.0%

#### **Performance Measure - Description**

<sup>1</sup> This outcome is measured by a survey of managers in alternating years. The next survey will be conducted Fall of 2010.

Version 4/08/2009 s

Lead Agency: Program Contact: County Human Services Kathy Tinkle

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$829,408	\$961,731	\$734,390	\$1,036,452
Contracts	\$649,039	\$30,000	\$658,111	\$18,842
Materials & Supplies	\$0	\$64,111	\$20,162	\$26,069
Internal Services	\$26,418	\$394,538	\$190,151	\$326,360
Subtotal: Direct Exps:	\$1,504,865	\$1,450,380	\$1,602,814	\$1,407,723
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$1,504,865	\$1,450,380	\$1,602,814	\$1,407,723
Program Total:	\$2,95	5,245	\$3,01	0,537
Program FTE	10.37	11.73	8.81	12.04
Program Revenues				
Indirect for dep't Admin	\$12,482	\$0	\$0	\$0
Intergovernmental	\$0	\$1,450,380	\$0	\$1,377,503
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$12,482	\$1,450,380	\$0	\$1,377,503

#### Explanation of Revenues

OHP Premium - \$274,591 Title XIX - \$648,524 State Mental Health Grant Local Admin - \$454,388 County General Fund Match - \$643,897 County General Fund Subsidy - \$958,917

#### Significant Program Changes

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

Reflects the elimination of 1.60 FTE (1.0 FTE Finance Specialist 2 position and .60FTE Finance Specialist 1) in FY10. This reduction was necessary to balance to CGF constraint. This will likely result in a decreased ability to provide financial analysis and longer processing times routine finance transactions.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



#### Program # 25003 - DCHS Contracts

**Priority:** 

Accountability : Support

Program Offer Type:

Related Programs:

**Program Characteristics:** 

# **Executive Summary**

DCHS Contracts Unit coordinates and provides all procurement and contracting functions for the department for more than 400 contracts. The unit serves as liaison between the department and county Central Procurement and Contract Administration. Nearly 65% of the total funds in the department are contracted to community based providers for services to the vulnerable populations served by DCHS.

#### **Program Description**

DCHS Contracts Unit provides procurement and contracting support for more than 400 contracts 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. The program ensures implementation and compliance of county contracting and procurement policies and procedures. In FY10, the Contracts Unit will take a lead role in the implementation of the January 2009 Contract Action Team Report.

#### **Program Justification**

The Contracts Unit supports the county's Accountability priority – "I want my government to be accountable at every level" – by insuring compliance with county and grant-required fiscal policies and procedures, accurate and timely reporting, and efficient and effective contracting of human and professional services.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of executed contracts and amendments	0	0	400	400
Outcome	Percent of annual contract renewals executed prior to July 1st.	0.0%	0.0%	51.0%	70.0%

**Performance Measure - Description** 

Measure Changed

Although these measures existed in prior years a tracking system did not exist to accurately track and measure until FY09.

#### Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Kathy Tinkle

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$683,375	\$186,950	\$660,644	\$232,120
Contracts	\$10,000	\$0	\$3,700	\$1,300
Materials & Supplies	\$10,706	\$10,931	\$6,564	\$7,982
Internal Services	\$57,290	\$4,164	\$53,371	\$23,405
Subtotal: Direct Exps:	\$761,371	\$202,045	\$724,279	\$264,807
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$761,371	\$202,045	\$724,279	\$264,807
Program Total:	\$963	3,416	\$989,086	
Program FTE	8.80	2.20	7.41	2.59
Program Revenues				
Intergovernmental	\$0	\$202,045	\$0	\$264,807
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$202,045	\$0	\$264,807

# Explanation of Revenues

OHP Premium - \$230,150 Local Admin - \$34,657 County General Fund - \$724,279

# Significant Program Changes

Last year this program was: #25003, DCHS Contracts

Reflects the elimination of 1.0 FTE Office Assistant Senior position in FY10 necessary to meet the CGF constraint. With the movement to electronic contract files this reduction should not impact the work of this unit.



## Program # 25010 - Developmental Disabilities Administration & Support

**Priority:** 

Accountability Program Offer Type: Administration

**Related Programs:** 

**Program Characteristics:** 

# **Executive Summary**

Administration provides oversight of the Developmental Disabilities Services Division. This ensures 4.038 clients are provided case management, community and contracted services. This program monitors guality assurance through records management and guality assurance activities such as file reviews and staff training. In addition, this program administers a five-county crisis diversion program, comprising Multhomah, Washington, Clackamas, Clatsop and Columbia counties.

#### **Program Description**

Developmental Disabilites administration oversees all programs and partners, seeks resolution on complaints and grievances; influences state policy; maximizes resources by leveraging local funds and collaborating with other counties; develops the workforce; and seeks to continuously improve service delivery. Crisis services may be short or long term, and include crisis placement, nursing care, respite, behavior consultation and other stabilizing supports.

## **Program Justification**

Administration supports the accountability key factors of leadership, resource management and results. Outreach is extended to diverse and underrepresented populations. The division leverages federal match for administrative services using county funds in order to provide more fully all the administrative tracking and oversight required by the state. Clients in crisis are stabilized through the five-county crisis placement program described above.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of client records audited annually <sup>1</sup>	2,172	3,700	3,120	3,700
Outcome	% of total audited client files reviewed and corrected	65.0%	80.0%	84.0%	88.0%

#### **Performance Measure - Description**

<sup>1</sup> Client files are reviewed monthly. Not all files of open clients are reviewed.

Version 4/08/2009 s

Lead Agency: **Program Contact:**  **County Human Services** Patrice Botsford

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$13,358	\$2,104,080	\$20,520	\$2,146,628
Contracts	\$531,366	\$57,001	\$573,584	\$55,001
Materials & Supplies	\$302	\$236,892	\$2,172	\$46,285
Internal Services	\$5,003	\$483,095	\$14,754	\$278,152
Subtotal: Direct Exps:	\$550,029	\$2,881,068	\$611,030	\$2,526,066
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$550,029	\$2,881,068	\$611,030	\$2,526,066
Program Total:	\$3,43	1,097	\$3,137,096	
Program FTE	0.13	23.67	0.19	23.11
Program Revenues				
Indirect for dep't Admin	\$8,376	\$0	\$0	\$0
Fees, Permits & Charges	\$0	\$51	\$0	\$1
Intergovernmental	\$0	\$2,362,446	\$0	\$2,420,357
Other / Miscellaneous	\$0	\$518,571	\$0	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$8,376	\$2,881,068	\$0	\$2,420,358

#### **Explanation of Revenues**

State Mental Health Grant Local Admin - \$1,970,267 State Mental Health Grant Case Management - \$362,609 State Mental Health Grant Quality Assurance - \$87,481 County General Fund Match- \$540,998 County General Fund Subsidy - \$70,032

#### Significant Program Changes

Last year this program was: #25010, DD Administration & Support

Crisis Diversion Services were moved from program offer #25015 to this program offer. This change was made due to restructuring of the division. Last year, Crisis Diversion services was it's own offer (#25015). That offer has been revised and now addresses other programs within the Coordinating, Monitoring and Business Unit of Developmental Disabilities. 9 staff moved to this offer from #25015. Multnomah County Developmental Disabilities funds 9 staff out of the total Region 1 committee and is the fiscal intermediary for other four counties who participate in the region. Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



#### Program # 25012 - Developmental Disability Services for Adults

**Priority:** 

Basic Needs

Existing Operating

#### Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

This program assists approximately 2,300 adults to manage the limiting aspects of their developmental disabilities. The program provides case management, community contracted services and assistance that promotes safe and healthy living in order to increase the customer's capacity to participate more independently in the community.

#### **Program Description**

Services for adults with developmental disabilities are person-centered and link clients with services and resources in their neighborhoods, assist clients in applying for financial or housing benefits, and monitor compliance with Medicaid rules by Brokerage Services. Monitoring customer health and safety is our primary responsibility. Assisting customers to involve family, friends and community partners into their lives encourages an enriched quality of life while also developing skills, confidence and independence.

# **Program Justification**

Services for adults exists to help adults with developmental disabilities in the areas of self-care, behavior and linkages to places and people in the community. The program partners with state and local organizations that have mutual interest in any of our clients, such as Community Justice, Mental Health, and Dept. of Voc Rehabilatation. Vocational supports lead to greater personal independence and self-worth. Program interventions avert crises, monitor customers and provider health and safety concerns, and assist the cusomter to live more independently. Through monitoring of program services instances of abuse are more likely to be detected and investigated.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of adults served	2,285	2,300	2,300	2,300
Outcome	Increased monitoring reports for res. sites	9,582	5,500	9,600	9,600

#### **Performance Measure - Description**

Monitoring visits at residential sites is a measure of assuring health and safety by assuring provider compliance with Oregon Administrative Rules.

#### Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Patrice Botsford

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$231,902	\$3,404,655	\$89,745	\$4,675,070
Contracts	\$381,845	\$24	\$413,008	\$23
Materials & Supplies	\$35,415	\$6,126,494	\$35,173	\$6,811,580
Internal Services	\$75,240	\$470,017	\$11,524	\$677,896
Subtotal: Direct Exps:	\$724,402	\$10,001,190	\$549,450	\$12,164,569
Administration	\$165,567	\$1,530,794	\$227,679	\$1,441,447
Program Support	\$126,902	\$283,842	\$175,768	\$308,332
Subtotal: Other Exps:	\$292,469	\$1,814,636	\$403,447	\$1,749,779
Total GF/non-GF:	\$1,016,871	\$11,815,826	\$952,897	\$13,914,348
Program Total:	\$12,83	32,697	\$14,867,245	
Program FTE	3.00	42.00	1.00	56.00
Program Revenues				
Intergovernmental	\$0	\$10,001,190	\$0	\$12,164,569
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$10,001,190	\$0	\$12,164,569

#### **Explanation of Revenues**

State Mental Health Grant Local Admin - \$2,180,324 State Mental Health Grant various services - \$6,689,915 State Mental Health Grant Case Management - \$3,294,330 County General Fund Match - \$391,536 County General Fund Subsidy - \$157,914

# Significant Program Changes

Last year this program was: #25012, DD Services for Adults w/Developmental Disabilities Moved Service dollars from this program offer to #25015 (Coordinating, Monitoring and Business Unit), \$5,632,602.00



#### Program # 25013 - Developmental Disability Services for Children

**Priority:** 

Basic Needs

Existing Operating

#### Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

This program will assist over 1,800 children (birth to 21) with developmental disabilities and often multiple disabilities requiring significant care. Case management links children and their families with over 10,000 referrals to sources of help in the community with a goal of limiting the need for crisis intervention and out-of-home placement.

#### **Program Description**

Services for children is child-centered and family-focused, providing assistance required to maintain in-home placement. Funding for services to children is only 2% of all service funds, including those managed here and paid through the state. Child-centered planning helps to identify the customer's interests, focuses on strengths, promotes independence and selfworth, and maps out family, friends and community members as potential resource people. As a child approaches 18 (or 21 if the child is still in school), planning is done to transition the customer to adult services. The state funds services for children at a lower rate than DD services for adults. Therefore the continued support of County General Funds is extremely necessary. Children represent 76% of the total numbers of customers deemed eligible for DD services in the past fiscal year. Growth in services to children reflects the increased number of DD children served through Oregon.

#### **Program Justification**

The program partners with State and local ogrganizations that have mutual interest in any of our clients, such as school districts, Department of Child Welfare, Community Justice, Mental Health and various family support groups. This partnership strengthens families and helps to reduce the higher costs of out-of-home crisis placements. These services allow seriously disabled children to stay out of instituions and to remain in their family homes.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of children served	1,614	1,800	1,725	1,825
Outcome	# of resource referrals to families <sup>1</sup>	27,471	5,500	28,000	25,000

#### **Performance Measure - Description**

<sup>1</sup> Referrals for resources assist families to reduce the risk for out-of-home placements due to crisis. Information provided in resource referrals includes housing, respite care, special needs items, etc.

#### Version 4/08/2009 s

Lead Agency: Program Contact: County Human Services Patrice Botsford

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$2,143,476	\$147,662	\$2,656,864
Contracts	\$34,863	\$0	\$34,140	\$0
Materials & Supplies	\$0	\$1,234,239	\$4,346	\$1,420,219
Internal Services	\$0	\$335,008	\$23,094	\$367,638
Subtotal: Direct Exps:	\$34,863	\$3,712,723	\$209,242	\$4,444,721
Administration	\$10,385	\$665,220	\$86,989	\$645,026
Program Support	\$7,960	\$123,346	\$67,156	\$109,206
Subtotal: Other Exps:	\$18,345	\$788,566	\$154,145	\$754,232
Total GF/non-GF:	\$53,208	\$4,501,289	\$363,387	\$5,198,953
Program Total:	\$4,55	4,497	\$5,562,340	
Program FTE	0.00	28.00	2.00	33.50
Program Revenues				
Intergovernmental	\$0	\$3,712,723	\$0	\$4,298,479
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$3,712,723	\$0	\$4,298,479

#### Explanation of Revenues

State Mental Health Grant Local Admin - \$175,106 State Mental Health Grant Case Management - \$2,771,605 State Mental Health Grant Family Support Services - \$1,351,768 County General Fund - \$209,242

#### Significant Program Changes

Last year this program was: #25013, DD Services for Children w/Developmental Disabilities Moved funding for Family Support Services into the budget for Coordinating, Monitoring and Business Unit program offer #25015.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



#### Program # 25014 - Abuse Investigations and Eligibility for Individuals with DD

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

Lead Agency: Program Contact: County Human Services Patrice Botsford

Version 3/02/2009 s

**Related Programs:** 

**Program Characteristics:** 

# **Executive Summary**

Eligibility is the entryway to Developmental Disabilities services and introduces potential clients to county services. There are an average of 53 intakes per month, with a total of approximately 600 per year. The Abuse Investigation Team reviews and screens all serious incident reports submitted to the county, makes determinations of those that meet Oregon's definition of abuse or neglect and investigates those incidents that meet the definition standard. The team maintains ongoing relationships with local, state and federal law enforcement and the Psychiatric Security Review Board.

#### **Program Description**

Intake ensures that eligible clients can access all services. Once eligible, Intake moves the client into the appropriate Developmental Disabilities programs. Per state rule, eligibility must be redetermined for children at ages 7 and 17; the unit averages 52 redeterminations per month.

The Abuse Investigation Team screened 3,471 serious incident reports in FY 07-08 and is projected to screen nearly 4,000 in FY 08-09. These screenings determine whether county action is needed to protect a client's health and safety. Per the state, abuse investigators no longer have duties outside of abuse investigation. This unit investigates allegations of abuse, neglect or exploitation of adults now or previously enrolled in Multnomah County Developmental Disabilities. For these clients, division staff in other programs obtain crisis services for immediate protection, stabilization and prevention of further abuse.

#### **Program Justification**

Eligibility/Intake is the single point of access to services for persons with developmental disabilities. It exists to identify and direct customers to appropriate county services and programs. Abuse Investigations exists in order to protect the vulnerable customers served by Developmental Disabilities. The program relates to the Basic Needs priority by ensuring health and safety for customers case managed by the division.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of protective services investigations <sup>1</sup>	264	325	330	330
Outcome	% of protective services investigations completed within 45 day timeline <sup>2</sup>	80.0%	85.0%	85.0%	85.0%
Output	# of intake eligibility referrals	611	650	625	625

#### **Performance Measure - Description**

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

<sup>2</sup> OAR requires investigations and reports to be concluded within 45 days. This is not always possible due to law enforcement involvement and difficulty obtaining documentation or interviewing witnesses.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$1,061,721	\$20,312	\$767,917	\$743,752
Contracts	\$20,000	\$0	\$20,000	\$0
Materials & Supplies	\$23,052	\$0	\$19,992	\$19,557
Internal Services	\$153,699	\$0	\$114,949	\$104,045
Subtotal: Direct Exps:	\$1,258,472	\$20,312	\$922,858	\$867,354
Administration	\$374,863	\$3,639	\$382,410	\$102,778
Program Support	\$287,321	\$675	\$295,221	\$21,985
Subtotal: Other Exps:	\$662,184	\$4,314	\$677,631	\$124,763
Total GF/non-GF:	\$1,920,656	\$24,626	\$1,600,489	\$992,117
Program Total:	\$1,94	5,282	\$2,592,606	
Program FTE	12.77	0.23	8.98	9.22
Program Revenues				
Intergovernmental	\$0	\$20,312	\$0	\$867,354
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$20,312	\$0	\$867,354

#### Explanation of Revenues

State Mental Health Grant Local Admin - \$846,522 State Mental Health Grant - \$20,832 County General Fund - \$922,858

# Significant Program Changes

Last year this program was: #25014A, DD Eligibility & Protective Svs for Individuals w/DD

Major change occured during the FY 09. CMS mandates required the change in classification of the investigation staff from Case Manager Senior to DCHS Investigators.

Additional staff(one investigator) added to this offer in order to meet increased number of investigations and insure state timelines are met.



#### Program # 25015 - Coordinating, Monitoring & Business Unit Program

**Priority:** 

Basic Needs

Program Offer Type: Program Alternative /

#### **Related Programs:**

**Program Characteristics:** 

## **Executive Summary**

The Coordinating, Monitoring & Business Unit provides comprehensive and in-home support services to more than 1,414 adults and children with developmental disabilities. The unit is responsible for arranging placements and facility support services, monitoring services provided by contracted agencies and/or families, and accessing and tracking funding associated with the services and supports. These services are accessed when the client is at risk for civil commitment, out of home placement and/or health and safety.

The Coordinating, Monitoring & Business Unit maintains and manages the division's personnel and operation budget.

#### **Program Description**

To access comprehensive and support services the client must meet State criteria; meaning being at imminent risk for out of home placement or life threatening health or safety situations. These services may be short or long term in nature. Short-term supports include accessing a crisis bed, behavior consultation, nursing support, respite and other supports needed to stabilize the client. Long-term supports can include residential placement, supported living, in-home supports and employment/alternative to employment. The unit is responsible for making appropriate placements or coordinating services, developing budgets, accessing funding and monitoring services provided as required by the Oregon Administrative Rules. There are now approximately 581 adults and children in foster care, 459 adults in 24 hour group homes, 153 adults in supported living, 770 adults over 21 in vocational services, 45 adults and 176 children with in home services.

#### **Program Justification**

These programs are supporting clients when they are least able to provide for their own health and safety needs. This may include housing, meals and medical supports. This program protects customers from deteriorating health, injurious behaviors, and inability of caregivers to maintain their family member at home. Comprehensive services benefit the individual by stabilizing the home or removing the person from an unhealthy or unsafe circumstance and ensuring community safety. This service benefits customers by providing supports over and above those included in their current plan of care.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of program monitoring visits performed by unit <sup>1</sup>	0	0	355	400
Outcome	% of sites monitored that met program standards on 1st visit <sup>2</sup>	0.0%	0.0%	68.0%	73.0%

#### **Performance Measure - Description**

<sup>1</sup>The Coordinating, Monitoring and Business Unit is responsible for programmatic monitoring and the goal is to visit each site once a year.

<sup>2</sup>The monitoring is of contracted agencies and sites that provide adult 24-hour group homes, adult supported living, adult vocational/alternative services, and child and adult foster care homes to ensure compliance to the Oregon Administrative Rules, county contract and Multnomah County Adult Care Home Rules.

Version 4/08/2009 s

Lead Agency: Program Contact: County Human Services Patrice Botsford

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$726,360	\$0	\$911,133
Contracts	\$0	\$398,493	\$0	\$433,881
Materials & Supplies	\$0	\$1,140,969	\$0	\$1,653,825
Internal Services	\$0	\$172,808	\$0	\$220,291
Subtotal: Direct Exps:	\$0	\$2,438,630	\$0	\$3,219,130
Administration	\$50,212	\$698,087	\$0	\$381,453
Program Support	\$38,486	\$129,440	\$0	\$81,595
Subtotal: Other Exps:	\$88,698	\$827,527	\$0	\$463,048
Total GF/non-GF:	\$88,698	\$3,266,157	\$0	\$3,682,178
Program Total:	\$3,35	4,855	\$3,682,178	
Program FTE	0.00	8.75	0.00	10.25
Program Revenues				
Indirect for dep't Admin	\$21,932	\$0	\$37,315	\$0
Fees, Permits & Charges	\$0	\$9,700	\$0	\$7,000
Intergovernmental	\$0	\$2,428,930	\$0	\$2,932,130
Other / Miscellaneous	\$0	\$0	\$0	\$280,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$21,932	\$2,438,630	\$37,315	\$3,219,130

#### **Explanation of Revenues**

Housing Authority of Portland (HAP) - \$14,126 Misc Charges and Recoveries - \$7,000 State Mental Health Grant - \$2,918,004 State Mental Health Grant - BWC \$280,000

#### Significant Program Changes

**Last year this program was:** #25015, DD Crisis Svs for Individuals w/DD Crisis services were moved from this program offer to Developmental Disabilities Administrative and Support (#25010).

A monitoring unit was created during this fiscal year to improve review of our contracted providers. Funds from #25012 and #25013 were moved to this program offer, because they are administered by staff in this unit.



#### Program # 25020A - ADS Access & Early Intervention Services

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

#### **Related Programs:**

**Program Characteristics:** 

# **Executive Summary**

Aging and Disability Services Access and Early Intervention Services are the first point of contact for the county's 160,000 elderly, people with disabilities and veterans. Annually, more than 76,000 callers receive information and assistance and more than 9,600 people receive a variety of in-home, community and emergency services that support independence and prevent institutionalization. These services are provided through the 24/7 Helpline and 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 Multhomah County. ADS 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 goal is to help people stay active, independent and healthy, preventing or delaying nursing home admission. Evidence-based practices ensure effective outcomes. Helpline and District Senior Center employees and volunteers counsel the elderly, people with disabilities and their families on county and community resources, public benefits, long-term care services and emergency/safety net services. There has been a significant increase in first-time callers with urgent needs related to the poor economy. After business hours, the 24-Hour Access Program assists 5,400 seniors and people with disabilities with emergent needs. Emergency housing supports are provided to 580 individuals, to prevent homelessness. Nine non-profit District Senior Centers provide health, wellness, social and recreational opportunities. Federal, state, county and city funds are combined to provide case management to 2,800 individuals, in-home care to 900 people, 787,000 congregate and home delivered meals, transportation for 900 people, and other specialized supports. Staff help 5,500 low-income disabled veterans and their families access Veterans Administration benefits. Family caregivers and grandparents caring for grandchildren receive respite, counseling and support to prevent burnout. The Network of Care Website provides on-line access to 1,500 resources, and an emergency response registry. Utilization of the Network of Care website has increased 36% this past year, averaging almost 14,000 hits per month. The Gatekeeper Program trains private businesses and government agencies to identify and report those at risk of abuse or neglect.

#### **Program Justification**

This program offer links to the 10-Year Plan to End Homelessness and the "Policy Framework for Cultural Competency" by providing targeted outreach and addressing gaps for underserved and vulnerable populations. It links to the Basic Living Needs Priority strategies through evidence-based and innovative programs, and by helping seniors and people with disabilities meet these needs through case management, crisis and early intervention, information and referral, emergency support, affordable nutritious food, permanent and livable housing, and physical care. These services keep people in their home as long as possible and protect them from becoming victims of abuse or neglect.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Helpline and District Senior Center Assistance calls	77,372	74,000	76,586	76,000
Outcome	Callers rated Helpline good, very good or excellent <sup>1</sup>	0.0%	95.0%	87.0%	0.0%
Outcome	Clients stable/reduced nutritional risk after 6 months of intervention	82.0%	80.0%	81.0%	81.0%
Outcome	Housing retention rate at 6 months after services	82.0%	88.0%	82.0%	83.0%

# Performance Measure - Description

#### Measure Changed

<sup>1</sup>Survey conducted every two years. T-test revealed no significant difference between years. "Operator Satisfaction" increased between years; satisfaction with services decreased. Measure changed to reflect favorable rating as "good," "very good" or "excellent".

Measure dropped: "Average monthly cost per client" Previous actual: \$26.55; Current Year Purchase: \$42; Current Year Estimate: \$27.

## Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

#### Legal/Contractual Obligation

ADS, as State designated Area Agency on Aging and Disability for Multnomah County, is mandated under the most recent revision of the Older American's 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	2009	2009	2010	2010
Personnel	\$339,906	\$948,291	\$433,864	\$1,030,853
Contracts	\$1,133,193	\$3,046,303	\$1,165,499	\$3,006,543
Materials & Supplies	\$331,934	\$270,202	\$399,870	\$264,747
Internal Services	\$349,014	\$534,586	\$437,423	\$493,793
Subtotal: Direct Exps:	\$2,154,047	\$4,799,382	\$2,436,656	\$4,795,936
Administration	\$68,368	\$181,727	\$77,238	\$163,278
Program Support	\$139,841	\$178,176	\$190,020	\$156,655
Subtotal: Other Exps:	\$208,209	\$359,903	\$267,258	\$319,933
Total GF/non-GF:	\$2,362,256	\$5,159,285	\$2,703,914	\$5,115,869
Program Total:	\$7,52	1,541	\$7,819,783	
Program FTE	4.34	12.06	4.85	12.05
Program Revenues				
Indirect for dep't Admin	\$14,289	\$0	\$0	\$0
Fees, Permits & Charges	\$0	\$177,065	\$0	\$182,369
Intergovernmental	\$0	\$4,621,817	\$0	\$4,613,567
Other / Miscellaneous	\$0	\$500	\$0	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$14,289	\$4,799,382	\$0	\$4,795,936

#### **Explanation of Revenues**

Older Americans Act federal funds - \$2,606,544 Oregon Project Independence (OPI) - \$416,309 Oregon Department of Veterans Affairs - \$119,561 City of Portland Wtr & Sewer - \$582,598; City of Troutdale - \$3,000 City of Fairview - \$1,850; Various Small Grants - \$262,220; Title XIX - \$803,854 County General Fund Match - \$44,222; County General Fund Subsidy - \$2,392,434

#### **Significant Program Changes**

Significantly Changed

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

State OPI funds are reduced by 40%. See Scale B for request to back-fill State OPI revenue reductions. A portion, 25% or \$276,613, of Program Offer 25021 funding is added to this Program Offer to maintain emergency housing assistance and retain a portion of transportation and home-delivered meal services for vulnerable seniors and people with disabilities. Remainder of Program Offer 25021 ADS Emergency Basic Needs for Vulnerable Adults is out of target. This Program Offer increases FTE by .5: a reduction of .10 Program Development Specialist and transfer of .6 Fiscal Specialist 1 from department business services to ADS.



#### Program # 25021 - ADS Emergency Basic Needs for Vulnerable Adults

**Basic Needs** 

25020A

Existing Operating

Priority:

Program Offer Type:

**Related Programs:** 

Program Characteristics:

#### Executive Summary

The Emergency Basic Needs program and Multnomah Project Independence (MPI) purchase medications, case management, in-home and support services, home delivered meals and transportation for 1,224 vulnerable elderly and disabled residents. This program provides a safety net that fills gaps in federal and state programs for persons who are very low-income, uninsured or underinsured. Multnomah Project Independence and other low-cost, short-term, intensive interventions shields these individuals from institutionalization and poor health.

#### **Program Description**

Aging and Disability Services Emergency Basic Needs program helps vulnerable elderly and people with disabilities in four ways. 1) Emergency prescription assistance for 263 individuals: Covers out of pocket medication costs associated with the Medicare Part D program including co-pays, deductibles and uncovered "donut hole" expenses that may total up to \$4,350 per year for individuals who would be at high medical risk if unable to purchase medications. 2) Care Coordination for 195 people with disabilities: Multnomah Project Independence (MPI) case managers authorize personal care, in-home services, shopping, transportation to medical appointments and other critical services for physically disabled residents not eligible for Medicaid or Oregon Project Independence. 3) Special Needs for 190 individuals: Pays for uncovered wheelchair repairs, durable medical equipment and supplies, dentures and other supports in emergencies. 4) Support services: Pays for home delivered meals, transportation for medical appointments and grocery shopping, and essential supports. Served more than 785 people with transportation services. The program provides easy access to information, assistance and services by coordinating a broad range of community partners including culturally specific providers doing outreach in minority communities.

#### **Program Justification**

This offer links to the Basic Living Needs Priority strategy by serving the most vulnerable low-income seniors and people with disabilities. The program serves those who do not have access to medications, health care, food, or transportation because of restricted state and federal services. This program coordinates access to care and addresses chronic urgent care needs. Without this help, many will go without necessities, eventually needing more costly county services. This program prevents premature institutionalization by providing wraparound services that support good health and independence for seniors and people with disabilities living in community settings.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Clients receiving one or more: medications, special needs, MPI services <sup>1</sup>	513	600	550	550
Outcome	Multnomah Project Independence/Medicaid cost ratio per case <sup>2</sup> (lower is better)	0.0%	0.0%	13.0%	13.0%
Output		0	0	0	0

#### **Performance Measure - Description**

# Measure Changed

<sup>1</sup> This output does not include clients receiving transportation services as these can't be unduplicated.

<sup>2</sup> New measure. Ratio = cost to maintain an individual on MPI as a percent of the cost of Medicaid Long Term Care cost per case. Lower percent indicates more efficient performance.

Clients receiving housing assistance and 6-month housing retention rate moved to program offer 25020A.

Version 4/08/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

	Proposed General	Proposed Other	Proposed General	Proposed Other
	Fund	Funds	Fund	Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$105,874	\$0	\$114,140	\$0
Contracts	\$480,017	\$0	\$435,145	\$0
Materials & Supplies	\$384,495	\$0	\$312,670	\$0
Internal Services	\$10,901	\$0	\$9,084	\$0
Subtotal: Direct Exps:	\$981,287	\$0	\$871,039	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$981,287	\$0	\$871,039	\$0
Program Total:	\$981	,287	\$871	1,039
Program FTE	1.50	0.00	1.50	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

#### **Explanation of Revenues**

County General Fund (MVRT) - \$871,039

# **Significant Program Changes**

Last year this program was: #25021, ADS Emergency Basic Needs for Vulnerable Adults

This program is targeted for reduction or elimination for FY10 and represents 75% of FY09 services levels for emergency basic needs for vulnerable adults including: Multnomah Project Independence case management, in-home services, transportation and home-delivered meals; Emergency Prescriptions and Special Medical Needs.

A portion, 25% or \$276,613, of this Program Offer is added to Program Offer 20520A ADS Access & Early Intervention Services to maintain emergency housing assistance and retain a portion of transportation and home-delivered meal services to vulnerable seniors and people with disabilities.

This program offer reduces FTE by 1.0 Case Manager 2 position and 0.5 Office Assistant Senior position.

Significantly Changed



#### Program # 25022 - ADS Adult Care Home Program

**Priority:** 

Basic Needs Existing Operating

Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

The Adult Care Home Program (ACHP) licenses more than 585 adult care homes in Multhomah County. The ACHP trains, monitors and when necessary sanctions providers. The homes (providing 24 hour supervision and care) are licensed under state law and sounty ordinance. The homes serve approximately 2,591 vulnerable elderly and disabled individuals and provide a homelike alternative to the more expensive nursing home setting.

#### **Program Description**

The Adult Care Home Program is charged with licensing more than 585 adult care homes and ensuring that vulnerable residents are cared for in a homelike atmosphere which is friendly, safe and secure. All program providers are expected to follow the Multnomah County Administrative Rules (MCAR's). Each individual living in an adult care home is to be treated respectfully and receive quality care. The ACHP program staff monitors and inspects each home at least once a year to ensure that residents receive necessary care, including personal care, nutrition, physical safety, nursing care and medication management. Program monitors also observe interactions in the home ensuring residents are provided with social and recreational activities. When problems are found, this program takes corrective action. Frequent monitoring reduces the risk of abuse and neglect in these homes.

The ACHP program staff provides technical assistance to providers and enforces verbal/written sanctions or fines when there are serious deficits. All homes are licensed annually.

#### **Program Justification**

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

Offers Affordable Long Term Care: Adult Care Homes provide quality long-term care options for frail elderly and people with disabilities desiring to live in the community. Without this option, many frail and elderly individuals would be placed in a more costly nursing home with an average statewide cost of approximately \$6,000 per month. By contrast, the average statewide monthly Medicaid cost in an adult care home is \$1,491, saving taxpayers thousands of dollars every year. Finally, without these homes the quality of life would be diminished for both Medicaid and private pay residents.

Provides Access to Care: Adult Foster Homes provide assistance with medication management and with activities of daily living such as: dressing, bathing and personal hygiene, meal preparation, assistance with eating, daily housekeeping and laundry. All care services provided by Adult Foster Homes are monitored by the Adult Care Home Program to ensure appropriateness and safety.

Supports Economic Development: Adult Care Homes are small businesses. The industry generates approximately \$23 million yearly in Multnomah County and employs about 1,500 people.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of Adult Care Homes licensed and inspected yearly	565	565	585	590
Outcome	Adult Care Homes found in compliance with MCAR's	90.0%	92.0%	91.2%	90.0%
Quality	Residents satisfied or very satisfied with services <sup>1</sup>	0.0%	90.0%	89.0%	0.0%
Efficiency	Adult Care Home/Nursing Home cost efficiency ratio <sup>2</sup>	22.3%	22.3%	24.1%	24.1%

#### **Performance Measure - Description**

<sup>1</sup>Collected by survey conducted every two years by Portland State University. Resident satisfaction increased from 84% in FY 06-07 to 89% in FY 08-09 year.

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

#### Version 2/12/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

#### **Legal/Contractual Obligation**

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

#### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2009	2009	2010	2010	
Personnel	\$19,177	\$1,016,507	\$21,420	\$1,049,521	
Contracts	\$29,970	\$365,780	\$40,714	\$346,612	
Materials & Supplies	\$691	\$33,849	\$715	\$35,623	
Internal Services	\$2,831	\$183,644	\$3,279	\$195,849	
Subtotal: Direct Exps:	\$52,669	\$1,599,780	\$66,128	\$1,627,605	
Administration	\$1,795	\$53,449	\$2,080	\$55,412	
Program Support	\$3,672	\$52,404	\$5,117	\$53,164	
Subtotal: Other Exps:	\$5,467	\$105,853	\$7,197	\$108,576	
Total GF/non-GF:	\$58,136	\$1,705,633	\$73,325	\$1,736,181	
Program Total:	\$1,76	3,769	\$1,80	51,809,506	
Program FTE	0.24	12.76	0.25	12.25	
Program Revenues					
Indirect for dep't Admin	\$20,449	\$0	\$0	\$0	
Fees, Permits & Charges	\$0	\$296,000	\$0	\$296,000	
Intergovernmental	\$0	\$1,226,943	\$0	\$1,331,605	
Program Revenue for Admin	\$0	\$0	\$0	\$0	
Total Revenue:	\$20,449	\$1,522,943	\$0	\$1,627,605	

#### **Explanation of Revenues**

Title XIX - \$1,331,605 ACHP License Fees - \$234,000 ACHP Conference Fees - \$10,000 ACHP - Misc Fees - \$7,000 ACHP Fines - \$45,000 County General Fund Match - \$39,681 County General Fund Subsidy - \$26,447

#### Significant Program Changes

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

Program Offer reflects the Governor's Recommended Budget reductions to Medicaid. Because of state Medicaid funding reductions, the Adult Care Home Program will lose .5 Program Development Technician position.



#### Program # 25023A - ADS Long Term Care

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

Related Programs:

**Program Characteristics:** 

# **Executive Summary**

Aging and Disability Services Long Term Care program determines eligibility for financial, nutritional, medical and case management services for 31,900 low-income seniors and persons with disabilities. Case-managed clients meet state criteria for nursing home care. Case managers help over 4,600 clients with living and service options that promote and maintain their independence outside of a nursing home.

#### **Program Description**

Under contract with the state, the Long Term Care program (LTC) determines eligibility and enrolls seniors and people with disabilities in programs to meet basic health, financial and nutritional needs, by such means as the Oregon Health Plan, Medicaid and 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 needs. These vulnerable adults typically have incomes below the poverty level and include individuals with a mental illness or a developmental disability.

More intensive case management is provided to 6,241 seniors and people with disabilities 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. 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. Oregon is one of only five states nationally that has more than 50% of its nursing home eligible population living in the community (Multnomah County is 80%).

Case managers assess clients' needs, create care plans, and authorize, coordinate and monitor services. 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. They support caregivers and provide wellness counseling/education and disease management for clients to optimize health. Collaboration with other professionals, divisions and community agencies is an essential aspect of this program.

# **Program Justification**

This program provides essential services for vulnerable seniors and people with disabilities who cannot meet basic needs without this help. Case managers link clients with federal, state, and community resources to address critical unmet needs, serving a vital role in helping long term care clients live independently at home and delay or avoid more costly nursing home care. They work in partnership with clients to develop service plans that address health and welfare risks in the least restrictive environment. Case managers provide access to a full continuum of professional and supportive services designed to address the needs of culturally diverse clients. The growth both in numbers and diversity of the aging population, particularly those 85+ who are at most risk of needing long term care services, will continue to increase the demand and importance of services offered through this program.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Avg monthly # of nursing home eligible clients receiving long term care asst. <sup>1</sup>	5,869	5,700	6,241	4,623
Outcome	Ratio of nursing home eligible clients served in the community vs. nursing home	77.7%	80.0%	80.0%	81.0%

#### **Performance Measure - Description**

<sup>1</sup> The reduction in this year's offer reflects the reduction in the Governor's Recommended Budget. These clients are te subset that are eligible for long term care supports.

# Version 4/08/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

# Legal/Contractual Obligation

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

# **Revenue/Expense** Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$16,308,275	\$0	\$17,024,373
Contracts	\$1,610,372	\$124,909	\$1,754,524	\$128,244
Materials & Supplies	\$0	\$382,827	\$0	\$312,512
Internal Services	\$0	\$4,110,167	\$0	\$3,929,612
Subtotal: Direct Exps:	\$1,610,372	\$20,926,178	\$1,754,524	\$21,394,741
Administration	\$54,895	\$737,117	\$55,187	\$704,142
Program Support	\$112,282	\$722,714	\$135,770	\$675,580
Subtotal: Other Exps:	\$167,177	\$1,459,831	\$190,957	\$1,379,722
Total GF/non-GF:	\$1,777,549	\$22,386,009	\$1,945,481	\$22,774,463
Program Total:	\$24,10	63,558	\$24,719,944	
Program FTE	0.00	216.10	0.00	215.10
Program Revenues				
Indirect for dep't Admin	\$348,851	\$0	\$2,642	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$19,743
Intergovernmental	\$0	\$20,823,339	\$0	\$20,711,284
Other / Miscellaneous	\$0	\$179,676	\$0	\$97,525
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$348,851	\$21,003,015	\$2,642	\$20,828,552

# **Explanation of Revenues**

Title XIX - \$20,711,284 County General Fund Match - \$1,754,524 (Match rate of 48% local to 52% federal). Contractor Rentals - \$19,743 Providence Medical Ctr - \$126,145 OHSU CM Grant - \$97,525

Significant Program Changes

Last year this program was: #25023, ADS Long Term Care Program Offer reflects the Governor's Recommended Budget reductions to Medicaid. Long Term Care program will reduce staffing by 4 FTE: 2 Community Health Nurse and 1.5 Office Assistant 2 positions.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



#### Program # 25024 - ADS Adult Protective Services

**Priority:** 

Basic Needs Existing Operating

Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

Adult Protective Services (APS) is responsible for protecting 160,000 seniors and people with disabilities from abuse, financial exploitation, and neglect and self-neglect. Clients are stabilized by an array of case management services. Protective Services workers prevent further harm and link adults who are extremely vulnerable to vital health and human services. This program conducts abuse investigations and educates the community about abuse prevention.

#### **Program Description**

The primary goal of this program is to protect vulnerable elderly and persons with disabilities from abuse, neglect, selfneglect, and financial exploitation. Protective Services workers investigate abuse and rule violations in 135 care facilities and 585 adult care home programs. APS responded to 8,390 abuse calls in FY08. 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 1,532 consults and 1,200 mental health encounters or assessments for people who are senior or disabled with mental health needs. The core team membership consists of a Protective Services investigator, social worker, community health nurse, case manager, mental health specialist, and public guardian. DA and law enforcement participate on a monthly basis or as needed. Other professionals, clients, care givers 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. 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. 80% of clients were successfully linked to ongoing mental health services and 94% showed improvement after MDT intervention.

# **Program Justification**

This offer provides protection, crisis intervention and service coordination to move seniors and persons with disabilities from crisis to stability by ensuring care for these vulnerable populations, providing shelter, access to food, medical care and protection from perpetrators. APS, through its MDT, advocates and assists clients with mental, developmental or physical disabilities to enroll for services with appropriate agencies. The 'over age 85' cohort is the fastest growing population in Multnomah County, an age after which the risk of abuse, exploitation and self neglect increases significantly. Additionally, the MDT assists clients who are in self-neglect situations, which comprises the highest number of all abuse cases. The MDT program is effective in promoting healthy behaviors, reducing emergency room visits, and reducing risk for eviction. It is estimated that only 15% of elder abuse is reported and this program provides education and training to the community on reporting abuse. APS empowers people to avoid or escape victimization and violence by instituting restraining orders against perpetrators, prosecuting offenders and relocating clients to a safe place. The re-abuse rate of clients is 3.9% compared to state bench mark of 5%.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Protective Services investigations completed <sup>1</sup>	3,075	3,600	3,046	3,200
Outcome	Reabuse rate for elderly & people with disabilities	4.0%	4.0%	3.9%	4.0%
	Clients with improved living situation after 90 days of MDT intervention	95.0%	94.0%	94.0%	95.0%

#### **Performance Measure - Description**

<sup>1</sup>Number of investigations impacted by staff vacancy rate (retirements, resignations, medical leave).

# Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

#### **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 411-020-0000 through 411-020-0130.

# **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$327,372	\$3,125,199	\$316,445	\$3,215,372
Contracts	\$497,380	\$126,451	\$534,802	\$127,451
Materials & Supplies	\$7,344	\$69,103	\$5,040	\$50,032
Internal Services	\$38,888	\$506,769	\$38,986	\$499,189
Subtotal: Direct Exps:	\$870,984	\$3,827,522	\$895,273	\$3,892,044
Administration	\$52,680	\$136,605	\$44,369	\$137,753
Program Support	\$112,749	\$130,258	\$104,863	\$128,378
Subtotal: Other Exps:	\$165,429	\$266,863	\$149,232	\$266,131
Total GF/non-GF:	\$1,036,413	\$4,094,385	\$1,044,505	\$4,158,175
Program Total:	\$5,13	0,798	\$5,20	2,680
Program FTE	3.23	35.77	3.12	34.48
Program Revenues				
Indirect for dep't Admin	\$61,701	\$0	\$0	\$0
Intergovernmental	\$0	\$3,827,522	\$0	\$3,892,044
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$61,701	\$3,827,522	\$0	\$3,892,044

#### Explanation of Revenues

Title XIX - \$ 3,766,593 - Federal Medicaid funds are generated by a match expenditure of local non-federal funds, mostly County General Fund, at a current match rate of 48% local to 52% federal.

Older/Disabled MHS - \$125,451 County General Fund Match - \$345,970 County General Fund Subsidy - \$549,303 (MHASD \$188,832; ADSD \$360,471)

#### **Significant Program Changes**

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

Program Offer reflects the Governor's Recommended Budget reductions to Medicaid. Because of State Medicaid funding reductions, the Adult Protective Services Program will reduce staffing by 1.4 FTE: reduction of .4 Community Health Nurse position and 1.0 Program Coordinator position.



#### Program # 25026 - ADS Public Guardian/Conservator

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

**Related Programs:** 

**Program Characteristics:** 

# **Executive Summary**

The Public Guardian, under court authority, makes life decisions for 158 extremely mentally incapable impoverished adults who are current or recent victims of physical, sexual and financial abuse. Legal authority enables intervention when no other approach resolves abuse, and ensures access to housing, food, and medical care. Without this option, clients experience continuing hunger, homelessness, abuse and likely premature death. In addition, the program diverts at least 200 clients into less costly services and/or to family or private guardianships.

### **Program Description**

New ADS Public Guardian/Conservator clients all have at least two of the following: treatment-resistant mental illness, IQ below 70, Alzheimer's/dementia, brain injury, very complex medical problems, no income source or no housing. Program staff work with adult protective services and law enforcement to educate professionals and families and to intervene early to resolve fraud and abuse of extremely vulnerable adults, diverting 200+ cases annually to other services and to family or private guardianships. Staff works with the County Attorney and Probate Court to obtain guardianship for selected cases when no other resource exists to resolve the issue. Satisfaction with the service has been consistently high, with comments that the program needs more client capacity, particularly for mentally ill clients.

Public Guardian staff makes basic life decisions for 158 court-appointed clients, directing plans to resolve violence and victimization, address chronic and urgent basic care needs, obtain an income source and basic care, and move clients towards stability. Program staff use court authority to create and oversee extremely complex care plans designed to maintain clients in the least restrictive setting, avoid relapse, and prevent repeated crisis-related costs.

# **Program Justification**

For less than 1% of substantiated adult abuse cases, involuntary, court-authorized decision-making is the only way to resolve complex abuse/exploitation without continued use of County resources, including hospital bed holds, involuntary commitment and protective services. Department systems and staff divert most guardianship requests to less costly options. Service requests are heavily screened to assure all other options have been considered, focusing public funds on the citizens at highest risk without other resources.

After initial client stabilization, public guardian staff work with existing systems and resources to obtain/oversee permanent housing, income, medical care and medications. This legally mandated supervision prevents relapse into homelessness, unnecessary psychiatric or medical hospital use, and inappropriate use of jails. This offer links to County Basic Needs strategies to provide intervention and coordination to meet basic needs, ensure care for vulnerable community members and obtain permanent food and housing.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Referrals appropriately diverted to less costly resources <sup>1</sup>	201	200	200	200
Outcome	Urgent client needs addressed within five days after court appointment <sup>2</sup>	92.0%	90.0%	90.0%	90.0%

#### **Performance Measure - Description**

<sup>1</sup>Successful diversions are cost-effective across multiple county services.

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

# Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

#### **Legal/Contractual Obligation**

The decision to provide the service is in county ordinance. Under ORS, 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	2009	2009	2010	2010
Personnel	\$880,230	\$0	\$938,970	\$0
Contracts	\$92,000	\$0	\$87,000	\$0
Materials & Supplies	\$25,217	\$0	\$16,706	\$0
Internal Services	\$125,411	\$0	\$125,714	\$0
Subtotal: Direct Exps:	\$1,122,858	\$0	\$1,168,390	\$0
Administration	\$38,276	\$0	\$36,750	\$0
Program Support	\$78,291	\$0	\$90,413	\$0
Subtotal: Other Exps:	\$116,567	\$0	\$127,163	\$0
Total GF/non-GF:	\$1,239,425	\$0	\$1,295,553	\$0
Program Total:	\$1,23	9,425	\$1,29	5,553
Program FTE	9.90	0.00	9.90	0.00
Program Revenues				
Fees, Permits & Charges	\$120,000	\$0	\$130,000	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$120,000	\$0	\$130,000	\$0

# **Explanation of Revenues**

County General Fund Subsidy - \$1,038,390 Public Guardian Fee Revenue - \$130,000 Fee collections are small because clients are Medicaid eligible. The Public Guardian program may have a claim on any client funds that remain after death.

# Significant Program Changes

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



#### Program # 25027 - ADS Administration

**Priority:** 

Accountability Administration

Program Offer Type: Related Programs:

**Program Characteristics:** 

### Executive Summary

Aging and Disability Services (ADS) is responsible for assuring that more than 160,000 seniors and persons with disabilities have access to a comprehensive and coordinated service delivery system so that they remain independent and out of institutions. This program 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**

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

ADS Administration provides fiscal oversight for the Division and is responsible for managing a complex budget with multiple funding sources and requirements. ADS Administration maximizes resources by matching federal Medicaid funds and leveraging additional resources from the community through its partnerships.

Satisfaction surveys and customer input are used to continually improve ADS services. ADS 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.

### **Program Justification**

ADS Administration is closely aligned with the county's accountability strategies. ADS Administration is responsible for educating and informing the public about ADS services and performance, and involving advisors in program planning and decision making. ADS Administration is responsible for providing leadership that strengthens workforce competencies, advances quality improvement and evidence-based practices, and ensures culturally responsive services. ADS Administration budget and programs to maximize revenue, hold down costs and deliver services more effectively. ADS coordinates within the county and with other levels of government agencies to remove barriers and assure easy access to a seamless service system.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	ADS sponsored opportunities for consumer education and/or input <sup>1</sup>	83	88	82	82
Outcome	Advisors agree/strongly agree w/the statement: Overall, ADS does its job well <sup>2</sup>	80.0%	80.0%	82.0%	82.0%

### **Performance Measure - Description**

<sup>1</sup>Estimate for FY10 represents a minimum expectation based on standing advisory committee meetings and planned events. <sup>2</sup>Based on an annual survey of advisory group members.

### Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Mary Shortall

45 CFR Part 92; 2 CRF 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	
Program Expenses	2009	2009	2010	2010	
Personnel	\$53,826	\$621,139	\$59,748	\$604,118	
Contracts	\$88,483	\$146,033	\$62,998	\$113,915	
Materials & Supplies	\$10,631	\$149,622	\$12,106	\$124,791	
Internal Services	\$7,735	\$122,673	\$8,598	\$109,978	
Subtotal: Direct Exps:	\$160,675	\$1,039,467	\$143,450	\$952,802	
Administration	\$0	\$0	\$0	\$0	
Program Support	\$0	\$0	\$0	\$0	
Subtotal: Other Exps:	\$0	\$0	\$0	\$0	
Total GF/non-GF:	\$160,675	\$1,039,467	\$143,450	\$952,802	
Program Total:	\$1,20	0,142	\$1,09	\$1,096,252	
Program FTE	0.53	6.27	0.52	5.28	
Program Revenues					
Indirect for dep't Admin	\$16,387	\$0	\$0	\$0	
Intergovernmental	\$0	\$1,038,967	\$0	\$949,802	
Other / Miscellaneous	\$0	\$500	\$0	\$3,000	
Program Revenue for Admin	\$0	\$0	\$0	\$0	
Total Revenue:	\$16,387	\$1,039,467	\$0	\$952,802	

### **Explanation of Revenues**

State DHS allocation funds approximately 79% of ADS services. Medicaid funds are restricted for direct or related services for recipients of Medicaid program. OAA funds provided for residents age 60+. DHS approves and funds annual plan for ADS, which must comply with state and federal rules.

Older Americans Act Title IIIB - \$57,699 Title XIX - \$892,103 Medicaid funds generated by a match expenditure of local non-federal funds, mostly County General Fund (CGF) at current match rate of 48% local to 52% federal. Special Risk Fund - \$3,000 County General Fund Match - \$49,077 County General Fund Subsidy - \$94,373

Significant Program Changes

Last year this program was: #25027, ADS Administration

ADS budget reflects impact of Governor's Recommended 2009-2011 Budget on Medicaid, OAA, OPI and other state funds. Because of State Medicaid funding reductions, ADS Administration is eliminating 1 FTE: Program Coordindator (Training) position.

### Significantly Changed



### Program # 25030 - Elders in Action Personal Advocacy and Commission Activities

**Priority:** 

**Program Offer Type:** 

Related Programs:

d Programs: 25027

**Basic Needs** 

Existing Operating

Lead Agency: Program Contact: County Human Services Mary Shortall

Version 3/25/2009 s

**Program Characteristics:** 

### **Executive Summary**

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

### **Program Description**

Elders in Action Commission serves as the federally mandated advisory council to Aging and Disability Services. The Commission members provide input and advocacy to ADS, Multnomah County Board of County Commissioners, the Portland City Council, and others on a wide range of issues that impact seniors, including housing, transportation, elder abuse and crime, healthcare and other important services. Commission members advocate at the state level for senior programs. Trained senior volunteers evaluate county-operated facilities to make sure they are accessible for seniors and persons with disabilities. They also evaluate the customer service provided by county staff and lend technical assistance to county managers on how to make their programs accessible and friendly to seniors.

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

Finally, members of the Elders in Action Speakers Bureau present information to community groups on a variety of topics affecting seniors, ranging from health care to how to protect oneself from fraud and identity theft.

### **Program Justification**

Elders in Action (EIA) advises local government on issues, programs, and policy that impact seniors in Multnomah County. Elders in Action (EIA) advocates on behalf of 92,000 local seniors including the 85+ age group, which is the fastest growing segment of Multnomah County's population. Last year, about 150 Elders in Action volunteers provided 11,105 service hours as advisors to local government, personal advocates for at-risk seniors and as community educators. Using service results of local and national studies and the tools of nationally recognized Elder Friendly® Certification program, Elders in Action program ensures that services and businesses in Multnomah County are appropriate and accessible to serve the rapidly aging population.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
	Hours of service provided by volunteers	10,178	13,000	10,000	10,500
Outcome	Value of volunteer hours (\$) <sup>1</sup>	176,385	225,290	173,300	181,965

### **Performance Measure - Description**

<sup>1</sup>Hourly rate calculation drawn from Independent Sector, a national organization for volunteerism. The \$17.33 hourly rate used here is tailored specifically for the state of Oregon for 2007.

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	2009	2009	2010	2010
Contracts	\$158,000	\$0	\$158,000	\$0
Subtotal: Direct Exps:	\$158,000	\$0	\$158,000	\$0
Administration	\$0	\$0	\$5,069	\$0
Program Support	\$0	\$0	\$12,471	\$0
Subtotal: Other Exps:	\$0	\$0	\$17,540	\$0
Total GF/non-GF:	\$158,000	\$0	\$175,540	\$0
Program Total:	\$158	3,000	\$175,540	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

### Explanation of Revenues

County General Fund - \$158,000

Significant Program Changes

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



### Program # 25040 - Domestic Violence Victims Services and Coordination

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

### **Related Programs:**

**Program Characteristics:** 

### **Executive Summary**

Domestic Violence (DV) Victim Services & Coordination provides in-person services for 5,600 victims and children, management of grant-funded projects and coordination of multi-jurisdiction government and community responses. Research shows that these core services reduce re-assault of victims, and thus help to reduce violent crime in the county.

### **Program Description**

The county expends \$11 million in criminal justice costs (jail, prosecution and probation supervision) annually, and DV costs the community another \$10 million in lost wages, health care and other costs.

Services funded in this offer include: centralized access and crisis response (24,600 calls); safe emergency shelter or motel vouchers (990 women and children); civil legal advocacy insuring safety after separation (2,800 victims); mobile advocacy and rent assistance (650 women and children); and culturally specific services for Latinas, Russians, African Americans, Native Americans, immigrants/refugees, and sexual minorities (800 women and children). Evidence-based practices include emergency shelters, which reduce re-assault by 50%, and civil legal services, which reduce DV homicides. This program offer also includes grant-funded projects that serve an additional 310 victims and children: services to increase long-term self-sufficiency; services for victims and their children involved in Child Welfare; and DV Enhanced Response Team (DVERT) which is a collaborative response to high risk offenders and their victims. DVERT has reduced recidivism of the high risk offenders in DVERT by 30% and increased victims' safety and their confidence in the criminal justice system.

Coordination includes staffing the Family Violence Coordinating Council to provide a forum for collaborative efforts such as training, policy and program development and implementation, and system-wide problem-solving. The 43 member organizations represent the criminal justice system, victim services, health care, batterers intervention, elected officials and others. In addition, the offer supports the development of the one-stop victim center.

### **Program Justification**

DV accounts for 40-50% of all reported violent crimes in Portland, and for 25-30% of homicides in the county. Victims receiving services through this program offer face extreme levels of danger (average 12 of 19 on Danger Assessment tool) and high levels of housing instability (63% moved 3 or more times in 6 months). This program offer supports effective coordinated intervention to reduce these problems and help stabilize victims. It aligns with Basic Needs priority by providing intervention and coordination of services in a culturally competent manner, ensuring care for vulnerable members of the community through coordination of services and promoting healthy behaviors by empowering victims to escape DV and increase self-sufficiency through advocacy, education and support. It aligns with County Resolution 00-149 (Domestic Violence Policy) and the City/County 10-Year Plan to End Homelessness to increase income and stabilize participants in permanent housing.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of victims and children served	5,600	5,100	5,600	5,600
	% of victims in stable housing after six months out of services	68.0%	70.0%	68.0%	70.0%

### **Performance Measure - Description**

Number served includes all clients and their children receiving in-person services provided by CGF, HUD or SHAP funds (ongoing funding). Significant increase over "Current Year Purchased" is due to the addition of clients receiving Short Term Rent Assistance, which were not included in prior year data. Percent of victims includes only those households receiving transitional housing or rent assistance.

Version 6/11/2009 s

Lead Agency: Program Contact: County Human Services Chiquita Rollins Federal and state grant requirements.

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$188,952	\$581,906	\$220,292	\$411,172
Contracts	\$1,200,194	\$947,086	\$1,195,837	\$806,128
Materials & Supplies	\$143,716	\$372,181	\$140,787	\$375,647
Internal Services	\$39,001	\$99,564	\$116,384	\$63,926
Subtotal: Direct Exps:	\$1,571,863	\$2,000,737	\$1,673,300	\$1,656,873
Administration	\$13,617	\$0	\$11,124	\$0
Program Support	\$171,981	\$0	\$141,401	\$0
Subtotal: Other Exps:	\$185,598	\$0	\$152,525	\$0
Total GF/non-GF:	\$1,757,461	\$2,000,737	\$1,825,825	\$1,656,873
Program Total:	\$3,75	8,198	\$3,482,698	
Program FTE	2.12	6.94	2.24	4.53
Program Revenues				
Indirect for dep't Admin	\$20,027	\$0	\$22,593	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$1,000
Intergovernmental	\$0	\$1,890,237	\$0	\$1,639,428
Other / Miscellaneous	\$0	\$110,500	\$0	\$16,445
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$20,027	\$2,000,737	\$22,593	\$1,656,873

### **Explanation of Revenues**

HUD Horizons - \$457,742 Oregon Housing and Community Services SHAP - \$211,372 City of Portland GF - \$50,000 United Way (DVERT) - \$1,000 Department of Justice Safe Start - \$210,000; OVW-DVERT - \$329,826; OVW Transitional Housing - \$93,939 CDC - Housing Battered Women - \$286,549 RAND Corp - OJJDP Safe Start - \$15,445 Domestic Partnership Fees - \$1,000 County General Fund Match - \$51,480 County General Fund Subsidy - \$1,621,820

### Significant Program Changes

Significantly Changed

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

Funding for two programs was not continued into FY2010: the Byrne grant funding for services for victims with co-occurring mental health, substance abuse and DV was for 2 years only (\$200,000 annually); and our application for funding for supervised visitation was denied (\$175,000 annually). We are considering reapplying for the supervised visitation funds for Federal FY10. In addition, the United Way grant for the DV Enhanced Response Team (DVERT) is up for renewal; it will be a very competitive process and may not be refunded.



### Program # 25050A - MHASD Administration

Priority: Program Offer Type: Accountability Administration

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

### **Program Characteristics:**

### Executive Summary

The Mental Health and Addiction Services Division (MHASD) Administration provides leadership and accountability for the division's behavioral health programs for children, families and adults. MHASD works collaboratively with consumers, advocates and providers to manage resources and services to meet the needs of individual consumers and the requirements of state and federal law. MHASD serves approximately 28,000 unduplicated individuals annually.

### **Program Description**

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

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

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

MHASD includes mental health systems of care for children and adults as well as addiction treatment. Programs span the priority areas of Accountability, Safety, Basic Needs and Education. The administration continuously assesses its continuum of services to respond to the changing needs and demographics of Multhomah County. Administration ensures that consumers, advocates, providers and stakeholders have a voice in implementing necessary changes and system enhancements.

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.

### **Program Justification**

MHASD administration is directly linked to the priorities identified by the Accountability and Basic Needs outcome teams through its role in effectively managing limited resources and service expenses. MHASD manages its resources and public dollars by continually evaluating its business model and infrastructure, adapting to changes in funding and legislation. MHASD's focus on accountability is demonstrated by its use of a fee for service claims processing system. This gives MHASD administration the ability to track that the appropriate level of service is being provided to those most at risk. It also allows MHASD access to real-time financial data to better inform business decisions.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total Adult/Child MHASD Advisory Meetings	20	20	20	20
	% Compliance w/Required Minimum Quarterly Advisory Meeting Frequency	100.0%	100.0%	100.0%	100.0%

Performance Measure - Description

Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

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

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$436,419	\$1,585,227	\$787,223	\$1,272,320
Contracts	\$69,680	\$17,407	\$69,680	\$171,122
Materials & Supplies	\$51,133	\$16,231	\$0	\$55,136
Internal Services	\$127,560	\$154,996	\$5,904	\$374,461
Subtotal: Direct Exps:	\$684,792	\$1,773,861	\$862,807	\$1,873,039
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$684,792	\$1,773,861	\$862,807	\$1,873,039
Program Total:	\$2,45	8,653	\$2,73	5,846
Program FTE	4.50	14.00	7.65	9.85
Program Revenues				
Intergovernmental	\$0	\$1,773,861	\$0	\$1,873,039
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$1,773,861	\$0	\$1,873,039

### **Explanation of Revenues**

OHP Premium - \$1,060,192 State Mental Health Grant Local Admin - \$629,792 State Mental Health Grant A&D Special Projects - \$34,909 State Mental Health Grant Continuum of Care - \$7,407 State Mental Health Grant Prev & Early Interven - \$105,740 State Mental Health Grant Outpatient GambTx Svcs - \$34,999 County General Fund - \$862,807

### Significant Program Changes

Last year this program was: #25050, MHASD Administration FY10 program offer reflects the elimination of 1.0 FTE Program Supervisor.



### Program # 25050B - MHASD Administration Scaled Offer

Priority:AccountabilityProgram Offer Type:AdministrationRelated Programs:25052, 25053A, 25054

### Lead Agency: Program Contact:

County Human Services Karl Brimner

### **Program Characteristics:**

### Executive Summary

The Mental Health and Addiction Services Division (MHASD) Administration provides leadership and accountability for the Division's behavioral health programs for children, families and adults. MHASD works collaboratively with consumers, and providers to manage resources to meet the needs of consumers and the requirements of State and Federal law. MHASD serves approximately 28,000 unduplicated individuals annually. This program offer eliminates three administrative positions due to cuts in the Governor's Recommended Budget and County General Fund constraints.

#### **Program Description**

Mental Health and Addiction Services Administration provides oversight and management of all behavioral health programs in the Mental Health and Addiction Services Division (MHASD) whether provided directly or through contracted agencies. MHASD is composed of two service systems:

1) Verity, the Mental Health Organization (MHO) - a federally funded insurance program for individuals and families enrolled in Oregon Health Plan.

2) The Community Mental Health Program (CMHP) - provides services that include involuntary commitment and addiction treatment. MHASD includes mental health systems of care for children and adults as well as addiction treatment. Business and clinical decisions ensure that finite resources are targeted in a cost-effective manner 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.

MHASD administration is also responsible for monitoring contracts and adjusting the behavioral health system to accommodate changes in funding or regulatory requirements.

This program offer restores two addiction administrative positions due to cuts in the Governor's Recommended Budget and County General Fund and one mental health supervisor is reduced due to CGF constraint. In spite of cuts to addiction funding in the Governor's Budget, a significant amount of A&D programs will remain.

### **Program Justification**

MHASD administration is directly linked to the priorities identified by the Accountability and Basic Needs outcome teams through its role in effectively managing limited resources and service expenses. The positions included in this program offer are actively involved in fulfilling that role. This gives MHASD administration the ability to track that the appropriate level of service is being provided to those most at risk. It also allows MHASD access to real-time financial data to better inform business decisions

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total Adult/Child MHASD Advisory Meetings <sup>1</sup>	20	20	20	20
	% Compliance w/Required Minimum Quarterly Advisory Meeting Frequency	100.0%	100.0%	100.0%	100.0%

### **Performance Measure - Description**

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

<sup>1</sup> This measure is not an additional 20 advisory meetings, but supports the meetings documented in #25050A.

### Version 4/08/2009 s

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$166,317	\$85,128	\$0	\$95,389
Subtotal: Direct Exps:	\$166,317	\$85,128	\$0	\$95,389
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$166,317	\$85,128	\$0	\$95,389
Program Total:	\$251	,445	\$95	,389
Program FTE	2.00	1.00	0.00	1.00
Program Revenues				
Intergovernmental	\$0	\$85,128	\$0	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$85,128	\$0	\$0

### **Explanation of Revenues**

### Significant Program Changes

Last year this program was: #25050, MHASD Administration Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



### Program # 25050C - MHASD Administration Scale C

Priority: Program Offer Type: Related Programs: Accountability Administration

25052, 25053A, 25054

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

### **Program Characteristics:**

### Executive Summary

The Mental Health and Addiction Services Division (MHASD) Administration provides leadership and accountability for the division's behavioral health programs for children, families and adults. MHASD works collaboratively with consumers, advocates and providers to manage resources and services to meet the needs of individual consumers and the requirements of state and federal law. MHASD serves approximately 28,000 unduplicated individuals annually.

### **Program Description**

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

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

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

MHASD includes mental health systems of care for children and adults as well as addiction treatment. Programs span the priority areas of Accountability, Safety, Basic Needs and Education. 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 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.

### **Program Justification**

MHASD administration is directly linked to the priorities identified by the Accountability and Basic Needs outcome teams through its role in effectively managing limited resources and service expenses. MHASD manages its resources and public dollars by continually evaluating its business model and infrastructure, adapting to changes in funding and legislation. MHASD's focus on accountability is demonstrated by its use of a fee for service claims processing system. This gives MHASD administration the ability to track that the appropriate level of service is being provided to those most at risk. It also allows MHASD access to real-time financial data to better inform business decisions.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total Adult/Child MHASD Advisory Meetings	20	20	20	20
	% Compliance w/Required Minimum Quarterly Advisory Meeting Frequency	100	100	100	100

### **Performance Measure - Description**

This measure is not an additional 20 advisory meetings, but supports the performance measures documented in #25050A.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$0	\$173,278	\$0
Subtotal: Direct Exps:	\$0	\$0	\$173,278	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$173,278	\$0
Program Total:	\$	0	\$173,278	
Program FTE	0.00	0.00	2.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

### **Explanation of Revenues**

County General Funds (MVRT) - \$173,275

## Significant Program Changes

Last year this program was:



### Program # 25052 - Medical Records for Mental Health & Addiction Services

Accountability

Priority:

Program Offer Type: Support Related Programs: 25050A, 25053A Lead Agency: Program Contact: County Human Services Karl Brimner

Version 2/27/2009 s

**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 40,000 adult and children's mental health and alcohol and drug client records, and Verity Authorization/ MHO records required by Oregon Administrative Rules.

### **Program Description**

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, authorization/release of records, legal requests for records, data analysis, and technical assistance to community agencies and county staff.

### **Program Justification**

Program ensures the security and confidentiality of all client clinical records within MHASD, monitors compliance with all billing related documentation requirements, and supports clinical functions.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Count of clinical and managed care record items processed annually <sup>1</sup>	30,550	23,500	30,550	30,550
Outcome	Total new MHASD medical records reviewed for completeness <sup>2</sup>	9,600	10,000	8,400	7,200

### **Performance Measure - Description**

<sup>1</sup> Count of elements of client records processed in following programs: Involuntary

Commitment Investigators, Commitment Monitors and Trial Visit, School-based and Early Childhood/Cares, Family Care Coordinators, Early Assessment and Support Alliance, 370 Project, Intensive Transition Project, Verity Authorizations, and Residential Records. Minimum of two elements each record plus all In house Verity authorizations.

<sup>2</sup> Count of number of new client records opened annually and reviewed by records staff for completeness. Includes new records in the following programs: Involuntary Commitment Investigators, Commitment Monitors and Trial Visit, School based and Early Childhood/Cares, Family Care Coordinators, Alcohol and Drug DUII records (6 months FY09 only), and Residential Records. The Next Year Offer is reduced because the DUII program has closed and so no new records will be created.

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 Statues 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 Centers for Medicare and Medicaid billing regulations.

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$614,637	\$0	\$547,193	\$0
Materials & Supplies	\$15,211	\$0	\$20,737	\$0
Internal Services	\$98,841	\$0	\$129,826	\$0
Subtotal: Direct Exps:	\$728,689	\$0	\$697,756	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$728,689	\$0	\$697,756	\$0
Program Total:	\$728	3,689	\$697	7,756
Program FTE	9.00	0.00	8.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

### **Explanation of Revenues**

County General Fund - \$697,756

### Significant Program Changes

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



### Program # 25053A - MH Quality Management & Protective Services

Accountability

Priority:

Program Offer Type: Support Related Programs: 25050A, 25052

### **Program Characteristics:**

### **Executive Summary**

Program works to assure quality of contracted providers through mental health agency audits and monitoring mental health contract performance. Program serves 71,000 Verity Oregon Health Plan (OHP) members, 52 mental health agencies, and 61 residential/foster facilities. Program educates OHP members about available mental health services and ensures quality of services. This program offer is a reduced offer excluding funding 2.0 of current 2.8 FTE level for adult protective services investigators. Purchasing this offer and 25053B will return the funding for protective service investigators.

#### **Program Description**

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

### **Program Justification**

The Quality Management program links to the Basic Needs and Accountability strategies by monitoring behavioral health care quality and satisfaction with care. Program intervenes directly when problems or issues arise. Protective Service Investigators intervene directly when a mentally ill adult's safety is jeopardized by abuse. Critical incidents, including deaths, are reviewed with providers. Services are aimed at prevention of future incidents that may result in client harm, hospitalization, or death.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total certificate of approval and licensing reviews completed.	36	40	33	35
Outcome	Percent of certification reviews conducted within 3 year maximum OAR mandate.	100.0%	100.0%	100.0%	100.0%
Output	Total reviews/protective service investigations/ complaints/incidents <sup>2</sup>	777	784	780	775
Output	Total residential incident reports reviewed/processed.	6,220	5,500	6,025	6,000

### **Performance Measure - Description**

<sup>1</sup> Total clinical reviews including residential critical incidents + total protective service investigations + total treatment records reviewed for mental health agency certification or Verity MHO compliance.

<sup>2</sup> The FY09-10 offer retains the outputs and outcomes for protective investigations, as this ia mandated service per OAR's regardless of the level of funding. Statuatory timeframes cannot be met with reduced staffing and would require overtime and on-call expenditures.

### Version 6/11/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

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	2009	2009	2010	2010
Personnel	\$340,837	\$834,742	\$472,781	\$914,745
Contracts	\$0	\$0	\$0	\$75,000
Materials & Supplies	\$2,981	\$4,841	\$11,007	\$11,843
Internal Services	\$74,195	\$83,326	\$181,756	\$39,206
Subtotal: Direct Exps:	\$418,013	\$922,909	\$665,544	\$1,040,794
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$418,013	\$922,909	\$665,544	\$1,040,794
Program Total:	\$1,34	0,922	\$1,70	6,338
Program FTE	4.00	8.30	4.69	9.31
Program Revenues				
Intergovernmental	\$0	\$922,909	\$0	\$937,624
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$922,909	\$0	\$937,624

### **Explanation of Revenues**

OHP Premium - \$920,135 State Mental Health Grant Local Admin - \$99,999 State Mental Health Grant Non-Res Adult - \$20,660 County General Fund - \$665,544

### Significant Program Changes

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

In FY09 this program offer included an additional 2 FTE protective service investigators The number of abuse reports will not change, However, the availability of remaining 0.8 FTE investigator for protective service delivery is eliminated. Function will be delegated to community mental health case managers. Additionally, it is unlikely that one investigator will be able to complete the current 200 investigations and 400 screenings per year.

Significantly Changed



### Program # 25054 - MHASD Business and Finance

**Priority:** Program Offer Type:

Accountability Support **Related Programs:** 25050A

Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

Version 6/11/2009 s

### **Program Characteristics:**

### **Executive Summary**

Business and Finance manages revenue and expenses for the Mental Health and Addiction Service Division's (MHASD) \$70 million budget. It controls the county's financial risk for over \$39 million in Medicaid funds through rate setting, claims adjudication and supervision of a third party administrator (TPA). Business and Finance supports MHASD in serving approximately 28,000 unduplicated individuals annually. It analyzes claim, authorization and enrollment data to forecast future claims expense.

#### **Program Description**

MHASD's Business and Finance supports the systems of care for some of Multnomah County's most vulnerable populations, including those who are indigent and in need of mental health and addiction treatment. Staff support both the child and adult systems of care. Business and Finance manages the complex financial transactions required to deliver services in the county's Mental Health Organization (MHO), Verity. Verity is a federal insurance program funded by Medicaid and is a risk bearing entity. If expenditures exceed revenue, the county must make up the difference. It is the job of Business and Finance to ensure this does not happen. Business and Finance produces financial and service utilization reports, interfaces with a third party administrator (TPA) to process Medicaid claims, and tracks funding from the state. It develops new procedures to respond to changes in federal and state funding. Business and Finance performs accounts payable and receivable functions, as well as responding 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.

### **Program Justification**

In its role as fiscal steward for MHASD, Business and Finance supports the Accountability priorities. By tracking available funds across the systems of care, it provides reliable information for decision making so that management can set priorities and limited resources can be used in the most effective way. Through its work with the third party administrator processing Medicaid claims, Business and Finance ensures that funds are only paid for services provided within regulatory constrictions.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
	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%	0.0%	0.0%

#### **Performance Measure - Description**

Business Services' goal is zero exceptions noted by independent auditor.

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
Program Expenses	2009	2009		2010
Personnel	\$449,661	\$239,604	\$370,270	\$392,209
Contracts	\$35,000	\$600,000	\$16,331	\$600,000
Materials & Supplies	\$11,843	\$5,994	\$13,312	\$4,525
Internal Services	\$11,616	\$86,437	\$30,343	\$87,906
Subtotal: Direct Exps:	\$508,120	\$932,035	\$430,256	\$1,084,640
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$508,120	\$932,035	\$430,256	\$1,084,640
Program Total:	\$1,44	0,155	\$1,51	4,896
Program FTE	6.00	2.50	3.93	5.07
Program Revenues				
Intergovernmental	\$0	\$932,035	\$0	\$1,084,640
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$932,035	\$0	\$1,084,640

### **Explanation of Revenues**

OHP Premium - \$1,034,640 State Mental Health Grant Local Admin - \$50,000 County General Fund - \$430,256

Significant Program Changes

Last year this program was: #25054, MHASD Business and Finance FY10 program offer reflects the elimination of .50 FTE Data Technician.



### Program # 25055A - Mental Health Crisis Services - Base

Priority:	Basic Needs
Program Offer Type:	Existing Operating
Related Programs:	25055B, 25055C

### Program Characteristics:

### **Executive Summary**

This program offer includes the Mental Health and Addiction Services Division's (MHASD) Crisis Call Center, Urgent Walk-In Clinic and Mobile Crisis Outreach. These programs provide 24-hour-a-day response, access and coordination of emergency mental health services. These are vital services to the mental health system and serve a critical safety net function. Funding for these programs are a combination of Verity, State General Funds and County General Funds. This program offer is reduced from last year due to County General Fund cuts and State General Fund cuts in the Governor's Budget. Purchasing only this program offer will significantly reduce services from current levels in the community. Purchasing this program offer in conjunction with offers 25055B and 25055C will restore services to current operating levels.

### **Program Description**

The Crisis Call Center receives more than 64,000 crisis line calls annually from individuals experiencing a mental health emergency. The Call Center: (1) coordinates emergency mental health services for all county residents, regardless of insurance status; (2) serves as the dispatch point for the Mobile Crisis Outreach Team; (3) refers and coordinates clients with the Urgent Walk-In Clinic; (4) manages referrals to treatment providers and authorizes services for Verity members and indigent services; (5) reviews psychiatric admissions for Verity members; and (6) coordinates outpatient care with community providers. The Call Center will continue to operate on a 24-hour basis as it is funded through Verity funding, an unaffected portion of State General Fund and a contract with Family Care.

The Mobile Crisis Outreach Team evaluates more than 2,600 residents annually. It is an important resource for Portland Police and the Department of Community Justice, both of which have a direct MHASD Call Center telephone line. This line is used when individuals are experiencing psychiatric emergencies, present a risk to their own safety, or are at risk of incarceration. Residents and businesses also use the Mobile Crisis Outreach Team to reach homeless individuals who have immediate need for mental health care. There is only enough funding in this offer to provide this community service for 7 months, at which time it will be closed.

The Urgent Walk-In Clinic evaluates more than 5,200 residents annually experiencing a mental health emergency. This service is a valuable community resource that evaluates and treats psychiatrically impaired individuals. It is open daily from 7:30 AM to 10:00 PM. There is only enough funding in this offer to provide this community service for 6.7 months, at which time it will be closed.

The children's Crisis Prevention Outreach team is eliminated in this program offer.

### **Program Justification**

The Mental Health Crisis Services Program fits the Basic Living Needs priority by providing individuals and emergency response agencies with 24-hour-a-day access to mental heath assistance. Crisis services enable the county to address emergent mental health needs early, before they become acute and require a more intensive level of care. The Call Center's non-emergency services play an important role in matching individuals with mental health needs with the right services.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total mobile crisis contacts <sup>1</sup>	11,375	11,500	11,375	6,350
Outcome	Percent of mobile crisis contacts related to crisis call <sup>2</sup> response.	12.0%	20.0%	12.0%	18.0%

### Performance Measure - Description

<sup>1</sup> These contacts include multiple contacts for the 2,600 residents who are evaluated by the team each year. <sup>2</sup> This is a measure of availability of the team for emergent crises. If the team is engaged in other activities, they may be unavailable for their primary mandate which is response to crisis calls.

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Lead Agency: Program Contact: County Human Services Karl Brimner

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
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$1,950,257	\$0	\$1,983,007
Contracts	\$870,248	\$1,572,030	\$948,688	\$1,512,033
Materials & Supplies	\$0	\$37,535	\$0	\$37,535
Internal Services	\$0	\$218,878	\$0	\$350,423
Subtotal: Direct Exps:	\$870,248	\$3,778,700	\$948,688	\$3,882,998
Administration	\$98,218	\$149,331	\$82,905	\$150,200
Program Support	\$217,647	\$145,960	\$182,001	\$137,583
Subtotal: Other Exps:	\$315,865	\$295,291	\$264,906	\$287,783
Total GF/non-GF:	\$1,186,113	\$4,073,991	\$1,213,594	\$4,170,781
Program Total:	\$5,26	60,104	\$5,38	4,375
Program FTE	0.00	19.56	0.00	20.56
Program Revenues				
Fees, Permits & Charges	\$0	\$6,000	\$0	\$6,000
Intergovernmental	\$0	\$3,772,700	\$0	\$3,876,998
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$3,778,700	\$0	\$3,882,998

### **Explanation of Revenues**

OHP Premium - \$1,679,054 Family Care Inc - \$6,000 State Mental Health Grant Non-Res Adult - \$145,617 State Mental Health Grant Comm Crisis Srvcs - \$2,052,327 County General Fund - \$948,688

### **Significant Program Changes**

**Significantly Changed** 

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

Last year, this program was funded to adequately provide a 24-hour mental health emergency response system 365 days per year. Significant changes in this proposal include:

•The 31% decrease in County General Funds equals \$365,000. These funds support a crisis transportation contract with Cascadia Behavioral Health (transporting over 780 clients per year), 2 FTE on the Mobile Crisis Response team that were designated as cultural specialists and the children's Crisis Prevention Outreach team through Morrison Center. •a 90% decrease in the Governor's budget which equals a \$1,310,554 reduction. The remaining 10% funding equals \$145,617, with an additional State General Fund element of \$889,085 totaling \$2,233,390 in State General Funds for the 24-hour mental health emergency response system. This dollar amount will provide enough funding for the Urgent Walk-In Clinic and Mobile Crisis Outreach Team to remain open for 3.5 months into the next fiscal year.



### Program # 25055B - Mental Health Crisis Services - Scaled CGF

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25055A, 25055C

### Lead Agency: C Program Contact: Ka

County Human Services Karl Brimner

Version 6/11/2009 s

**Program Characteristics:** 

### **Executive Summary**

This program offer includes the Mental Health and Addiction Services Division's (MHASD) Urgent Walk-In Clinic and Mobile Crisis Outreach. These programs provide 24-hour-a-day response, access and coordination of emergency mental health services. These are vital services to the mental health system and serve a critical safety net function. Purchasing this program offer in conjunction with offers 25055A and 25055C will restore services to current operating levels. This program offer restores the County General Fund portion of funding and purchases 1 month of crisis services.

### **Program Description**

The Mobile Crisis Outreach Team evaluates more than 2,600 residents annually. It is an important resource for Portland Police and the Department of Community Justice, both of whom have a direct MHASD Call Center telephone line. This line is used when individuals are experiencing psychiatric emergencies, present a risk to their own safety, or are at risk of incarceration. Residents and businesses also use the Mobile Crisis Outreach Team to reach homeless individuals who have immediate need for mental health care. There is enough funding in this offer to provide this community service for 1 month, at which time it will be closed.

The Urgent Walk-In Clinic evaluates more than 5,200 residents annually experiencing a mental health emergency. This service is a valuable community resource that evaluates and treats psychiatrically impaired individuals. It is open daily from 7:30 AM to 10:00 PM. There is only enough funding in this offer to provide this community service for 1 month, at which time it will be closed.

### **Program Justification**

The Mental Health Crisis Services Program fits the Basic Living Needs priority by providing individuals and emergency response agencies with 24-hour-a-day access to mental heath assistance. Crisis Services enable the county to address emergent mental health needs early, before they become acute and require a more intensive level of care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total mobile crisis contacts <sup>1</sup>	0	0	0	750
Outcome	Percent mobile crisis contacts related to call center response <sup>2</sup>	12.0%	20.0%	12.0%	18.0%

#### **Performance Measure - Description**

<sup>1</sup> These contacts include multiple contacts for the 2,600 residents who are evaluated by the team each year.

<sup>2</sup> This is a measure of availability of the team for emergent crises. If the team is engaged in other activities, they may be unavailable for their primary mandate which is response to crisis calls.

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	
Program Expenses	2009	2009	2010	2010	
Contracts	\$328,440	\$0	\$103,611	\$0	
Subtotal: Direct Exps:	\$328,440	\$0	\$103,611	\$0	
Administration	\$0	\$0	\$0	\$0	
Program Support	\$0	\$0	\$0	\$0	
Subtotal: Other Exps:	\$0	\$0	\$0	\$0	
Total GF/non-GF:	\$328,440	\$0	\$103,611	\$0	
Program Total:	\$328	3,440	\$103,611		
Program FTE	0.00	0.00	0.00	0.00	
Program Revenues					
Program Revenue for Admin	\$0	\$0	\$0	\$0	
Total Revenue:	\$0	\$0	\$0	\$0	

### **Explanation of Revenues**

County General Fund (MVRT) - \$103,611

### **Significant Program Changes**

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

The crisis services portion of the Mental Health and Addiction Services Division has taken reductions that reflect both County General Fund constraints and cuts in the Governor's Recommended Budget.

**V** Significantly Changed



### Program # 25055D - Mental Health Crisis Services - SGF restoration assumption

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25055A, 25055B, 25055C

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

**Program Characteristics:** 

### **Executive Summary**

This program offer purchases a reduced amount of mental health crisis services as a result of state funding cuts. This offer, when purchased with 25055A, will buy late afternoon, evening and weekend hours of Mobile Crisis Outreach and the Urgent Walk-in Clinic. These programs provide access to and coordination of emergency mental health services. These are vital services to the mental health system and serve a critical safety net function. This offer makes the assumption that the State of Oregon Joint Ways and Means Committee plans to fund these services at 55% of current service level.

### **Program Description**

The Mobile Crisis Outreach Team evaluates more than 2,600 residents annually. Residents and businesses also utilize the Mobile Crisis Outreach Team to reach homeless individuals who have immediate need for mental health care. Purchasing this offer would allow the team to function from 2:00 p.m. - 10:00 p.m. Monday through Friday and 12:00 p.m. - 10:00 p.m. on the weekend.

The Urgent Walk-In Clinic evaluates more than 5,200 residents annually experiencing a mental health emergency. This service is a valuable community resource treating psychiatrically impaired individuals who need to be seen quickly and might otherwise end up in an emergency room. Purchasing this offer would allow the clinic to remain open from 2:00 p.m. - 10:00 p.m. Monday through Friday and 12:00 p.m. to 10:00 p.m. on weekends.

Funding for these services was reduced to 10% of current service level in the Governor's Recommended Budget. This offer makes the assumption that the State of Oregon Joint Ways and Means Committee plans to fund these services at 55% of current service level. Of the services that are purchased with Mental Health Service element (MHS 20), crisis services will be prioritized if any funding is restored. Purchasing this offer, in addition to 25055A, allows the walk-in clinic and mobile crisis outreach to remain open a reduced number of hours.

### **Program Justification**

Mental Health Crisis Services are aligned with the Basic Living Needs priority by providing individuals and emergency response agencies with access to mental health assistance. Crisis services enable the county to address emergent mental health needs early, before they become acute and require a more intensive level of care.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total mobile crisis contacts *1	11,375	11,500	11,375	5,915
	Percentage of mobile crisis contacts related to crisis call response *2	12.0%	20.0%	12.0%	18.0%

#### **Performance Measure - Description**

1 - These contacts include multiple contacts for the 2,600 residents who are evaluated by the team each year.

2 - This is a measure of availability of the team for emergent crises. If the team is engaged in other activities, they may be unavailable for their primary mandate which is response to crisis calls.

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
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$0	\$655,277
Subtotal: Direct Exps:	\$0	\$0	\$0	\$655,277
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$0	\$655,277
Program Total:	\$	<b>0</b>	\$655,277	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$655,277
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$655,277

### Explanation of Revenues

### Significant Program Changes

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

Funding for these services were reduced to 10% of current service level in the Governor's Recommended Budget. This offer makes the assumption that the State of Oregon Joint Ways and Means Committee plans to fund these services at 55% of current service level. Of the services that are purchased with Mental Health Service element (MHS 20), crisis services will be prioritized if any funding is restored.



### Program # 25057 - Inpatient & Residential MH Services for Children

Priority:BasicProgram Offer Type:ExistRelated Programs:2505

Basic Needs Existing Operating 25055A, 25067

### Lead Agency: Program Contact:

County Human Services Karl Brimner

Version 2/27/2009 s

### **Program Characteristics:**

### **Executive Summary**

This program offer focuses on the mental health needs of OHP enrolled children and families by providing 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 provide a continuum of services for 667 children each year who need secure placement outside the home for mental health care.

### **Program Description**

This program contains three distinct levels of mental health service for children and families: Psychiatric inpatient hospitalization is the highest level of treatment for children suffering from mental illness. The Mental Health and Addiction Services Division (MHASD) Call Center 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. 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. 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.

### **Program Justification**

Consistent with the Basic Living Needs priority, this program offer recognizes that children affected by severe mental illness may require different kinds of care. It matches the child with the most efficient and most medically and clinically appropriate level of mental health treatment.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total unduplicated children receiving inpatient, subacute & residential care <sup>1</sup>	674	664	667	667
Outcome	Average length of stay in psychiatric residential treatment <sup>2</sup>	84	47	102	102
Outcome	Percent of children discharged from inpatient and readmitted within 30 days <sup>3</sup>	17.4%	19.0%	20.5%	20.5%
Outcome	Percent of children discharged from residential and readmitted within 30 days.*4	7.3%	18.3%	4.8%	4.8%

### **Performance Measure - Description**

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

<sup>2</sup> Average psychiatric residential treatment length of stay in number of days. Previously, this average length of stay calculation incorporated intensive evaluation and stabilization (IES) services in the numerator and denominator. IES services are typically much shorter in duration (typically 2 weeks), so the average was artificially low. IES services are no longer included in these calculations so the current year average will be longer.

<sup>3</sup> Percent of children discharged from inpatient or subacute and readmitted within 30 days to same or higher level of care. \*4 Percent of children discharged from psychiatric residential treatment and readmitted within 30 days to same or higher level of care.

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	2009	2009	2010	2010
Contracts	\$0	\$2,350,000	\$0	\$2,050,000
Subtotal: Direct Exps:	\$0	\$2,350,000	\$0	\$2,050,000
Administration	\$0	\$81,931	\$0	\$70,873
Program Support	\$0	\$157,250	\$0	\$140,773
Subtotal: Other Exps:	\$0	\$239,181	\$0	\$211,646
Total GF/non-GF:	\$0	\$2,589,181	\$0	\$2,261,646
Program Total:	\$2,58	9,181	\$2,26	61,646
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$2,350,000	\$0	\$2,050,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$2,350,000	\$0	\$2,050,000

### **Explanation of Revenues**

OHP Premium - \$2,050,000

### Significant Program Changes

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



### Program # 25058A - MH Commitment Services

**Basic Needs** 

25058B

Existing Operating

**Priority:** 

Program Offer Type: **Related Programs:** 

**Program Characteristics:** 

### **Executive Summary**

This offer includes Emergency Psychiatric Holds (E-Holds), Involuntary Commitment Program (ICP), Commitment Monitors, and 10% of the State Hospital Waitlist Reduction Program (WLRP). ORS 426 mandates the county as payor of last resort for indigent E-Holds and requires ICP staff investigate and determine whether individuals on an E-Hold present a risk of harm to themselves or others and if court hearing should be recommended. Provision of commitment monitors is a requirement of the county as the Local Mental Health Authority (LMHA). ICP will investigate 1270 E-Holds for indigent residents and over 4,500 total holds; commitment staff will monitor 600 patients and 114 trial visits. This is a reduced staffing and funding level for indigent E-Holds, ICP and WLRP. Purchasing this offer and 25058B will bring ICP staff level and indigent E-Hold funding to the current level.

### **Program Description**

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. If the individual is placed on an E-Hold and cannot pay for the hospital stay, ORS 426 requires that the county provide these services. When staff recommend a hearing, ORS 426.110-120 requires that a court examiner make an independent recommendation to the Judge.

The county is required to provide commitment monitoring services. Commitment monitors 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. In FY07-08, commitment monitors monitored 288 patients in acute care, 242 patients at Oregon State Hospital and 114 trial visits. The State Hospital Waitlist Reduction Program (WLRP) provides Intensive Case Management (ICM) for patients discharging from the State Hospital and acute care hospitals, and provides funding for four Emergency Department Liaisons. ICM and transition planning prevent relapses into hospital care and reduce the County's burden as the payor of last resort. ICM staff provide connection with resources and assistance in obtaining housing, access to health care, social services, and outpatient mental health services.

### **Program Justification**

These services fit the Basic Living Needs priority by addressing the needs of mentally ill county residents at the highest level of care. Services provide care and service coordination, ensure adequacy and appropriateness of resources and provide protection of legal and civil rights. Services fit the Poverty Elimination Framework by funding mental health care for indigent individuals who present a risk to their own safety or the safety of others.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of E-Holds for indigent County residents <sup>1</sup>	1,059	1,000	1,154	1,270
Outcome	% of total E-Holds that went to Court hearing <sup>2</sup>	7.2%	8.0%	6.5%	6.5%
Output	Number of commitments monitored	530	800	625	600
Outcome	% of total E-Holds with a hearing that result in commitment <sup>3</sup>	71.8%	66.9%	65.0%	60.0%

### **Performance Measure - Description**

<sup>1</sup> Indigent E-Holds are a subset of the total number (4523) of holds in Multhomah County. Despite the reduction in funding and the resulting staff cuts, we are legally required to provide the same level of service.

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

<sup>3</sup> This measure is the percentage of E-Hold Court hearings that result in a commitment. This percentage is dropping as a result of increased conservativeness of the Circuit Court and State Appellate Court in interpreting ORS 426. The FY09-10 offer retains the output and outcomes for expected E-Holds, as this is a mandated service per ORS 426, regardless of the level of state funding. Statutory timeframes cannot be met with reduced staffing and would require overtime and on-call expeditures.

### Version 6/11/2009 s

Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

ORS 426.005 to 426.415

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$435,937	\$1,363,862	\$720,532	\$1,442,354
Contracts	\$560,000	\$1,153,751	\$316,015	\$1,256,869
Materials & Supplies	\$0	\$47,984	\$9,243	\$38,741
Internal Services	\$62,161	\$199,693	\$137,104	\$119,937
Subtotal: Direct Exps:	\$1,058,098	\$2,765,290	\$1,182,894	\$2,857,901
Administration	\$86,698	\$119,360	\$141,946	\$100,353
Program Support	\$0	\$0	\$311,614	\$23,871
Subtotal: Other Exps:	\$86,698	\$119,360	\$453,560	\$124,224
Total GF/non-GF:	\$1,144,796	\$2,884,650	\$1,636,454	\$2,982,125
Program Total:	\$4,02	9,446	\$4,61	8,579
Program FTE	4.00	14.30	7.02	14.28
Program Revenues				
Intergovernmental	\$0	\$2,765,290	\$0	\$2,857,901
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$2,765,290	\$0	\$2,857,901

### **Explanation of Revenues**

State Mental Health Grant Non-Res Adult - \$52,301 State Mental Health Grant Regional Acute Inp Fac - \$1,562,298 State Mental Health Grant Comm Crisis Srvcs - \$1,057,975 County General Fund - \$1,182,894

### Significant Program Changes

**Significantly Changed** 

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

Last year, this program offer included WLRP. The Governor's Budget FY09-10 recommends a 90% reduction in funding for WLRP. FY07-08 WLRP provided intensive case management to 45 people and FY08-09 provided services to 15 people, with a current year total estimate of 40. 10% of funding would allow WLRP to operate for 1 month. The 50% reduction in state funding for ICP staff and indigent E-Holds will result in increased E-Hold costs for the county and the use of significant overtime and on-call staffing to meet the statutory requirements of ORS 426.

The change in the % of E-Holds that went to hearing and the % that resulted in commitment is less than projected due to the increased conservativeness of the Circuit Court and the State Appellate Court interpretation of ORS 426.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



### Program # 25058D - MH Commitment Services - SGF restoration assumption

**Priority:** 

**Basic Needs** Program Offer Type: Existing Operating **Related Programs:** 25058A, 25058B, 25058C Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

Version 3/25/2009 s

**Program Characteristics:** 

### **Executive Summary**

Involuntary Commitment Program (ICP) staff investigate and determine whether individuals on an emergency hold present an imminent risk of harm to themselves or others and if a pre-commitment hearing recommendation should be made to the Circuit Court. The Governor's Recommended Budget cut funding for this program to 50% of current service level in one service element (MHS 24) and to 10% in another (MHS 20). This offer assumes that the State of Oregon Joint Ways and Means Committee plans to restore funding to 75% and 55% of current service level. Purchasing offer 25058A and 25058D will restore partial, but not all, funding that pays for ICP staff.

### **Program Description**

The Involuntary Commitment Program (ICP) is a requirement of the county as the Local Mental Health Authority. ICP staff investigate all emergency holds to determine if the individual's mental health status warrants a recommendation a civil commitment in Circuit Court. When staff recommend a hearing, Oregon Revised Statute 426.110 through 426.120 requires that a court examiner make an independent recommendation to the Judge. ICP is a required function for the county. The county is responsible for payment of involuntary hospital holds for indigent individuals. ICP staff reduce county commitment costs by rapid investigations and dismissal of holds.

The Governor's Recommended Budget cut funding for this program to 50% in one service element (MHS 24) and to 10% (MHS 20) in another. This offer assumes that the State of Oregon Joint Ways and Means Committee plans to restore funding to 75% and 55% of current service level. Purchasing offer 25058A and 25058D will restore partial, but not all, funding that pays for ICP staff.

### **Program Justification**

These services fit the Basic Living Needs priority by addressing the needs of mentally ill county residents at the highest level of care. Services provide care and service coordination, ensure adequacy and appropriateness of resources and provide protection of legal and civil rights. Services fit the Poverty Elimination Framework by funding mental health care for indigent individuals who present a risk to their own safety or the safety of others.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of E-holds for indigent county residents *1	1,059	1,000	1,154	1,270
Outcome	% of total E-holds that went to Court hearing *2	7.2%	8.0%	6.5%	6.5%
Output	Number of commitments monitored	530	800	625	600
Outcome	% of total E-holds with a hearing that result in commitment *3	71.8%	66.9%	65.0%	60.0%

### **Performance Measure - Description**

1 - Indigent E-holds are a subset of the total number (4523) of holds in Multhomah County. Despite any reduction in funding that may result in staff cuts, we are legally required to provide the same level of service.

2 - Outcomes measure staff effectiveness apply ORS 426.

3 - This measure is the percentage of E-hold court hearings that result in a commitment. This percentage is dropping as a result of increased conservativeness of the Circuit Court and State Appellate Court in interpreting ORS 426.

The FY09-10 offer retains the output and outcomes for expected e-holds as this is a mandated service per ORS426. regardless of state funding cuts. Statutory timeframes for investigations cannot be met with reduced staffing and would require overtime and on-call expeditures.

Oregon Revised Statute 426.005 to 426.415

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$0	\$0	\$463,853
Contracts	\$0	\$0	\$0	\$415,855
Subtotal: Direct Exps:	\$0	\$0	\$0	\$879,708
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$0	\$879,708
Program Total:	\$	0	\$879	9,708
Program FTE	0.00	0.00	0.00	5.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$879,708
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$879,708

### **Explanation of Revenues**

State Mental Health Grant Non-Res Adult - \$ 235,359 State Mental Health Grant Regional Acute Inp Fac - \$644,349

### Significant Program Changes

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

The Governor's Recommended Budget cut funding for this program to 50% of current service level in one service element (MHS 24) and to 10% in another (MHS 20). This offer assumes that the State of Oregon Joint Ways and Means Committee plans to restore funding to 75% and 55% of current service level. Purchasing offer 25058A and 25058D will restore partial, but not all, funding that pays for ICP staff.



### Program # 25060A - MH Residential Services

**Priority:** Program Offer Type:

**Basic Needs** Existing Operating **Related Programs:** 25060B

# Version 3/25/2009 s

Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

### **Program Characteristics:**

### **Executive Summary**

This offer includes mental health residential services and transitional housing: five residential beds at the Taft and transitional housing at the Bridgeview and the Royal Palm. Transitional housing focuses on individuals who require assistance obtaining permanent housing while addressing their mental health needs. Bridgeview provides 48 units of single-room housing, support services and on-site mental health and dual diagnosis treatment for persons with severe mental illness. Royal Palm housed 126 consumers in FY08. The Governor's Budget reduces funding for transitional housing by 90% reflected in this offer. Purchasing this offer and 25067B restores transitional housing to its current level of funding. Without purchase of the two offers, the Bridgeview and the Royal Palm may not have enough funding to remain open.

### **Program Description**

Residential services staff screen and place adults with chronic mental illness in structured housing where licensed caregivers provide mental health and social services. Staff received 294 referrals in FY08, with 58% placement. Staff monitor facilities, provide training, technical assistance and assist with development and siting of new facilities. Royal Palm is a 50 bed transitional housing facility, providing 20 dormitory shelter beds and 30 units of Single Room Occupancy housing for individuals with a mental illness who are homeless or at imminent risk of homelessness. TAFT Home is a seniors and persons with disabilities (SPD) residential facility, with 24 hour-a-day staffing, providing 15 beds for persons with both serious mental illness and medical complications. This offer includes the five TAFT beds purchased with County General Fund. Funding for the remaining ten beds is cut in the Governor's Recommended Budget. Bridgeview provides 48 transitional, single room occupancy units. Staff provide mental health services, 24-hour-a-day on-site case management, dual diagnosis treatment, and integration into permanent housing. Transitional housing fits the 10-Year Plan to End Homelessness "Housing First" approach, which holds that individuals need not be stabilized before being considered for housing. To preserve the program's transitional nature, individuals are evaluated every six months to determine readiness for permanent housing. Bridgeview served 81 consumers in FY08.

### **Program Justification**

Residential services and transitional housing meet the Basic Living Needs priority and 10-Year Plan to End Homelessness by linking mental health treatment to stable short and long term housing. Programs provide intervention and service coordination in the provision of housing and comprehensive community supports and services, as well as facilitate discharge of adults with mental illness to community residential programs from local acute care inpatient psychiatric facilities and the Oregon State Hospital, allowing consumers to increase their independence in the least restrictive level of care and relieving pressure on limited inpatient care resources in a cost effective manner.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of new Residential Services referrals	329	340	330	330
Outcome	% of Residential referrals placed <sup>1</sup>	52.0%	50.0%	45.0%	45.0%
Output	Number of residents served by Bridgeview <sup>2</sup>	81	0	110	0
Outcome	% of individuals placed in permanent housing <sup>3</sup>	75.0%	65.0%	45.0%	0.0%

### **Performance Measure - Description**

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

<sup>2</sup> Measure is a count of unduplicated individuals served in Bridgeview Transitional Housing.

<sup>3</sup> Measure provides the % of individuals Bridgeview was able to move from transitional to permanent housing in a fiscal year. Permanent Housing is long term community based housing where an individual can stay without time limit.

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

### **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$510,451	\$114,689	\$476,034	\$174,996
Contracts	\$395,169	\$3,348,373	\$361,982	\$2,530,401
Materials & Supplies	\$4,295	\$6,919	\$3,557	\$6,919
Internal Services	\$40,488	\$60,308	\$106,952	\$0
Subtotal: Direct Exps:	\$950,403	\$3,530,289	\$948,525	\$2,712,316
Administration	\$77,874	\$123,475	\$81,582	\$113,461
Program Support	\$172,566	\$53,069	\$179,098	\$26,989
Subtotal: Other Exps:	\$250,440	\$176,544	\$260,680	\$140,450
Total GF/non-GF:	\$1,200,843	\$3,706,833	\$1,209,205	\$2,852,766
Program Total:	\$4,90	7,676	\$4,06	1,971
Program FTE	5.50	1.00	4.80	1.70
Program Revenues				
Intergovernmental	\$0	\$3,530,289	\$0	\$2,712,316
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$3,530,289	\$0	\$2,712,316

### **Explanation of Revenues**

PDX Housing & Comm Dev - \$207,649 State Mental Health Grant Local Admin - \$181,915 State Mental Health Grant Non-Res Adult - \$194,622 State Mental Health Grant esidential Tx Svcs - \$441,185 State Mental Health Grant Psychiatric Review - \$666,533 State Mental Health Grant Older/Disabled MHS - \$119,546 State Mental Health Grant Comm Support Svcs Homeless - \$234,333 State Mental Health Grant Non Res Designated Svcs - \$666,533 County General Fund - \$948,525

### Significant Program Changes

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

Last year, this program offer included 15 beds purchased at the Taft Home, a seniors and persons with disability facility for individuals with a severe mental illness and medical complications. 10 beds are being eliminated as a result of proposed cuts in the Governor's Budget. The 90% reduction in state funding for the TAFT would decrease beds purchased with state dollars to one (1).

The decrease in individuals served at the Bridgeview in FY08-09 is the result of a change in providers which required a transition period where no referrals were accepted. Decrease in number residential referrals is related to a sharp decrease in new development.

### Significantly Changed



#### Program # 25060C - MH Residential Services SGF restoration assumption

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25060A, 25060B

### Lead Agency: Program Contact:

County Human Services Karl Brimner

Version 3/25/2009 s

**Program Characteristics:** 

### **Executive Summary**

This offer includes 48 transitional housing beds at Bridgeview for individuals with severe mental illness. This program offer assumes that the State of Oregon Ways and Means Committee plans to increase state funds for this service from the 10% proposed in the Governor's Recommended Budget to 55% of current service level. If the assumption is correct, purchasing this offer in addition to 25060A restores funding for Bridgeview at a level that allows it to continue to operate.

#### **Program Description**

Bridgeview is located in Northwest Portland and provides 48 single room occupancy units for individuals with mental illness who are homeless or at imminent risk of homelessness due to their illness. Along with treatment for their illness, staff on duty 24 hours a day, seven days a week provide case management, dual diagnosis treatment, and help obtaining permanent housing. The program served 81 individuals in FY08, 75% of whom were placed in permanent housing in that same fiscal year.

The Governor's Recommended Budget proposed funding 10% of current service level for transitional housing. This offer is based on the assumption that the State of Oregon Ways and Means Committee plans to restore a portion of that funding so that the funding will be at 55% of current service level. Purchasing this offer in addition to 25060A funds the Bridgeview at a level it can continue to operate.

### **Program Justification**

Transitional Housing and residential services meet the Basic Living Needs priority and the 10-Year Plan to End Homelessness by linking mental health treatment to stable short and long term housing. Transitional housing is aligned with the "Housing First" vision of the 10-Year Plan to End Homelessness, which supports the philosophy that individuals need not be stabilized before being considered for housing. The Taft provides intervention and service coordination in the provision of housing and comprehensive community supports and services.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of residents served by Bridgeview *1	81	0	110	110
Outcome	% of individuals placed in permanent housing *	75.0%	65.0%	45.0%	50.0%

### **Performance Measure - Description**

1 Measure is a count of unduplicated individuals served in Bridgeview Transitional Housing.

2 Measure provides the % of individuals Bridgeview staff was able to move from transitional to permanent housing in a fiscal year. Permanent housing is a long term community based housing where an individual can stay without time limit.

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	2009	2009	2010	2010
Contracts	\$0	\$0	\$0	\$197,196
Subtotal: Direct Exps:	\$0	\$0	\$0	\$197,196
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$0	\$197,196
Program Total:	\$	60	\$197	7,196
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$197,196
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$197,196

### **Explanation of Revenues**

### Significant Program Changes

Last year this program was: #25060, MH Residential Services This program offer assumes that the State of Oregon Ways and Means Committee plans to increase state funds for this service from the 10% proposed in the Governor's Recommended Budget to 55% of current service level.



### Program # 25061 - Bridgeview Building Redevelopment

Priority: Program Offer Type: Related Programs: Basic Needs Innovative/New Program Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

Program Characteristics: One-Time-Only Request

25060A

### **Executive Summary**

Multnomah County's Department of Human Services is partnering with the Housing Authority of Portland (HAP) in the redevelopment of HAP's University Place Apartments. The new building will become the home of Bridgeview, the county's only transitional housing program for persons with a serious mental illness. The Bridgeview program served 81 clients in FY08. This one-time-only request is for \$250,000 in funding to complete redevelopment of University Place.

#### **Program Description**

In late 2007, discussions took place among the Portland Development Commission (PDC), the city of Portland's Bureau of Housing and Community Development (BHCD), the Housing Authority of Portland (HAP), and the county. Discussions were related to several downtown buildings and programs that provided housing and services to low-income individuals. These projects were the Grove Hotel, the Resource Access Center, the Golden West Hotel and University Place Apartments. In the course of the conversations, a request was made of HAP to redevelop its University Place site into a permanent home for the county's Bridgeview program for persons with a serious mental illness. The purpose of the Bridgeview program is to provide safe, secure housing with 24-hour staffing and services for persons who because of a mental health disability are at high risk of homelessness.

As the project owner and developer, HAP is responsible for designing, financing and construction. A great deal of effort has been invested in designing a building that is well-suited to the Bridgeview program. With input from county staff and their newly selected Bridgeview contractor, Luke-Dorf, the team has created a project that will meet the specific needs of the program and its clients while balancing costs, durability, and other HAP criteria.

The existing building on the site is empty and salvage work has taken place in preparation for demolition in February 2009. Construction is scheduled to start in April 2009 with completion in April 2010. The new building will include 48 single room occupancy units to serve very low income residents who have a mental illness.

HAP and PDC have made significant financial commitments of \$758,000 and \$6,100,000 respectively. Additionally, HAP applied for and was awarded \$925,000 from the state's Department of Housing and Community Services. This program offer is a one-time-only request for \$250,000 in County General Funds.

#### **Program Justification**

Transitional housing is linked to the Basic Needs Priority. It provides vulnerable individuals with mental illness a safe place to stabilize, access treatment and community resources, and obtain a positive rental history, preparing them for successful transition into supported or independent permanent housing. University Place is a new building designed to provide an environment that promotes treatment and the development of skills necessary to maintain independent housing and a return to a productive role in the community.

### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Successful redevelopment of University Place	0	0	0	0
Outcome	This is a construction rather than a program offer	0	0	0	0

#### **Performance Measure - Description**

This program offer is for building redevelopment only.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$250,000	\$0
Subtotal: Direct Exps:	\$0	\$0	\$250,000	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$250,000	\$0
Program Total:	\$0		\$250,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

### **Explanation of Revenues**

County General Fund - \$250,000

## Significant Program Changes

Last year this program was:



## Program # 25062 - Mental Health Services for Adults

**Priority:** 

Basic Needs Existing Operating

Program Offer Type:

Related Programs: 25055A, 25056A, 25063A, 25065, 25078A, 25056B

**Program Characteristics:** 

## **Executive Summary**

This program offer describes the existing continuum of mental health care for adults. Psychiatric hospitalization treats persons at immediate risk to themselves or others. Respite services provide intervention when an individual's symptoms have risen beyond the scope of outpatient treatment. Outpatient treatment services provide a range of care matched to diagnosis and acuity to over 6,300 adults annually. Primarily funded by the Oregon Health Plan, this continuum addresses the needs of adults at emergent, urgent and routine levels of care.

## **Program Description**

This program offer contains three distinct service elements that contribute to a system of care for adults. 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.

Mental health respite services are a community-based approach to stabilize individuals whose symptoms have exceeded the scope of outpatient treatment. The goal is to prevent hospitalization through early intervention with short-term, intensive residential treatment. Respite care contains a range of treatment options, including medication management, clinical treatment and post-discharge transition planning. It has been defined as a best practice when used in a continuum of treatment services. MHASD funds six respite beds with an average stay of 5.47 days.

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

#### **Program Justification**

This program offer fits the Basic Living Needs priority by providing the appropriate level of mental health service to each Verity-enrolled adult in the county. It conserves resources by authorizing high-cost inpatient and residential treatment only for individuals whose mental illness has become acute, channeling individuals with less critical symptoms to outpatient care.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total adults receiving Outpatient mental health services <sup>1</sup>	6,395	6,432	6,378	6,378
Outcome	Percent of adults readmitted to inpatient within 30 days of discharge <sup>2</sup>	19.3%	19.5%	18.8%	18.8%

## **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.

Version 6/22/2009 s

County Human Services Karl Brimner

Lead Agency: Program Contact:

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	2009	2009	2010	2010
Contracts	\$0	\$15,250,000	\$0	\$17,791,280
Subtotal: Direct Exps:	\$0	\$15,250,000	\$0	\$17,791,280
Administration	\$0	\$536,384	\$0	\$631,353
Program Support	\$0	\$1,022,475	\$0	\$1,235,559
Subtotal: Other Exps:	\$0	\$1,558,859	\$0	\$1,866,912
Total GF/non-GF:	\$0	\$16,808,859	\$0	\$19,658,192
Program Total:	\$16,80	08,859	\$19,6	58,192
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$15,250,000	\$0	\$17,791,280
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$15,250,000	\$0	\$17,791,280

## **Explanation of Revenues**

OHP Premium - \$17,791,280

## Significant Program Changes

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



## Program # 25063A - MH Treatment & Medication for Uninsured/Indigent

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25055A, 25062, 25063B

## Lead Agency: Program Contact:

County Human Services Karl Brimner

Version 2/27/2009 s

**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 are at risk of hospitalization, 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 1,088 adults. This program offer reflects a reduction of 25% from current service levels to comply with County General Fund constraints. Purchasing this offer and 25063B will bring the program back to its current funding level.

## **Program Description**

These funds will support an array of services for the over 1,000 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 and health care through the Multnomah County Health Department or other clinics serving indigent clients.

## **Program Justification**

This program links directly to the Basic Needs priority by ensuring that individuals who are severely mentally ill have access to healthcare and medication necessary to remain stable and avoid a mental health crisis. The program prioritizes support and intensive case management to the most vulnerable individuals. The program fits the Poverty Elimination Framework by providing necessary social services and ensuring adequate mental health coverage.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total # of uninsured adults who received County funded outpatient services <sup>1</sup>	1,174	1,243	1,126	845
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	3	3	4	4
Output	Total # of individuals receiving County medication funding <sup>3</sup>	340	394	319	239

## **Performance Measure - Description**

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

<sup>2</sup> Total number of emergency holds divided by the number of unduplicated uninsured adults identified in item #1 (above) and #3 (below) - i.e., those receiving outpatient services (#1), plus those receiving medication services (#3), equals the denominator.

<sup>3</sup> Unduplicated uninsured adults who received at least one county funded prescription medication during the measurement period.

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$1,536,634	\$0	\$1,537,976	\$0
Subtotal: Direct Exps:	\$1,536,634	\$0	\$1,537,976	\$0
Administration	\$166,987	\$0	\$132,020	\$0
Program Support	\$370,037	\$0	\$289,823	\$0
Subtotal: Other Exps:	\$537,024	\$0	\$421,843	\$0
Total GF/non-GF:	\$2,073,658	\$0	\$1,959,819	\$0
Program Total:	\$2,07	3,658	\$1,95	9,819
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## Explanation of Revenues

County General Fund - \$1,537,976

## Significant Program Changes

**Significantly Changed** 

Last year this program was: #25063A, MH Treatment & Medication for Uninsured Indigent Individuals County General Funds (CGF)allocated to this program have been reduced by \$500,000, bringing total CGF funding to

\$1,537,976 from \$2,037,976. This ~ 25% reduction in funding will result in a projected decrease in the number of individuals receiving needed outpatient services (281 fewer)and medication funding (80 fewer).



## Program # 25063B - MH Treatment & Medication for Uninsured Indigent (Scale Up)

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25055A, 25062, 25063A

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

## **Program Characteristics:**

## **Executive Summary**

The Multnomah Treatment Fund prioritizes community based mental health services to severely mentally ill individuals released from hospitals and jail. This program offer restores the current service level by funding services for 361 additional adults. Purchasing 25063A and 25063B will restore the program to its current level of funding that provides 1,449 individuals with treatment services.

#### **Program Description**

These funds will support an array of services for 413 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 of 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 Oregon Health Plan (OHP) benefits and health care through the Multnomah County Health Department or other clinics serving indigent clients.

#### **Program Justification**

This program links directly to the Basic Needs priority by ensuring that individuals who are severely mentally ill have access to healthcare and medication necessary to remain stable and avoid a mental health crisis. The program prioritizes support and intensive case management to the most vulnerable individuals. The program fits the Poverty Elimination Framework by providing necessary social services and ensuring adequate mental health coverage.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total # of uninsured adults who received County funded outpatient services <sup>1</sup>	0	0	1,126	326
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	3	3	4	0
Output	Total # of individuals receiving County medication funding <sup>3</sup>	0	0	319	80

#### Performance Measure - Description

<sup>1</sup> Unduplicated uninsured adults with at least one County funded outpatient mental health service during the measurement period.

<sup>2</sup> Total number of emergency holds divided by the number of unduplicated uninsured adults contained in 1 and 3.
<sup>3</sup> Unduplicated uninsured adults who received at least one County funded prescription medication during the measurement

period.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$501,342	\$0	\$500,000	\$0
Subtotal: Direct Exps:	\$501,342	\$0	\$500,000	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$501,342	\$0	\$500,000	\$0
Program Total:	\$501	,342	\$500	),000
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund (MVRT) - \$500,000

Significant Program Changes

Significantly Changed

Last year this program was: #25063A, MH Treatment & Medication for Uninsured Indigent Individuals The addition of the \$500,000 CGF funding is projected to increase the number of individuals receiving needed outpatient services (281 additional) and medication (80 additional).



## Program # 25064A - Early Assessment and Support Alliance

# Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25055A, 25064B

## Lead Agency: Program Contact:

County Human Services Karl Brimner

Version 6/11/2009 s

**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, funded by the state, began offering services in March 2008. The State General Funds that pay for this program were reduced by 90% in the Governor's Recommended Budget. This program offer reflects the remaining 10%. Funding at this level is not sufficient to run the program so it will be used to transition existing clients to other resources and close the program.

## **Program Description**

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. 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.

This program, when fully funded by the state, consists of a multidisciplinary team that includes a psychiatrist, a nurse, a vocational and occupational therapist and mental health consultants. The team provides a full range of mental health and social services. Due to a 90% cut in State General Funds that pay for this program, the remaining 10% will be used to retain one staff to transition existing clients to other community resources and close the program.

## **Program Justification**

The EASA program is based on preventive psychiatric care methods that have proven successful nationally and regionally. For example, the Mid-Valley Behavioral Care Network (MVBCN) in Marion County, Oregon has implemented a highly successful early psychosis intervention program upon which our own EASA program is modeled. By providing early diagnosis and intervention, this innovative program allows the Mental Health and Addiction Services Division to address the needs of young persons with a mental illness before they become acute and require more expensive care, which is a Basic Needs strategy.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
•	Individuals currently enrolled who will be transitioned to other resources <sup>1</sup>	6	85	60	60
	Total individuals successfully transitioned to community-based resources	0.0%	0.0%	0.0%	100.0%

## **Performance Measure - Description**

<sup>1</sup> Program began operating in March 2008. This output for next year is only to transition the current clients to other services, not to continue to serve them.

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

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$73,140	\$0	\$602,473
Materials & Supplies	\$0	\$1,725	\$0	\$2,376
Internal Services	\$0	\$2,542	\$0	\$0
Subtotal: Direct Exps:	\$0	\$77,407	\$0	\$604,849
Administration	\$0	\$29,794	\$0	\$3,238
Program Support	\$0	\$26,205	\$0	\$770
Subtotal: Other Exps:	\$0	\$55,999	\$0	\$4,008
Total GF/non-GF:	\$0	\$133,406	\$0	\$608,857
Program Total:	\$133	3,406	\$608	3,857
Program FTE	0.00	0.67	0.00	6.20
Program Revenues				
Intergovernmental	\$0	\$77,407	\$0	\$604,849
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$77,407	\$0	\$604,849

## **Explanation of Revenues**

State Mental Health Grant Non-Res Adult - \$411,757 OHP Premium - \$190,716

## Significant Program Changes

Last year this program was: #25064, Early Psychosis Intervention Program

Due to a 90% reduction in State General Fund 20 in the Governor's Recommended Budget, the Early Assessment and Support Alliance program cannot be sustained. This program offer funds a staff person (Mental Health Consultant) long enough to transition existing clients into other community resources and close the program and eliminates 1.0 FTE Program Manager 1 and the remaining 6 staff.

Significantly Changed



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

**Priority:** 

Basic Needs

Existing Operating

## Program Offer Type: Related Programs:

**Program Characteristics:** 

## **Executive Summary**

The county's managed mental health organization, Verity, is required to pay a 5.5% 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.

## **Program Justification**

The Provider Tax links to the Basic Needs priority as well as the Poverty Elimination Framework by providing access to care for more people in need. Without insurance to cover outpatient mental health treatment, mentally ill individuals are more likely to experience a psychiatric crisis that requires them to be hospitalized. The provider tax helps provide OHP insurance coverage to additional county residents and, by making it possible to obtain treatment for mental health issues, prevents the use of more expensive levels of care such as inpatient hospitalization.

## Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description** 

N/A

## Version 3/02/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

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
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$1,967,067	\$0	\$2,188,844
Subtotal: Direct Exps:	\$0	\$1,967,067	\$0	\$2,188,844
Administration	\$0	\$68,581	\$0	\$75,674
Program Support	\$0	\$131,626	\$0	\$150,307
Subtotal: Other Exps:	\$0	\$200,207	\$0	\$225,981
Total GF/non-GF:	\$0	\$2,167,274	\$0	\$2,414,825
Program Total:	\$2,16	57,274	\$2,41	4,825
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$1,967,067	\$0	\$2,188,844
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$1,967,067	\$0	\$2,188,844

## **Explanation of Revenues**

OHP Premium - \$2,188,844

## Significant Program Changes

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



## Program # 25067 - Community Based MH Services for Children & Families

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25076A, 25078A

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 6/22/2009 s

**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 5,225 children annually, to a comprehensive outpatient system that successfully maintains over 4,200 children in the community and to the Intensive Community Based Treatment program that has successfully reduced the average length of stay in psychiatric residential facilities.

#### **Program Description**

This program offer provides a continuum of services 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), Intensive In-Home and Community Mental Health Services for Children, and the Intensive Children's Services Care Coordination Team. All models strive to ensure community-based, family-centered services.

Services include counseling for victimized children and their families, Incredible Years parent groups, early childhood and school aged 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, schools, Head Start programs, Developmental Disabilities, the juvenile justice system, and physical healthcare providers, to ensure the best outcome for children and youth.

Services offered are culturally competent and promote the development of healthy attachments and positive parenting practices. 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.

## **Program Justification**

These services link to the Basic Living Needs priority. The prevention and early intervention provided by the Early Childhood and Head Start Program addresses needs before they become more acute. The Child Abuse Mental Health program reduces trauma of vulnerable children and their families. Outpatient Services delivers a family-centered model that leads to long-term stability for children and parents. Intensive MH Treatment intervenes in crisis situations to keep children at home, in school, and out of trouble. The Care Coordination Team plays a key role in service coordination for these children. 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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total children receiving outpatient services <sup>1</sup>	4,317	4,240	4,261	4,261
Outcome	Percent children with improved behavior in school <sup>2</sup>	75.2%	75.0%	79.1%	79.1%
Output	Total children receiving early childhood or child abuse services <sup>3</sup>	4,996	5,000	5,225	5,225
Quality	Percent parents satisfied with outcomes after mental health services *4	63.8%	57.2%	64.0%	64.0%

## **Performance Measure - Description**

Measure Changed

<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 mental health CPMS closed case data.

<sup>3</sup> Number of children and families receiving Early Childhood Prevention/Intervention Services or Child Abuse services through CARES program.

\*4 Survey responses of parents of children receiving mental health services funded by Verity and Multnomah Treatment Fund.

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
Program Expenses	2009	2009	2010	2010
Personnel	\$1,124,993	\$1,258,956	\$1,174,341	\$1,378,979
Contracts	\$128,750	\$10,786,109	\$128,750	\$10,920,764
Materials & Supplies	\$21,408	\$21,926	\$21,408	\$21,926
Internal Services	\$161,820	\$118,419	\$148,970	\$264,348
Subtotal: Direct Exps:	\$1,436,971	\$12,185,410	\$1,473,469	\$12,586,017
Administration	\$117,742	\$414,699	\$209,019	\$458,670
Program Support	\$260,912	\$745,188	\$277,667	\$816,372
Subtotal: Other Exps:	\$378,654	\$1,159,887	\$486,686	\$1,275,042
Total GF/non-GF:	\$1,815,625	\$13,345,297	\$1,960,155	\$13,861,059
Program Total:	\$15,10	60,922	\$15,82	21,214
Program FTE	11.85	13.30	10.18	14.07
Program Revenues				
Intergovernmental	\$0	\$12,185,410	\$0	\$12,586,017
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$12,185,410	\$0	\$12,586,017

## Explanation of Revenues

OHP Premium - \$11,332,421 FQHC - \$142,973 Title XIX/OMAP - \$285,764 Head Start Contracts - \$118,001 FFS Insurance Rcpts - \$100,000 State Mental Health Grant Child & Adol MHS - \$606,858 County General Fund - \$1,473,469

## Significant Program Changes

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



## Program # 25075 - School Based Mental Health

**Priority:** 

Basic Needs

Existing Operating

Program Offer Type: Related Programs:

Program Characteristics: Measure 5 Education

## **Executive Summary**

School Based Mental Health is an essential component of the mental health system of care for children and families. This program serves 825 children and teens with serious mental health disorders and their families received treatment in more than 67 school settings throughout the county. Mental health professionals provide culturally competent, family focused, evidence based treatment. Children and teens receive service who would otherwise be at risk of hospitalization or other restrictive and costly services. Additional children with emotional and behavioral needs are helped through 12,722 preventative consultation contacts with school based health center staff and others that averted need for higher level of care.

## **Program Description**

Mental Health treatment is provided in schools to decrease barriers such as stigma, cost and transportation for 818 underserved families. This program reaches youth who have not accessed services in a mental health center and 48% of the children served were children of color. About 96% of the children served had no insurance or were covered by the Oregon Health Plan. School based mental health consultants provide crisis intervention, mental health assessments, individual, group and family treatment and clinical case management as well as interventions with schools to help manage a child's mental health disorder. Consultation on children's mental health is provided to school and school based health clinic staff as well as community providers. Mental health consultants are co-located in School Based Health Clinics when possible to provide seamless services. About 60% of the families receive linkage services of mental health screenings and referral to community mental health centers.

## **Program Justification**

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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total unduplicated children receiving mental health services.	818	800	800	825
Outcome	Percent of children receiving services showing improved school behavior <sup>1</sup>	82.2%	80.0%	80.0%	80.0%
Output	Total number of additional prevention, consultation & outreach contacts made.	12,722	12,500	12,500	12,500
Output	Percent of children receiving services showing improved school attendance <sup>2</sup>	72.6%	75.0%	80.0%	80.0%

## **Performance Measure - Description**

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

<sup>2</sup> Method for calculating % improved attendance excludes "unknown" CPMS termination in denominator. Clinicians will be directed to stop using this termination status code because it increases variability in scores year to year.

## Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

Revenue Contracts exist with Parkrose School District for \$10,000; Centennial School District for \$75,000; and Multnomah Education Service District has a two year revenue contract (2008-09) for \$180,595. All revenue contracts have expectations for School Based Mental Health Consultant FTE's to be provided. Oregon Health Sciences University contract for \$48,353 ends 3/09.

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$284,551	\$983,287	\$176,344	\$1,068,664
Materials & Supplies	\$0	\$24,516	\$3,620	\$20,896
Internal Services	\$11,533	\$143,860	\$111,534	\$102,197
Subtotal: Direct Exps:	\$296,084	\$1,151,663	\$291,498	\$1,191,757
Administration	\$24,261	\$30,943	\$25,022	\$49,853
Program Support	\$53,760	\$13,299	\$54,931	\$11,858
Subtotal: Other Exps:	\$78,021	\$44,242	\$79,953	\$61,711
Total GF/non-GF:	\$374,105	\$1,195,905	\$371,451	\$1,253,468
Program Total:	\$1,57	<b>'0,010</b>	\$1,624,919	
Program FTE	2.99	10.30	1.73	10.81
Program Revenues				
Intergovernmental	\$0	\$1,151,663	\$0	\$1,191,757
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$1,151,663	\$0	\$1,191,757

## Explanation of Revenues

Varies Small Grants - \$507,000 State Mental Health Grant Child & Adol MHS - \$684,757 County General Fund - \$291,498

Significant Program Changes

Last year this program was: #25076, School Based Mental Health Services In FY10 this program offer reflects the elimination of .25FTE On Call Mental Health Consultant.



## Program # 25078A - Culturally Specific Mental Health Services

Priority:EProgram Offer Type:ERelated Programs:2

Basic Needs Existing Operating 25062, 25067

## Lead Agency: Program Contact:

County Human Services Karl Brimner

## **Program Characteristics:**

## **Executive Summary**

The Culturally Specific Mental Health Services program directs funding resources to five traditionally underserved communities that have faced significant barriers to accessing mental health treatment serving 383 individuals. Culturally specific services ensure that people of color receive culturally specific services based in their community culture and traditions and accessable in their language. Populations of people of color are under represented in traditional mental health services and many are over represented in criminal justice systems.

#### **Program Description**

This program offer funds mental health services for a total of 383 individuals from five traditionally underserved communities: Eastern European, African-American, Asian-American, Latino-American, and Native American. Mental health issues are particularly pressing for several of these communities. For example, Client Process Monitoring System (CPMS) 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 higher 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.

Culturally specific services address mental health problems with early access to treatment, mitigating the potential need for expensive hospital, residential care, or crisis services as well as reducing the risk of inappropriate incarceration or homelessness.

The county contracts for culturally specific services with mental health providers that understand community norms and have established a relationship of trust with the ethnic communities they serve. These providers offer a wide variety of mental health services in a supportive and culturally competent setting. Services include clinical evaluation and assessment, case and crisis management, transition planning, medication management, and linkage to community support systems.

## **Program Justification**

Culturally Specific Mental Health Services eliminates barriers to mental health treatment for underserved communities. Barriers are overcome by ensuring adequate funding for culturally competent programs. When individuals feel that providers are familiar with their culture they are more likely to access and engage in treatment which could prevent a mental health crisis. This program is aligned with the Poverty Elimination Framework by providing adequate healthcare to underserved individuals and families. By providing competent and coordinated healthcare services for children it is also aligned with the Early Childhood Framework.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total Culturally Diverse Individuals Receiving Services	0	383	383	383
Outcome	Culturally Specific Persons Served per 1000 Culturally Diverse in Population <sup>2</sup>	0	2	2	2

## **Performance Measure - Description**

<sup>1</sup> All persons receiving publicly funded mental health services are entered into State CPMS data regardlesss of payor. Total count served is taken from CPMS.

<sup>2</sup> Service Rate Per 1000 Calculation Numerator: Total unduplicated culturally diverse individuals served.

Denominator: Total county census for similar groups for 2007 taken from US Census Data. The outputs and outcomes above reflect the projected decrease in funding shown in the significant program changes section below.

Version 2/27/2009 s

## N/A

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$1,266,900	\$0	\$1,266,900	\$0
Subtotal: Direct Exps:	\$1,266,900	\$0	\$1,266,900	\$0
Administration	\$103,807	\$0	\$108,751	\$0
Program Support	\$230,032	\$0	\$238,741	\$0
Subtotal: Other Exps:	\$333,839	\$0	\$347,492	\$0
Total GF/non-GF:	\$1,600,739	\$0	\$1,614,392	\$0
Program Total:	\$1,60	0,739	\$1,614,392	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund - \$1,266,900

Significant Program Changes

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



## Program # 25080A - Adult Addictions Treatment Continuum

**Priority:** Program Offer Type:

**Basic Needs** Existing Operating **Related Programs:** 25080B

## Lead Agency: **Program Contact:**

**County Human Services** Karl Brimner

Version 3/31/2009 s

**Program Characteristics:** 

## **Executive Summary**

The 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 & multidiagnosed, homeless clients. The continuum will serve about 2,500 clients next year, down from about 5,500 in past years. Research shows that Oregon taxpayers save \$5.60 for every treatment dollar spent. Operating the system at its current capacity will require purchasing this offer and 25080B.

## **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 multilingual staff. Outpatient treatment allows a client to work, go to school, attend job training, socialize, and otherwise carry on a normal life. 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, usually related to the severity and length of their addiction, as well as risk factors like chronic unemployment and housing problems.

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 activites for clients and their families, utilizing a community sited 'clubhouse' model.

#### **Program Justification**

This program promotes healthy behaviors and links directly to the Basic Needs Priority by offering access to addictions treatment that addresses the negative consequences of the use of alcohol and other drugs. Successful completion of treatment has been repeatedly shown to help move people toward greater self-sufficiency by increasing their employability/income and reducing their criminal activities. This program moves a vulnerable population away from a cycle of chronic problems and crises toward greater self-sufficiency in obtaining permanent housing, increased income, adequate food, and health care. It further assists the greater economy, as research has shown a savings of \$5.60 to Oregon taxpayers for every treatment dollar spent. It also links to the 10-Year Plan to End Homelessness by influencing employment and earnings.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number served in treatment	5,800	4,500	5,500	2,500
Outcome	Successful completions in treatment <sup>1</sup>	60.0%	65.0%	60.0%	60.0%

## **Performance Measure - Description**

<sup>1</sup> 'Successful completion of treatment' is defined as achieving at least 2/3 of treatment plan goals and having 30 days sobriety.

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, 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
Program Expenses	2009	2009	2010	2010
Contracts	\$2,554,840	\$1,665,776	\$2,554,874	\$2,388,117
Subtotal: Direct Exps:	\$2,554,840	\$1,665,776	\$2,554,874	\$2,388,117
Administration	\$209,338	\$202,899	\$223,697	\$195,288
Program Support	\$463,885	\$87,205	\$491,082	\$23,763
Subtotal: Other Exps:	\$673,223	\$290,104	\$714,779	\$219,051
Total GF/non-GF:	\$3,228,063	\$1,955,880	\$3,269,653	\$2,607,168
Program Total:	\$5,18	3,943	\$5,876,821	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$1,665,776	\$0	\$2,388,117
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$1,665,776	\$0	\$2,388,117

## Explanation of Revenues

Local Beer & Wine Tax - \$156,383 State Mental Health Grant Drug Residential Care - \$301,563 State Mental Health Grant Continuum of Care - \$878,971 State Mental Health Grant Res Capacity Svcs - \$1,051,200 County General Fund - \$2,554,874

## Significant Program Changes

**Significantly Changed** 

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

This continuum of care program offer is purchasing only about 40% of the services purchased last year, and serving about 40% of the clients served, due to cuts in the Governor's Budget. Most of the reduction was to residential services and to intensive outpatient services for DHS involved parents.



#### Program # 25080C - Adult Addictions Treatment - SGF restoration assumption

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25080A, 25080B

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

**Program Characteristics:** 

## **Executive Summary**

This offer assumes state funding at 50% of current service level for adult residential addictions treatment system, which is a core component of the treatment continuum. This program offer assumes a State Joint Ways and Means budget that funds 76 residential beds to stabilize the system and restores funding for a program manager position responsible for oversight of the addictions services program for DCHS. Purchasing program offers 25080A and 25080C would fund 50% of the current service level for both residential treatment and outpatient services.

#### **Program Description**

Adult addiction treatment is a critical component in a system of care for adults. Individuals with serious levels of addiction and other life issues often require residential treatment in order to start recovery. 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 who need this level of care often have multiple failures in outpatient treatment, usually related to the severity and length of their addiction. 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. This program would provide 76 residential beds for adults with multiple addiction related issues. This is 50% of the current system capacity.

## **Program Justification**

This program promotes healthy behaviors and links directly to the Basic Needs Priority by offering access to addictions treatment that addresses the negative consequences of the use of alcohol and other drugs. Successful completion of treatment has been repeatedly shown to help move people toward greater self-sufficiency by increasing their employability/income and reducing their criminal activities. This program moves a vulnerable population away from a cycle of chronic problems and crises toward greater self-sufficiency in obtaining permanent housing, increased income, adequate food, and health care. It further assists the greater economy, as research has shown a savings of \$5.60 to Oregon taxpayers for every treatment dollar spent. It also links to the 10-Year Plan to End Homelessness by influencing employment and earnings.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
	Number served in treatment	300	300	300	300
Outcome	Successful completions in treatment <sup>1</sup>	60.0%	65.0%	60.0%	60.0%

#### **Performance Measure - Description**

The numbers in 'Previous Year', 'Current Year', etc are estimates based on the portion of the treatment system this program offer purchases.

<sup>1</sup> 'Successful completion of treatment' is defined as achieving at least 2/3 of treatment plan goals and having 30 days sobriety.

## Revenue/Expense Detail

	Proposed General	Proposed Other	Proposed General	Proposed Other
	Fund	Funds	Fund	Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$0	\$0	\$153,715
Contracts	\$0	\$0	\$0	\$2,016,367
Subtotal: Direct Exps:	\$0	\$0	\$0	\$2,170,082
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$0	\$2,170,082
Program Total:	\$	0	\$2,17	0,082
Program FTE	0.00	0.00	0.00	1.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$2,170,082
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$2,170,082

## Explanation of Revenues

## Significant Program Changes

## Last year this program was:

This offer assumes state funding at 50% of current service level for adult residential addictions treatment system, which is a core component of the treatment continuum.



#### Program # 25085 - Addiction Services Gambling Treatment and Prevention

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

**Related Programs:** 

**Program Characteristics:** 

## **Executive Summary**

Gambling addiction treatment uses evidence-based treatment practices in an outpatient setting to provide treatment to persons diagnosed with problem or pathological gambling. The county's treatment providers treat approximately 550 gamblers and their family members. Countywide data in Fiscal 2007/08 shows that problem gamblers and family members seeking treatment can access services in less than five days 70% 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. It incorporates prevention, harm reduction and multiple levels of treatment by placing emphasis on quality of life issues, for the gambler, families, 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. In FY 07/08 457 gamblers enrolled in treatment (105% of projection). As noted, family participation is important and 80 plus family members enrolled in treatment in FY 07/08.

## **Program Justification**

Except for one Oregon county, Multnomah County has the highest per capita (18 years and older) lottery sales statewide. Approximately 74% of the total sales per capita (\$650.02 annually) come from video poker. While 74% of Lottery sales are from video poker, approximately 78% of the gamblers in treatment report video poker as their primary game of choice. 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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
•	Gamblers and family members accessing treatment annually	537	545	540	550
Outcome	Gambler successful completion rate	24.0%	39.0%	27.0%	27.0%
Outcome		0	0	0	0
Efficiency		0	0	0	0

## **Performance Measure - Description**

'Gamblers accessing treatment annually' means the number of problem and/or pathological gamblers completing enrollment and entering treatment annually. 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.

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 2/27/2009 s

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
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$852,190	\$0	\$855,000
Subtotal: Direct Exps:	\$0	\$852,190	\$0	\$855,000
Administration	\$0	\$22,897	\$0	\$35,766
Program Support	\$0	\$9,841	\$0	\$8,508
Subtotal: Other Exps:	\$0	\$32,738	\$0	\$44,274
Total GF/non-GF:	\$0	\$884,928	\$0	\$899,274
Program Total:	\$884	l,928	\$899	9,274
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$852,190	\$0	\$855,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$852,190	\$0	\$855,000

## Explanation of Revenues

State Mental Health Grant Problem Gambling Prev - \$100,000 State Mental Health Grant Outpatient GambTx Svcs - \$700,000 State Mental Health Grant Prob Gamb Tx Enhance - \$55,000

## Significant Program Changes

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



## Program # 25086 - Addiction Services Alcohol and Drug Prevention

**Priority:** 

Basic Needs

Existing Operating

## Lead Agency: Program Contact:

County Human Services Karl Brimner

Version 2/27/2009 s

Program Offer Type: Related Programs:

**Program Characteristics:** 

## **Executive Summary**

The alcohol and drug prevention program provides services to more than 700 at-risk children and families with an array of services. These include a nationally-recognized evidence-based parenting program, structured after-school activities (homework assistance, tutoring and home visits) and culturally-specific youth leadership activities. These programs promote school success, family bonding, improved parenting skills and youth life skills. The aim is to reduce youth substance abuse, school failure and juvenile crime.

## **Program Description**

The nationally-recognized parenting program, Strengthening Families 10-14 (SFP 10-14), provides nine sessions to 300 families with children ages 10-14. This program offer will fund SFP 10-14 sessions in public housing communities as well as train facilitators from faith groups and volunteer organizations to provide sessions at a variety of family-friendly locations, such as local schools and community centers. SFP 10-14 is an evidence-based program that has been shown to cut alcohol, tobacco and drug use in half, and reduce youth methamphetamine use by 90%.

The Structured After-School Program for public housing residents, a collaboration with the Housing Authority of Portland (HAP) and the Portland Children's Investment Fund, provides after-school clubs offering on-site homework help, socializing and skill building activities to 400 public housing youth. The services at HAP housing sites include tutoring, mentoring and family-support home visits. Most of the children served by the structured after-school program are ages 8-12.

In addition, two smaller programs are supported by this offer. The Asian teen leadership program provides youth leader community service projects. The Latino program funds a youth soccer team promoting parent involvement and other community service projects.

## **Program Justification**

The addictions prevention program supports Basic Needs Strategy 4 (promoting healthy behaviors and addressing alcohol & drug use) by providing prevention services for children and families at high risk for substance abuse, school failure and juvenile justice problems. The program links to the School Aged Policy Framework by providing supports for high-risk children and families and fostering school success. Strengthening Families 10-14 addresses such problem behaviors as: alcohol use, marijuana use, aggressive behavior, cigarette use, and conduct disorders.

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

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Youth served at public housing sites <sup>1</sup>	253	400	400	400
	Core group <sup>2</sup> youth w/ improved behavior based on parent/teacher observation	82.0%	75.0%	75.0%	75.0%
Outcome	Core group youth w/ improved academic achievement	90.0%	75.0%	75.0%	75.0%
Output	Total services <sup>3</sup> delivered (multiple services to individuals)	9,129	7,000	9,000	7,000

## **Performance Measure - Description**

<sup>1</sup>Public Housing measures are for the collaborative after-school program serving youth in public housing, including all afterschool activities. <sup>2</sup> Intensive core group services are provided to an average of 10 families at six sites. Outcomes of improved behavior (i.e. less disruptive, better attendance, fewer suspensions) and improved academic achievement are good predictors of reduced future substance abuse. <sup>3</sup> Total services delivered reflects entire prevention program and is not a count of individuals.

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
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$309,261	\$0	\$319,259
Subtotal: Direct Exps:	\$0	\$309,261	\$0	\$319,259
Administration	\$0	\$5,757	\$0	\$13,355
Program Support	\$0	\$2,474	\$0	\$3,177
Subtotal: Other Exps:	\$0	\$8,231	\$0	\$16,532
Total GF/non-GF:	\$0	\$317,492	\$0	\$335,791
Program Total:	\$317	7,492	\$335	5,791
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$309,261	\$0	\$319,259
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$309,261	\$0	\$319,259

## **Explanation of Revenues**

State Mental Health Grant Prev & Early Interven - \$319,259

## Significant Program Changes

Last year this program was: #25086, Addiction Services Alcohol and Drug Prevention In FY10, this program offer reflets services provided in FY09 both program offers # 25086, Addiction Services Alcohol and Drug Prevention and # 25095A, Strengthening Families – Addiction Prevention.



## Program # 25088A - Coordinated Diversion for Persons with Mental Illness

**Basic Needs** 

Priority:

Program Offer Type: Existing Operating Related Programs: 25088B Lead Agency: Program Contact: County Human Services Karl Brimner

Version 6/11/2009 s

**Program Characteristics:** 

## **Executive Summary**

This is a reduced service level offer, purchasing only Community Court services. This offer combines four Coordinated Diversion programs. Four teams of mental health professionals work with Community Court, Mental Health Court, Aid and Assist/Treat Until Fit Project and Intensive Transition Services (ITP). All four 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 Project and Mental Health Court focus on jail diversion. Staff with the Aid and Assist/Treat Until Fit Program and the Intensive Transition Services (ITP) focus on avoiding or decreasing days of unnecessary psychiatric hospitalizations. In FY07-08 Community Court served 1,066 clients, Aid and Assist/Treat Until Fit served 51 clients, Mental Health Court and ITP services were initiated in FY08-09. Purchasing 25088B will restore all programs to current service levels.

## **Program Description**

All 4 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 in FY08-09. Intensive Treatment Program (ITP) provides time-limited case management and integrated mental health and substance abuse treatment, as well as assistance with housing, financial and medical entitlements, and connection to community resources. ITP initiated services in FY08-09.

The Aid and Assist/Treat Until Fit Program is a pilot project with Marion and Lane Counties to increase diversion from the criminal justice system for persons charged with misdemeanors and ordered to undergo evaluation/restoration at the State Hospital. Staff provide evaluation of mental status and basic needs, time-limited case management and coordination of treatment services, housing, financial and medical entitlements, and social services. FY07-08 staff served 51 clients.

## **Program Justification**

The four diversion programs fit the Basic Needs priority by addressing the needs of residents with a mental illness who can be diverted away from jail and/or hospitals 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 hospital.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of participants in Community Court <sup>1</sup>	0	0	1,050	1,050
Outcome	% of participants who are in good standing or have successfully completed <sup>2</sup>	55.0%	0.0%	55.0%	55.0%

## **Performance Measure - Description**

Measure Changed

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

<sup>2</sup> The outcome measures staff effectiveness in diversion of clients from jail and hospital systems.

No legal requirements

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$195,891	\$44,544	\$250,906	\$532,922
Contracts	\$0	\$11,950	\$0	\$0
Materials & Supplies	\$4,106	\$994	\$0	\$4,316
Internal Services	\$31,262	\$8,932	\$0	\$47,722
Subtotal: Direct Exps:	\$231,259	\$66,420	\$250,906	\$584,960
Administration	\$18,949	\$26,410	\$21,538	\$4,112
Program Support	\$41,990	\$11,351	\$47,282	\$66,238
Subtotal: Other Exps:	\$60,939	\$37,761	\$68,820	\$70,350
Total GF/non-GF:	\$292,198	\$104,181	\$319,726	\$655,310
Program Total:	\$396	5,379	\$975	5,036
Program FTE	2.00	0.40	2.38	5.62
Program Revenues				
Intergovernmental	\$0	\$66,420	\$0	\$584,960
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$66,420	\$0	\$584,960

## **Explanation of Revenues**

State Mental Health Grant Non-Res Adult - \$559,344 State Mental Health Grant Local Admin - \$25,616 County General Fund - \$250,906

## Significant Program Changes

**Significantly Changed** 

Last year this program was: #25088, Coordinated Diversion for Persons with Mental Illness Last year, this offer included the Mental Health Court, Aid and Assist/Treat Until Fit Program and the Critical Time Intervention Program now referred to as Intensive Transition Services. These programs are being cut due to 90% reductions in the Governors proposed FY09-10 budget. This reduction in funding will result in the closure of the three programs.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.



## Program # 25090 - Addictions Detoxification and Post-Detoxification Housing

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

**Related Programs:** 

#### **Program Characteristics:**

## **Executive Summary**

Detoxification, a medically monitored inpatient service, is the primary entrance point into addiction services for many severely addicted and low-income persons. The program serves over 2,500 persons annually with a successful completion rate of 75%. Supportive housing is available for homeless addicts who have completed detoxification and are continuing treatment. Housing support specialists assist access to key services that promote health, recovery, permanent housing stability and self-sufficiency.

## **Program Description**

Alcohol and drug detoxification medically stabilizes a highly vulnerable and diverse client population and prepares individuals for further treatment. Detoxification beds provide services 24 hours a day, seven days a week. All clients receive prescribed medication to ease withdrawal symptoms and acupuncture to reduce the physiological stress during detoxification so that they are more likely to complete the process. The program includes an integrated medical clinic with primary care and dualdiagnoses services. Detoxification is provided in a culturally competent manner that includes a variety of services: counseling and case management, health care services (physical, mental, and residential/outpatient addiction treatment), housing resources (permanent housing, rent assistance, eviction prevention), food and transportation, and economic independence (job training, employment referrals, benefits eligibility screening). There are approximately 2,500 admissions to detoxification annually with an average successful completion rate of 75%.

After detoxification, homeless clients who are entering outpatient treatment are referred to supportive housing services. Each of the 50 supportive housing units can house two to three clients per year (three to four month stays). The supportive housing increases post-detoxification treatment retention rates and promotes recovery. 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. Clients are helped by housing support specialists to access key services that promote health, recovery, permanent housing stability, and self-sufficiency. Benefiting from clinical and housing support, clients move from active addiction, through treatment and into the recovery world; and from homelessness, through supportive housing and int

#### **Program Justification**

Detoxification and supportive housing are two vital steps to working towards long-term recovery and stability. This program links to the Basic Needs priority by addressing the addiction to alcohol and other drugs in a highly vulnerable and diverse client population. This program connects to the Poverty Framework by addressing the healthcare and employment needs of adults. It also links to the 10-Year Plan To End Homelessness by connecting vulnerable persons completing detoxification to the treatment, health care, housing, and other services needed to resolve their homelessness. Supportive housing (\$16 per unit per day) is an evidence based, low cost resource when compared to inpatient hospitalization (\$700 or more per day) or adult residential treatment (\$106 per client per day) and we can provide less restrictive and less expensive outpatient treatment services while the individual is in supportive housing.

#### **Performance Measures**

Measure	Deimony Measure	Previous Year Actual		Current Year Estimate	Next Year Offer
Туре	Primary Measure	(FY07-08)	(FY08-09)	(FY08-09)	(FY09-10)
Output	Number of admissions annually to detoxification <sup>1</sup>	2,065	2,530	2,314	2,530
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	97.0%	91.0%	97.0%	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.

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
Program Expenses	2009	2009	2010	2010
Contracts	\$482,376	\$2,086,706	\$682,376	\$1,878,359
Subtotal: Direct Exps:	\$482,376	\$2,086,706	\$682,376	\$1,878,359
Administration	\$55,912	\$50,692	\$59,747	\$78,575
Program Support	\$123,900	\$21,787	\$131,162	\$18,690
Subtotal: Other Exps:	\$179,812	\$72,479	\$190,909	\$97,265
Total GF/non-GF:	\$662,188	\$2,159,185	\$873,285	\$1,975,624
Program Total:	\$2,82	1,373	\$2,84	8,909
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$2,086,706	\$0	\$1,878,359
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$2,086,706	\$0	\$1,878,359

## Explanation of Revenues

State Mental Health Grant - \$1,459,442 County General Funds - \$696,023 Local 2145 Beer & Wine Tax - \$405,270

## Significant Program Changes

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

The FY09 Adopted Budget for program offer #25090 included projected revenue of \$100,000 each from Washington and Clackamas counties. When it was clear that these funds would not be received, in August of 2008, the Board of County Commissioners increased County General Fund support of this program offer by \$200,000 to keep services at the current level.



#### Program # 25091 - Sobering

**Priority:** 

**Basic Needs** Program Offer Type: Existing Operating

**Related Programs:** 

**Program Characteristics:** 

## **Executive Summary**

The Sobering Station provides a safe, secure holding environment for intoxicated individuals to "sober up." Individuals are counseled by staff about options for alcohol and drug treatment and encouraged to seek further care. This progam has more than 11,000 admissions annually. Motivated individuals are often able to enter the detoxification program, leading to further treatment. Sobering is a critical public safety function picking up intoxicated individuals off the streets.

## **Program Description**

The Sobering program has two goals: 1) provide a medically monitored environment in which intoxicated individuals can "sober up" and regain their functionality, and 2) provide a point of intervention for the chemically dependent. In support of these goals, staff perform a wide range of duties that include initial evaluation by an Emergency Medical Technician (EMT), monitoring, intervention and pre-release EMT evaluation. The staff provides information about chemical dependency and counsels clients to enter into recovery and treatment programs. The Hooper Center 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 average length of stay is 5.4 hours. There are over 11,000 admissions to sobering annually.

## **Program Justification**

The Sobering Station directly links to the Basic Living Needs Priority by providing intervention into the lives of publicly intoxicated people brought to the program under civil hold by law enforcement, CHIERS or as voluntary admissions. The Sobering program serves both a public safety function to provide a medically monitored environment in which public inebriates can become sober while protected from abuse and neglect, and a behavioral health function to provide a point of intervention for the chemically dependent. Sobering directly connects to both the Poverty Framework and the 10-year Plan to End Homelessness by providing persons a link to services that can help them to meet basic health and safety needs and the opportunity to break the cycle of homelessness. The program is a tremendous benefit to city police by saving them approximately 900 additional bookings (and associated costs) per month.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
	Total Admissions	11,000	` '		```
Outcome	Percentage of clients that successfully discharge <sup>1</sup>	99.0%	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 two years ago.) b. clients are cognizant of surroundings and no longer in immediate danger of harm to self or others.

## Version 6/11/2009 s

Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$592,812	\$0	\$468,812	\$0
Subtotal: Direct Exps:	\$592,812	\$0	\$468,812	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$592,812	\$0	\$468,812	\$0
Program Total:	\$592	2,812	\$468	3,812
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund (MVRT)- \$468,812

Significant Program Changes

Last year this program was: #25091A, Sobering County General Fund was reduced by \$289,000 based on City of Portland's funding committment to the program.



## Program # 25094A - Family and Youth Addictions Treatment Continuum

**Basic Needs** 

25094B

Existing Operating

Priority:

Program Offer Type:

**Related Programs:** 

Program Characteristics:

## Executive Summary

This program provides youth residential addiction treatment beds, and also provides housing (alcohol and drug free) to assist families with children that are recovering from substance abuse. Annually, about 40 youth will receive residential alcohol and drug treatment and approximately 100 families will receive some combination of direct rent assistance and/or housing coordination services. The outpatient portion of this treatment continuum, including two culturally specific programs for youth reduced due to state Governer's budget cuts, has been removed and is contained in offer 25094B.

## **Program Description**

This system of services consists of residential treatment and housing support for drug and alcohol affected youth and their families. The residential treatment addresses the addiction health care needs of some of the most vulnerable and at-risk county adolescents. The Family Housing Assistance Services assists the families in developing skills to regain their physical and mental health, maintain affordable housing and gain employment. Rent assistance in the form of cash payments made on behalf of individuals recovering from substance abuse is available to cover all or a portion of the monthly rent and utilities. Housing coordination services assists individuals and their families recovering from substance abuse to maintain stable and drug free housing. Additionally, housing coordination services assists clients in forming education and/or employment development plans and maintaining family stability and continued recovery.

Note: about half the residential funds in this offer are from County General Fund, (which can buy about 5 treatment beds locally), are sent to the State Addictions and Mental Health Divison where they are matched with other funding and recontracted to our county provider for nine beds annually. The rest of the residential funds are from state service element funding and are directly contracted with local providers for an additional five beds.

## **Program Justification**

Youth alcohol and drug treatment can effectively intervene in a young person's life and interrupt a cycle leading to more serious problems in adulthood. A key component to the success of the treatment process is alcohol and drug free housing for recent graduates from treatment programs. Family Housing Assistance helps vulnerable men, women and their children to move away from a cycle of chronic problems and crises and toward greater self-sufficiency in obtaining permanent housing, increased income, adequate food and healthcare. This service is effective due to the combination of competent case management and peer mentor services. The goals of supported family alcohol and drug free housing are: 1) maintaining sobriety; 2) obtaining education and/or employment; 3)improving wages/income; 4)maintaining family stability; and; 5) achieving family stability.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of households served in housing services	90	100	100	100
Outcome	Families that move into permanent housing	0.0%	0.0%	52.0%	53.0%
Output	Youth served in residential treatment <sup>2</sup>	40	40	44	56
Outcome	Percentage of youth successfully completing treatment <sup>3</sup>	47.0%	47.0%	61.0%	60.0%

#### **Performance Measure - Description**

<sup>1</sup> These two measures were not used in the previous program offer, hence no previous numbers are available.

<sup>2</sup> This increased number of youth served reflects the change in the way treatment beds are funded- the state is now matching the funding for 5 beds, resulting in 9 total beds, which will allow the program to serve more youth.

<sup>3</sup> Successful completion of treatment is defined as achieving at last two-thirds of treatment goals and having 30 days of sobriety.

## Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

Because Multhomah 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 71 is Youth Alcohol & Drug Residential Treatment 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
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$6,708	\$0	\$0
Contracts	\$275,687	\$619,958	\$275,687	\$510,984
Subtotal: Direct Exps:	\$275,687	\$626,666	\$275,687	\$510,984
Administration	\$33,024	\$36,359	\$24,138	\$21,375
Program Support	\$73,179	\$15,627	\$52,991	\$5,084
Subtotal: Other Exps:	\$106,203	\$51,986	\$77,129	\$26,459
Total GF/non-GF:	\$381,890	\$678,652	\$352,816	\$537,443
Program Total:	\$1,06	0,542	\$890	),259
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$626,666	\$0	\$510,984
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$626,666	\$0	\$510,984

## **Explanation of Revenues**

Local 2145 Tax Sharing - \$24,700 State Mental Health Grant - \$486,248 County General Fund - \$275,687

## Significant Program Changes

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



## Program # 25094C - Family and Youth Addictions Treatment Continuum Scale-C

**Basic Needs** 

Existing Operating

Priority:

**Program Offer Type:** 

**Related Programs:** 

ed Programs: 25094A

Lead Agency: Program Contact: County Human Services Karl Brimner

Version 3/25/2009 s

## Program Characteristics:

## **Executive Summary**

The offer would restore the outpatient segment of our youth addictions treatment continuum, serving about 130 youth annually. Most youth in Multnomah County who are in our treatment population (family earns less than 200% of Federal Poverty Level) are eligible for the Oregon Health Plan (OHP) and its Chemical Dependency benefit. However many of the youth are not enrolled in the OHP when they come to treatment. Our slots allow the treatment agencies to enroll the youth into treatment immediately, and then move them to OHP funding as they get enrolled, freeing the County slot for another client. This is very efficient and creates a synergy between the OHP (medicaid)funding and county general fund. It also maximizes treatment effectivenees by not turning away youth until they are enrolled in the OHP.

## **Program Description**

The outpatient level of care has youth in treatment services one to three times per week and typically offers 1:1, group and family therapy. Outpatient treatment allows youth to remain in school, attend job training, work, socialize and otherwise carry on normal lives while learning about and working on their recovery.

## **Program Justification**

Youth alcohol and drug treatment can effectively intervene in a young person's life and interrupt a cycle leading to more serious problems in adulthood. Outpatient treatment allows youth to remain in their respective communities, allowing them to be aware of and utilize local resources, (church, extended family, signicant others, etc), to assist them in their recovery within their own community.

## **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Youth enrolled in treatment	0	0	130	130
Outcome	Successful completetions of treatment. 1	0.0%	0.0%	60.0%	60.0%

## **Performance Measure - Description**

<sup>1</sup> Successful completion includes attaining treatment plan goals and maintaining sobriety.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$127,373	\$0
Subtotal: Direct Exps:	\$0	\$0	\$127,373	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$127,373	\$0
Program Total:	\$	0	\$127,373	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund (MVRT) - \$127,373

Significant Program Changes

Significantly Changed

Last year this program was:



#### Program # 25095 - Oregon Partnership Community Response to Minor In Possession Version 6/11/2009 s

**Priority:** 

Basic Needs

Program Offer Type:

Innovative/New Program

Lead Agency: **Program Contact:**  **County Human Services** Karl Brimner

**Related Programs:** 

**Program Characteristics:** 

## **Executive Summary**

The Oregon Partnership Community Response to Minor In Possession will engage youth to create media messages with the purpose of influencing community attitudes and norms to reduce underage drinking. Piloted in two high schools served by the Schools Uniting Neighborhoods (SUN) Service System surrounding neighborhoods, saturated with approximately 10,000 messages countering stereotypes of teen alcohol use with actual local usage survey data. The campaign will increase community awareness of Minor in Possession (MIP) enforcement policies by ensuring representation from targeted neighborhoods in MIP strategy meetings and including MIP enforcement updates in campaign messages.

## **Program Description**

40 participating youth will create broadcast and print materials to raise awareness and help parents and community members keep their kids safe, healthy and alcohol-free. Campaign messages will counter common misperceptions that sustain underage alcohol use. Youth at two Portland Schools Uniting Neighborhoods (SUN) Community high schools will gather data from fellow students and community members about youth alcohol use. Using research results, they will educate the community about its actual norms of health, as well as the pervasiveness of localized alcohol advertising. In each neighborhood, the campaign will conduct three surveys and one focus group; distribute approximately 1,000 posters, 3,000 flyers, mailers and tip cards; 1,000 promotional items; run paid and pro-bono advertising on radio and in print; train students to conduct educational presentations to incoming freshman; conduct combined community meetings partnering with the joint task force created in 2007 to strengthen consequences of Minor in Possession (MIP) citations. Neighborhood MIP task force meetings will focus on the development of short and long-term strategies for MIP diversion and assist in planning an MIP community service hours project to be piloted within the SUN system.

## **Program Justification**

The campaign to respond to minor in possession is a universal environmental prevention strategy designed to address community attitudes on underage drinking which extends a current campaign, Face It Parents, launched by Oregon Partnership (OP) in 2005 and targets youth and segments of the neighborhood population with uniquely tailored messages and interventions. This campaign builds upon OP's current collaboration with the SUN Service System and Portland Public Schools on a community project within the Marshall High School cluster. It is a "social norms" strategy emphasizing communities' responsibility to create policies that maintain a healthy and safe environment and recommending that changes in policy and enforcement include collaboration with community partners. This collaborative approach aligns with the MIP Task Force recommendation that any regulatory action be part of a comprehensive community plan to change community norms and expectations.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Students recruited and trained (total 2 schools) <sup>1</sup>	0	0	0	40
Outcome	Decrease alcohol use by high school students in 2 schools (average) <sup>2</sup>	0.0%	0.0%	0.0%	5.0%
Output	Distribute campaign materials in 2 schools and 2 neighborhoods <sup>3</sup>	0	0	0	10,000
Outcome	Increase in accurate perceptions of peer alcohol use *4	0.0%	0.0%	0.0%	10.0%

## **Performance Measure - Description**

This is a new program, so there are no previous year or current year measures. Number of HS Students recruited and trained: 20 per high school to survey high school students and community members and to assist with creation of media campaign materials. <sup>2</sup> Decrease average alcohol use by 5% among students at both high schools, as determined by results of student survey. 3 5,000 Campaign materials per neighborhood: posters, flyers, promotional items. \*4 Increase accurate perceptions by 10% among students, parents and community members about the percentage of students who are not using alcohol, as determined by analysis of survey results.

None.

## **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$100,000	\$0
Subtotal: Direct Exps:	\$0	\$0	\$100,000	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$100,000	\$0
Program Total:	\$	0	\$100	),000
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund - \$100,000

## Significant Program Changes

#### Last year this program was:

This is a new program offer for fiscal year 2009-2010 that is funded 100% by County General Funds. Therefore there will be no Cost-of-Living (COLA) increase over last fiscal year.



#### Program # 25096 - Sexual Offense and Abuse Prevention

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:50015, 25067

#### **Program Characteristics:**

# **Executive Summary**

This program provides treatment services for children and youth who are significantly sexually reactive or who are sexually predatory. There were 137 youth served by this program in FY08. The outcome measurement for this program is the percent of youth that do not re-offend within six months after treatment.

#### **Program Description**

Sexual Offense and Abuse Prevention Program/Responsible Adolescent and Parent Program (SOAP/RAPP) is a blended funding arrangement between the Department of Community Justice and the Department of County Human Services to provide additional mental health treatment service to youth in sex offender treatment. This program provides outpatient mental health treatment to child and adolescent sex offenders designed to prevent them from requiring a more intensive and costly level of care, such as psychiatric hospitalization or treatment in a residential facility. Without treatment, there is a high risk that the individuals served by this program will re-offend and establish a pattern of long-term behaviors that put the community and themselves at risk. There is an intensive family education and group support component to the full service array of treatment for the child and family to decrease the likelihood of the child re-offending. The goal of the program is also to maintain the child in the least restrictive, most clinically and culturally appropriate level of care, preferably in the community. Most of the individuals being treated would not be maintained in a family-like setting if they are not actively in treatment through this program. Many of these individuals have co-occurring disorders which further complicate treatment if not served in such a specialized treatment program.

# **Program Justification**

This program links directly to the Basic Living Needs Priority Team strategies through early intervention to keep juveniles out of the adult public safety system by providing necessary treatment to prevent them from re-offending. Appropriate treatment promotes healthy behavior. Through its prevention role, this program also fits into the School Aged Policy Framework.

#### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total individuals served <sup>1</sup>	137	110	132	132
	Percent of youths that do not re-offend within six months after treatment <sup>2</sup>	100.0%	98.0%	100.0%	98.0%

#### **Performance Measure - Description**

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

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

Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

# Legal/Contractual Obligation

Multnomah County Mental Health and Addictions contracts with Morrison Counterpoint to provide this specialized service.

# **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$100,000	\$250,000	\$100,000	\$250,000
Subtotal: Direct Exps:	\$100,000	\$250,000	\$100,000	\$250,000
Administration	\$8,194	\$8,716	\$8,584	\$8,643
Program Support	\$18,157	\$16,729	\$18,844	\$17,167
Subtotal: Other Exps:	\$26,351	\$25,445	\$27,428	\$25,810
Total GF/non-GF:	\$126,351	\$275,445	\$127,428	\$275,810
Program Total:	\$401	1,796	\$403	3,238
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$250,000	\$0	\$250,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$250,000	\$0	\$250,000

# **Explanation of Revenues**

OHP Premium - \$250,000 County General Fund - \$100,000

# Significant Program Changes

**Last year this program was:** #50019, Juvenile Outpatient Treatment for Youthful Sex Offenders In FY09 this program offer was jointly submitted with the Department of Community Justice as program offer #50019.



# Program # 25098A - Enhanced Family Involvement Team

Priority: Program Offer Type: Related Programs:

Basic Needs Existing Operating 50009, 25098B

# Version 3/31/2009 s

Lead Agency: Program Contact: County Human Services Karl Brimner

**Program Characteristics:** 

# **Executive Summary**

The Family Involvement Team (FIT) connected 400 parents entering Family Dependency Court in FY08 with addictions treatment as expeditiously as possible and provided enhanced services to keep them in treatment. These parents had an allegation of

child abuse/neglect with drugs and/or alcohol involved. This offer provides approximately 50% less service (200 families) than current service levels. FIT has dramatically reduced the waiting time for families for treatment, thus increasing the likelihood of successful family reunification. Purchase of 25098A and 25098B will restore FIT to the current service level.

#### **Program Description**

The FIT core team housed at the Family Dependency Court works with Child Welfare parents and their children until they enter 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. After parents enter treatment, the Family Involvement Team 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. Grant funds enable FIT to 1) expand the number of Child Welfare clients that can access alcohol and drug treatment, and 2) provide enhanced and previously unavailable aftercare amd parent mentoring services to those clients. FIT is a collaboration of Multnomah County's Department of County Human Services and Department of Community Justice, State Child Welfare, the five community-based treatment providers serving women and their children, and five additional community-based providers of other support services. Through the work of these agencies approximately 400 parents accept FIT services and enter alcohol and drug treatment.

Each year, approximately 538 parents have allegations of child abuse or neglect that require intervention at the County Family Court approximately 400 parents accept FIT services and enter alcohol and drug treatment. By accepting services, parents are demonstrating to the state Department of Human Services (DHS) Child Welfare they are recognizing that drugs or alcohol are affecting their abilities to parent effectively and are willing to take steps to reunify the families.

# **Program Justification**

The Family Involvement Team links directly to the Basic Living Needs Priority that addresses promoting healthy behaviors by assisting parents who have had a child/children removed by the state Department of Human Services for abuse or neglect with drug or alcohol involvement to enter treatment. A state DHS report shows that drug and/or alcohol abuse was the leading stress factor in families where children have been abused or neglected. In FY 08, FIT Core Team staff identified 538 families entering the dependency court with allegations of abuse or neglect with alcohol and/or drugs involved. Of the qualifying families, 400 accepted FIT services. By accepting FIT services the parents are demonstrating to DHS they are recognizing that drugs or alcohol are affecting their ability to parent effectively and are willing to take steps to reunify the family.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Percent of eligible parents accepting FIT screenings <sup>1</sup>	76.0%	80.0%	80.0%	80.0%
Outcome	Average time to treatment in days <sup>2</sup>	28	28	32	32
Outcome		0	0	0	0

#### **Performance Measure - Description**

Data is available through the FIT for Recovery data base.

<sup>1</sup> There will be no reduction in screening services, but will be a reduction in the number of families receiving services.

<sup>2</sup> Due to the reduction in treatment services available, parents will wait longer to enter treatment. We are unable to estimate the degree to which waittimes will increase at this time.

# 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).

# **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$30,803	\$0	\$87,966
Contracts	\$0	\$1,450,632	\$0	\$829,886
Materials & Supplies	\$0	\$0	\$0	\$140
Internal Services	\$0	\$36,661	\$0	\$43,922
Subtotal: Direct Exps:	\$0	\$1,518,096	\$0	\$961,914
Administration	\$0	\$53,536	\$0	\$37,629
Program Support	\$0	\$23,010	\$0	\$8,951
Subtotal: Other Exps:	\$0	\$76,546	\$0	\$46,580
Total GF/non-GF:	\$0	\$1,594,642	\$0	\$1,008,494
Program Total:	\$1,59	4,642	\$1,008,494	
Program FTE	0.00	0.00	0.00	0.60
Program Revenues				
Indirect for dep't Admin	\$16,690	\$0	\$21,493	\$0
Intergovernmental	\$0	\$1,518,096	\$0	\$961,914
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$16,690	\$1,518,096	\$21,493	\$961,914

Explanation of Revenues COPS Meth Grant - \$25,722 Child & Family ACYF Federal Grant - \$768,750

State Mental Health Grant - \$105,142

# **Significant Program Changes**

Last year this program was: #25098, Enhanced Family Involvement Team In FY 08/09 this program was larger than what it is anticipated to be in FY 09/10. The reduction is due to a reduction in the Governor's proposed budget.

**Significantly Changed** 



#### Program # 25114A - Bridges to Housing

Priority:	Basic Needs
Program Offer Type:	Program Alternative /
<b>Related Programs:</b>	25115A, 25133, 25140

#### **Program Characteristics:**

# **Executive Summary**

Bridges to Housing (B2H) provides 40 high resource using homeless families with intensive case management, permanently affordable housing and childcare resources. High resource using homeless families have no permanent place to live, have at least one child under the age of eighteen, 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 125 B2H housing units all have been 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. B2H will help at least 70% (28) of families served maintain their housing, thus reducing their reliance on county services.

# **Program Description**

B2H was developed to solve a problem facing a challenging group of homeless families served in our county. While most homeless families experience homelessness due to short-term economic reasons, a subset of families have such serious problems that they cannot be housed without permanent rent assistance and a period of intense services. B2H case managers work with no more than fifteen families at a time to move them into a B2H housing unit, prevent them from losing their housing, prevent the children from being removed and help them obtain the services needed to attain their goals. County funds will continue services to the 40 B2H families currently in housing. County funds leverage funds from city of Portland and state of Oregon to build and maintain the housing, \$6,000 per family per year in rent assistance funds, \$4,500 per family per year in childcare funds and \$558,000 to date in matching funds from private foundations.

# **Program Justification**

B2H meets the Basic Living Needs (BLN) priority area goals in its holistic approach focused on coordinated service addressing multiple and complex needs. A typical B2H family is a single mother with one or more children, often fleeing domestic violence, fighting with mental health or addictions issues, and struggling to provide for the basic needs of her child(ren). Most B2H families have poor rental histories, very low income, minor criminal convictions and bad credit, making it impossible for them to lease apartments without B2H. While B2H families use services from multiple county systems, their inability to access housing causes those services to be ineffective and poorly coordinated. B2H provides housing units to this very difficult to house population, and case managers coordinate services across service systems, increasing their efficiency and effectiveness. B2H families are expected to become successful renters, be less likely to have their children removed and placed in foster care, more likely to have their children succeed in school, less likely to have episodes of domestic violence, and less likely to be involved in the criminal justice system.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	High resource using homeless families served over two years	95	110	125	40
	% of families served that remain in permanent housing six months after exit <sup>1</sup>	70.0%	70.0%	70.0%	70.0%

# **Performance Measure - Description**

<sup>1</sup> Permanent housing is long-term community-based housing where an individual can stay without time limit.

# Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$704,543	\$0	\$234,820	\$0
Subtotal: Direct Exps:	\$704,543	\$0	\$234,820	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$704,543	\$0	\$234,820	\$0
Program Total:	\$704	l,543	\$234	1,820
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# Explanation of Revenues

County General Fund - \$234,820

# Significant Program Changes

Significantly Changed

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

In FY09 the Bridges to Housing program offer was funded with one time only funding.

If funded in FY10, services will transition from initial pilot program purchased with one-time-only resources to on-going capacity of 40 family units dedicated to high resource using homeless families who are otherwise unable to access safe, stable housing.

See Program Offer 25114B.



# Program # 25115A - Homeless Benefits Recovery Pilot Project

Priority:

Basic Needs

Program Offer Type: Inno Related Programs: 250

Innovative/New Program
25063A, 25114A, 25133, 25140, 25063B

Lead Agency: Program Contact: County Human Services Mary Li

Version 6/11/2009 s

Program Characteristics:

# Executive Summary

The Homeless Benefits Recovery Project (HBR) will utilize a proven program model to assist 120 chronically homeless individuals with mental illness, addictions and disabilities in accessing federal benefits and services to which they are entitled but have been unable to receive because their disabilities prevent them from successful navigation of the appeals system. Locally, only 11% of those eligible receive benefits. HBR is a tested, evidence based program that can expect a 50-70% success rate in gaining benefits for eligible individuals.

A smaller pilot for the Homeless Benefits Recovery Project can be implemented. To reduce costs while at the same time preserving the number of clients served, flexible client support funds and 1 FTE Hearings Specialist position have been eliminated from the original model. Since the proposed target population will come from homeless individuals receiving service through the Multnomah Treatment Fund, a level of services does exist for these individuals - although meeting housing and other basic needs will continue to be a challenge. The Department believes that this compromise will still support a thorough testing of the program model, while taking into account the reality of the County's current economic situation.

#### **Program Description**

HBR will provide benefits eligibility determination, systems advocacy, and short term case management to approximately 120 individuals annually who are Multnomah Treatment Fund eligible. The Multnomah Treatment Fund is a general fund program serving a limited number of individuals with mental illness without insurance or benefits.

Services include: eligibility screening, appeals process advocacy, case management, and medical and other documentation to individuals evaluated to be potentially eligible while the appeals process continues. In the first year of service, approximately 120 Multhomah Treatment Fund eligible clients will be served.

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

# **Program Justification**

HBR will meet the Basic Living Needs (BLN) priority area goals to provide intervention and coordination of services and assure care for vulnerable members of the community. HBR will target those who would 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 for which the county 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. Only 11% of the chronic homeless population receives the benefits to which they are entitled.

Benefit recovery efforts are a key strategy of the county-city of Portland 10 Year Plan to End Homelessness.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
	# of chronic homeless individuals with disabilitites served	0	0	0	120
Outcome	% of individuals served that receive benefits	0.0%	0.0%	0.0%	40.0%
Outcome		0	0	0	0

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$0	\$0	\$0	\$0
Contracts	\$0	\$0	\$393,397	\$0
Materials & Supplies	\$0	\$0	\$0	\$0
Internal Services	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$0	\$0	\$393,397	\$0
Administration	\$0	\$0	\$1,401	\$0
Program Support	\$0	\$0	\$4,202	\$0
Subtotal: Other Exps:	\$0	\$0	\$5,603	\$0
Total GF/non-GF:	\$0	\$0	\$399,000	\$0
Program Total:	\$	0	\$399	9,000
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# Explanation of Revenues

County General Fund - \$499,576

# Significant Program Changes

Last year this program was: #25115A, Homeless Benefits Recovery Project is a scaled program offer in response to BCC request.



# Program # 25118 - Community Services Division Administration

**Priority:** 

Accountability Administration

Program Offer Type: 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. 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 to over 26,000 unduplicated Multnomah County citizens annually. The division also functions as the county's legislatively mandated Community Action Office.

# **Program Description**

Managing the work of 27 FTE, CSA effectively administers a package of direct services, contract services, and community initiatives representing over \$26.5 million dollars investment of county, state, and federal funds.

As the county's Community Action Office, CSA provides leadership for the county's anti-poverty and prosperity efforts, including the Poverty Elimination Framework, the 10 Year Plan to End Homelessness, the Prosperity Alliance and Oregon Thrives.

CSA collaborates in community efforts to create prosperity for all county citizens through key partnerships with local, regional, and statewide public, private and community stakeholders including consumer, business, faith, jurisdictional and others.

# **Program Justification**

CSA is a key component of the department's and county's efforts to meet the Accountability Priority: "I want my Government to be accountable at every level".

CSA meets Accountability factor: "Responsible Leadership" through formal and informal provider relationships; staffing of and participation on oversight committees such as the Homeless Youth Oversight and the Short-Term Rent Assistance; and collaborative work on initiatives such as Oregon Thrives and Multnomah Thrives.

CSA meets Accountability factor: "Resource Management" through staff activities such as Division meetings, in-service training, and opportunities for professional development; implementation of the County's human services partnership contracting process with the Homeless Youth System; and, real time data entry for the Energy Payment Assistance Program.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	% of staff attending at least one skill bldg/pro dev training session annually	100.0%	100.0%	100.0%	100.0%
Outcome	% of stakeholders expressing satisfaction w/services received	75.0%	75.0%	75.0%	80.0%

**Performance Measure - Description** 

# Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009		2010
Personnel	\$519,440	\$0	\$552,427	\$0
Contracts	\$3,000	\$0	\$3,000	\$0
Materials & Supplies	\$24,956	\$0	\$24,956	\$0
Internal Services	\$72,647	\$0	\$82,450	\$0
Subtotal: Direct Exps:	\$620,043	\$0	\$662,833	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$620,043	\$0	\$662,833	\$0
Program Total:	\$620	),043	\$662	2,833
Program FTE	5.50	0.00	5.50	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$662,833

Significant Program Changes

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



#### Program # 25119 - Energy Services

Priority:	Basic Needs
Program Offer Type:	Existing Operating
<b>Related Programs:</b>	25133, 25140, 251

**Program Characteristics:** 

# **Executive Summary**

Energy Services (ES) ensure that approximately 18,000 fixed and low-income households have access to safe and sufficient energy in their homes. In FY07-08 this program offered weatherization (WX) repair and replacement to approximately 788 households, and direct utility payments to approximately 14,606 households, along with energy education, case management, and other services to help households manage and pay for their energy costs. Services prevent utility shutoff for vulnerable households. According to a recent State OHCS study, services create \$1.78 of economic activity within the county for every one dollar invested in WX. Services are primarily state and federally funded.

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#### **Program Description**

Weatherization repair and replacement provides energy use audits, weatherization, furnace repairs and replacement, and appliance replacement to fixed and low-income households; county staff and vendors provide services. In FY 07-08, more than 86,000 households were income eligible for service; of those, 788 were served. Energy payment assistance works through nine community agencies to make utility payments for fixed and low-income households. In FY 07-08 over 86,000 households were income eligible for service; of those, 14,606 were served. Services are part of the SUN Service System (SUNSS), a countywide integrated and coordinated system of care for school-age youth and their families. Energy Education helps fixed and low-income households understand their energy use and provides the tools - such as light bulbs, window stripping and showerheads necessary to better control energy expenses. All households receiving Energy Services receive education on how to reduce energy costs. Case management supports self-sufficiency for up to 90 households annually.

# **Program Justification**

Energy Services are a key component of the county's efforts to meet Basic Living Needs (BLN) Priority: "All Multnomah County residents and their families are able to meet their basic living needs." Energy services contributes to BLN Indicator: "Percent of community members not living in poverty" and all BLN Factors by increasing household self-sufficiency and improving local economic conditions through energy conservation. Energy costs disproportionately affect low-income households. The department of energy estimates low-income households pay an average of 12.6% of their income for energy expenses compared with 2.7% for the average household. In some fixed income households, energy costs can reach as high as 35%. DOE estimates WX households save an average \$274.00 annually in energy costs. WX provides jobs for local contractors and revenue for businesses who supply materials, and indirectly creates another 1.25 jobs in Oregon for every administrative position funded.

National research indicates that WX has multiple "non-energy related" benefits including affordable housing preservation, regional energy conservation, long-term home improvement, safer housing conditions and improved physical health. Locally, Oak Ridge National Laboratory found that WX increases household property values, maintains affordable housing and improves the environment through reduced consumption of fossil fuels.

# Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of Households Served	15,394	15,300	18,000	18,000
Outcome	% of households w/shutoff notices served that avoid shutoff	100.0%	100.0%	100.0%	100.0%
Output	# of affordable housing units maintained for 10 years	344	200	300	300

# **Performance Measure - Description**

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.

# Version 6/11/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$85,350	\$959,892	\$69,457	\$1,557,804
Contracts	\$6,200	\$1,125,012	\$6,200	\$2,782,222
Materials & Supplies	\$45,807	\$7,849,311	\$45,807	\$14,330,225
Internal Services	\$184,183	\$375,850	\$244,319	\$1,035,105
Subtotal: Direct Exps:	\$321,540	\$10,310,065	\$365,783	\$19,705,356
Administration	\$51,168	\$0	\$166,710	\$0
Program Support	\$41,061	\$0	\$31,984	\$0
Subtotal: Other Exps:	\$92,229	\$0	\$198,694	\$0
Total GF/non-GF:	\$413,769	\$10,310,065	\$564,477	\$19,705,356
Program Total:	\$10,72	23,834	\$20,20	69,833
Program FTE	0.91	12.56	0.67	19.79
Program Revenues				
Indirect for dep't Admin	\$171,013	\$0	\$522,363	\$0
Intergovernmental	\$0	\$9,960,066	\$0	\$19,255,356
Other / Miscellaneous	\$0	\$349,999	\$0	\$450,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$171,013	\$10,310,065	\$522,363	\$19,705,356

# Explanation of Revenues

PDX Water/Sewer D/A - \$90,000 OHCSD LIEAP - \$8,007,859. OHCSD DOE WX - \$790,959 OHCSD DOE WX AARA - \$4,281,026 OHCSD OEAP-Energy - \$4,000,408 OHCSD ECHO (SB1149)- \$2,022,604 City of Portland Wtr & Sewer FR - \$62,500 VOCA-APS Referral & Outreach - \$50,000 County WX Rebates - \$400,000 County General Fund - \$365,783

Significant Program Changes

Last year this program was: #25119, Energy Services



# Program # 25123 - Youth Gang Prevention

**Priority: Program Offer Type: Related Programs:** 50014A

**Basic Needs** 

**Existing Operating** 

# Version 3/25/2009 s

Lead Agency: **Program Contact:**  County Human Services Mary Li

**Program Characteristics:** 

# **Executive Summary**

Implementation of this Program Offer is subject to the provisions of a Strategic Plan for a Comprehensive and Coordinated Response to Youth and Gang Violence, which will be completed by Multnomah County's Public Safety Coordinating Council no later than July 1, 2009.

**Program Description** 

# **Program Justification**

# Performance Measures

Measure	Deiment Messure	Previous Year Actual		Current Year Estimate	Next Year Offer
Туре	Primary Measure	(FY07-08)	(FY08-09)	(FY08-09)	(FY09-10)
Output		0	0	0	0
Outcome		0	0	0	0

**Performance Measure - Description** 

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$81,504	\$0	\$95,389	\$0
Contracts	\$1,068,004	\$64,000	\$1,153,363	\$64,000
Materials & Supplies	\$2,185	\$0	\$2,431	\$0
Internal Services	\$10,949	\$0	\$1,405	\$0
Subtotal: Direct Exps:	\$1,162,642	\$64,000	\$1,252,588	\$64,000
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$1,162,642	\$64,000	\$1,252,588	\$64,000
Program Total:	\$1,22	6,642	\$1,31	6,588
Program FTE	1.00	0.00	1.00	0.00
Program Revenues				
Intergovernmental	\$0	\$64,000	\$0	\$64,000
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$64,000	\$0	\$64,000

# **Explanation of Revenues**

OCCF-Youth Investment - \$64,000 County General Fund - \$1,252,588

# Significant Program Changes

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



#### Program # 25127 - Court Care

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

**Related Programs:** 

**Program Characteristics:** 

# **Executive Summary**

Court Care provides on-site childcare for approximately 800 children annually whose parents are involved with legal proceedings at the Multhomah 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. This program is a collaboration among DCHS, the Oregon Judicial Department and the Multhomah County Bar Association.

# **Program Description**

Court Care services are jointly provided with the state of Oregon Department of Justice. Through contract with a non-profit agency, a full-service child care facility provides developmentally appropriate care, including food for participating children and screening for potential referrals to on-going service by certified childcare providers.

An advisory committee under the auspices of the Multnomah County Bar Association raises service delivery funds, oversees operations and evaluates program effectiveness.

#### **Program Justification**

Court Care contributes to Safety Indicator: "Citizen perception of safety," and meets Safety Strategy 2: "Safety system components work effectively together," and Strategy 6: "Engage relevant communities in defining public safety need, and developing crime prevention and protection programs."

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 critizens' perceptions of safety.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of children served	910	800	800	800
Outcome	% of parents expressing satisfaction w/services received	90.0%	100.0%	100.0%	95.0%

# **Performance Measure - Description**

Court care services are by definition temporary. Effectiveness is primarily defined by the existence and delivery of the services themselves. Every child served avoids inappropriate exposure to legal situations and increases the ability of their parent/care giver to participate in their own legal proceedings.

# Version 3/25/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$9,057	\$0	\$0	\$0
Contracts	\$28,110	\$26,496	\$28,110	\$26,496
Materials & Supplies	\$243	\$0	\$0	\$0
Internal Services	\$1,320	\$0	\$0	\$0
Subtotal: Direct Exps:	\$38,730	\$26,496	\$28,110	\$26,496
Administration	\$6,163	\$0	\$3,978	\$0
Program Support	\$4,946	\$0	\$2,507	\$0
Subtotal: Other Exps:	\$11,109	\$0	\$6,485	\$0
Total GF/non-GF:	\$49,839	\$26,496	\$34,595	\$26,496
Program Total:	\$76	,335	\$61	,091
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$26,496	\$0	\$26,496
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$26,496	\$0	\$26,496

# **Explanation of Revenues**

Oregon Judicial Dept - \$26,496 County General Fund - \$28,110

# Significant Program Changes

Last year this program was: #25127, Court Care



# Program # 25133 - Housing Stabilization for Vulnerable Populations

**Priority:** Program Offer Type:

**Basic Needs** Existing Operating **Related Programs:** 25114A, 25115A, 25140

# Lead Agency: **Program Contact:**

**County Human Services** Mary Li

#### **Program Characteristics:**

# **Executive Summary**

Housing stabilization services provide shelter, rent assistance, teen parent housing, homeless children's education, and workforce support to more than 2,000 households a year. About 1,200 of these families receive shelter of housing assistance. These services help our most vulnerable homeless find shelter and support. About 75% of those placed in housing remain housed six months after exit.

#### **Program Description**

The county invests in a number of housing and support services programs within DCHS and other departments. Services have been targeted to specific populations, exist within different departments and divisions, and for the most part have operated in isolation from each other. No regular mechanism existed prior to the establishment of the county's Housing Team - representing all county departments and divisions - to determine opportunities for collaboration or potential efficiencies across programs, or to share best practice, results, and innovation. An example of the results of these efforts is the Homeless Benefits Recovery Project program offer, a cross-county, population model developed by the Housing Team to impact the chronically homeless with disabilities. Work also continues to place existing services into a continuum using the Poverty Elimination Framework and 10 Year Plan to End Homelessness.

Programs included in this offer: homeless families' winter shelter, rent assistance, teen parent transitional housing, children living in homeless families' educational support and alternative education, and workforce flexible assistance funds.

Winter shelter and the unified rent assistance system provide a means by which households can meet immediate survival needs. Transitional housing for teen parents provides stabilization and the opportunity to address barriers to long-term selfsufficiency. 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. Flexible client support funds help individuals seeking to gain living wage employment more fully utilize federal and state funds training and placement programs. Finally, DCHS' work in partnership with other jurisdictions involved in the social housing service system is supported here.

# **Program Justification**

All housing stabilization services contribute to all Basic Living Needs (BLN) priority goals. Housing is one of the most basic of all human needs. The lack of stability in this area impacts a number of individual and community outcomes, including academic success, livability and long term poverty elimination. The variety of strategies employed by programs funded in housing stabilization are based in emerging best practice of "Housing First" and "Permanent Supportive Housing" (PSH) and create a safety net that assists some of the most vulnerable populations in the community. Shelter, housing and related support services are the basis for achievement of future family self-sufficiency and community prosperity.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of households receiving shelter or housing <sup>1</sup>	1,110	1,200	1,200	1,200
	% of households served that remain in permanent housing six months after exit <sup>1</sup>	81.0%	80.0%	80.0%	80.0%

#### **Performance Measure - Description**

<sup>1</sup> These households are a subset of the approximately 2,000 families receiving services.

<sup>2</sup>% of households still housed six months after exit is an average of all programs' measures. Permanent housing is long-term community-based housing where an individual can stay without time limit.

Version 3/25/2009 s

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$225,130	\$61,411	\$281,360	\$37,465
Contracts	\$754,285	\$565,032	\$753,071	\$585,542
Materials & Supplies	\$7,282	\$0	\$4,765	\$6,608
Internal Services	\$44,041	\$23,099	\$44,973	\$32,441
Subtotal: Direct Exps:	\$1,030,738	\$649,542	\$1,084,169	\$662,056
Administration	\$164,024	\$0	\$152,480	\$0
Program Support	\$131,628	\$0	\$96,108	\$0
Subtotal: Other Exps:	\$295,652	\$0	\$248,588	\$0
Total GF/non-GF:	\$1,326,390	\$649,542	\$1,332,757	\$662,056
Program Total:	\$1,97	5,932	\$1,99	94,813
Program FTE	2.33	0.67	2.60	0.40
Program Revenues				
Indirect for dep't Admin	\$10,510	\$0	\$16,628	\$0
Intergovernmental	\$0	\$649,542	\$0	\$662,056
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$10,510	\$649,542	\$16,628	\$662,056

# **Explanation of Revenues**

HUD Home Safe - \$272,554 OHCSD HSP - \$33,550 OHCSD LIRHF - \$131,674 OHCSD SHAP - \$100,747 OHCSD EHA - \$102,272 PDX General Fund - \$21,259 County General Fund - \$1,094,169

Significant Program Changes

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



#### Program # 25134 - Family Warming Center

**Priority:** 

Basic Needs

Innovative/New Program

Program Offer Type:

Related Programs:

**Program Characteristics:** 

# **Executive Summary**

The Family Warming Center provides basic life and safety services for homeless families with children during the winter months, November through March. Following a successful pilot during FY 08-09, establishment of on-going service capacity for homeless families has become an important component of a fully functioning safety net. In FY 08-09, approximately 2,000 households - 2,112 adults and 4,488 children -accessed a safe, warm alternative to the streets, cars and camping.

# **Program Description**

The Family Warming Center is one of two sites - one designated for single adults and the other for families with children. The two sites represent a cross jurisdictional collaboration to keep homeless people safe and out of the cold during the winter months from November through March. The purpose of the Family Warming Center is safety for children and their parents/caregivers who would otherwise find themselves sleeping on the streets, in cars and/or places not meant for human habitation.

Based upon the FY 08-09 One Night Shelter and Street Count, 600 families and 1400 individuals are living on the street or in other substandard situations on any given night. Year-round shelter capacity is 21 slots for families and 407 beds for individuals. Existing winter shelter capacity is 12 slots for families and 218 beds for individuals. During severe weather events, there is no additional capacity for families and 250-300 beds for individuals. At maximum capacity, there is a significant shortage of both beds and access to them in a variety of locations, particularly in East County.

# **Program Justification**

The Family Warming Center addresses the Basic Living Needs (BLN) priority goals. Shelter from the weather in order to avoid serious health consequences and/or death from exposure meets the most basic human need.

Homeless families with children need shelter from the weather every night during winter. Current housing funding is inadequate to meet that need. The Family Warming Center builds upon the successful experience operating a pilot project last winter, better closing the gap between need and service.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of bed nights provided, December - March	0	0	0	6,600
Outcome		0	0	0	0

# **Performance Measure - Description**

The Family Warming Center is by definition temporary. Effectiveness is defined by the existence and delivery of the services themselves. The ultimate outcome for this service will be that no one dies or experiences serious health consequences due to exposure to winter weather, but this is not measurable.

# Version 2/27/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$150,000	\$0
Subtotal: Direct Exps:	\$0	\$0	\$150,000	\$0
Administration	\$0	\$0	\$20,809	\$0
Program Support	\$0	\$0	\$13,116	\$0
Subtotal: Other Exps:	\$0	\$0	\$33,925	\$0
Total GF/non-GF:	\$0	\$0	\$183,925	\$0
Program Total:	\$	0	\$183	3,925
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$150,000

# Significant Program Changes

# Last year this program was: This is a new program offer.



#### Program # 25136 - Homeless Youth System

Priority:SafetyProgram Offer Type:Existing OperatingRelated Programs:25138

Lead Agency: Program Contact:

County Human Services Mary Li

Version 3/25/2009 s

# **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, shelter, assertive engagement, housing, education, employment and health services to approximately 1,000 homeless youth up to age 25 annually. 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. This system is integrated with the public safety system and is a collaboration among DCHS, DCJ, the city of Portland, Portland Police Bureau, Citizens Crime Commission, Portland Business Alliance, the state, Outside In, New Avenues for Youth, Janus Youth Programs, Native American Youth & Family Center, and the community.

# **Program Description**

The HYS provides late stage intervention for homeless youth through: 24/7 crisis and safety services; shelter; assertive engagement and linkage to long-term community supports; transitional and permanent housing; education and employment services; and ATOD, mental and other health services. System accountability is managed through the Homeless Youth Oversight Committee (HYOC), a citizen body appointed by the Chair with representation that includes the Citizen's Crime Commission, Portland Business Alliance, DHS, Juvenile Rights Project, City of Portland, Health and Community Justice Departments, service providers and homeless youth.

The system is engaged in a redesign process with full implementation in 2011.

#### **Program Justification**

The HYS addresses the Safety indicators: "Reported index crime rate per 1,000 persons", and "Citizen perception of safety," and responds to Safety Strategy 2: "Safety system components work effectively together," Strategy 3: "Intervene early to keep juveniles out of the public safety system," Strategy 4: "Treat drug/alcohol addiction and mental health issues," and Strategy 6: "Identify and engage relevant communities in defining public safety needs and developing crime prevention and protection programs."

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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of homeless youth served	1,006	1,000	1,000	1,000
	% of youth served that remain in permanent housing six months after exit <sup>1</sup>	84.0%	75.0%	75.0%	75.0%

#### **Performance Measure - Description**

<sup>1</sup> Permanent housing is long-term community-based housing where an individual can stay without time limit.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$74,302	\$2,198	\$79,172	\$0
Contracts	\$2,017,200	\$1,091,525	\$2,017,200	\$1,091,525
Materials & Supplies	\$2,030	\$0	\$2,030	\$0
Internal Services	\$11,058	\$7,205	\$12,591	\$9,403
Subtotal: Direct Exps:	\$2,104,590	\$1,100,928	\$2,110,993	\$1,100,928
Administration	\$334,909	\$0	\$298,450	\$0
Program Support	\$268,761	\$0	\$188,113	\$0
Subtotal: Other Exps:	\$603,670	\$0	\$486,563	\$0
Total GF/non-GF:	\$2,708,260	\$1,100,928	\$2,597,556	\$1,100,928
Program Total:	\$3,80	9,188	\$3,69	8,484
Program FTE	0.82	0.02	0.83	0.00
Program Revenues				
Indirect for dep't Admin	\$3,278	\$0	\$4,818	\$0
Intergovernmental	\$0	\$1,100,928	\$0	\$1,100,928
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$3,278	\$1,100,928	\$4,818	\$1,100,928

# **Explanation of Revenues**

HUD Horizons Youth - \$197,458 PDX General Fund - \$903,470 County General Fund - \$2,110,933

Significant Program Changes

Last year this program was: #25136A, Homeless Youth System



# Program # 25137 - Native American Child Development Services

**Priority:** 

Basic Needs

Existing Operating

# Lead Agency: Program Contact:

County Human Services Mary Li

Version 3/25/2009 s

Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

Native American Child Development Services (NACDS) provides services for young children (birth through age 5) and their parents 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. This program aligns with the Early Childhood Framework.

# **Program Description**

NA Child Development Services provide an evidence based curriculum to approximately 40 families per year. Services include a range of activities designed to promote parent competence and healthy child development to ensure children are prepared to learn.

Specific services include: age appropriate parent child play groups, parenting education and support services, developmental screening, immunization status checks and follow up, culturally specific child care for parents in residential treatment, and access to other social and health services. The ages and stages child development screening tool is used to determine developmental stage. Those not meeting the relevant stage for their age are referred for early childhood intervention services. Services are developmental and culturally specific.

# **Program Justification**

Child development supports the education priority and is an important service component in the Early Childhood Framework. By providing opportunities for parents to interact with their children in mentored settings with child development specialists, they are able to learn healthy and age appropriate parenting skills, manage challenging behavior and learn ways to support their children to promote school readiness.

These opportunities are critical for families struggling to meet basic needs and who may not have other such opportunities; the majority of families who participated in the program in FY 08-09 were at or below the federal poverty level. The Oregon State University's Family Study Center 1998 research shows a strong correlation between 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. Child development programs are an important gateway in this continuum.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of families served	38	35	35	35
	% children screened who are at appropriate developmental stage at exit	80.0%	80.0%	80.0%	80.0%

**Performance Measure - Description** 

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Contracts	\$0	\$0	\$37,847	\$0
Subtotal: Direct Exps:	\$0	\$0	\$37,847	\$0
Administration	\$5,355	\$0	\$5,355	\$0
Program Support	\$3,376	\$0	\$3,376	\$0
Subtotal: Other Exps:	\$8,731	\$0	\$8,731	\$0
Total GF/non-GF:	\$8,731	\$0	\$46,578	\$0
Program Total:	\$8,	731	\$46	,578
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$37,847

Significant Program Changes

Last year this program was: <u>#25151</u>, Child Development Services In FY09, these services were included in the SUN Child Development Services program offer #25151.



#### Program # 25138 - Runaway Youth Services

**Priority:** 

Basic Needs Existing Operating

Program Offer Type: Related Programs:

**Program Characteristics:** 

# **Executive Summary**

Runaway Youth Services provide 24/7 Reception Center, crisis line, shelter, support services, gender specific transitional housing services for approximately 2,250 youth ages 12-17 who have run away, as well as their families. About 85% of those served are reunited with their families or placed in another safe, stable living environment.

This program is a collaboration among DCHS, DCJ and DHS.

# **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 offences such as curfew violation, truancy, etc. as an alternative to detention. In FY07, the Reception Center was co-located with runaway crisis response services, creating a countywide "child receiving center" for youth up to age 18. Crisis Line - 24/7 youth and family help line that serves as central access point for services. Telephone intervention and face-to-face, drop-in intervention also is available. This is the only community based resource for runaway youth and their families in the County. Emergency Shelter - shelter and emergency assistance in 11 bed co-ed group home with services focused on family reunification. Some overflow capacity is available as a detention placement alternative. Youth receive food, safety, medical care, transportation and case management services. Shelter services operate within a 72 hour intervention timeline. Research shows that the longer a young person is separated from family (where no abuse is present), the potential for eventual reunification decreases and further penetration into the child welfare system increases. Support Services/Case Management - intake, assessment, individual service plans targeting family reunification, ATOD and mental health counseling, and family mediation. Gender Specific Transitional Housing - two beds for girls in a group home setting. Research shows that a single gender environment results in better self-sufficiency outcomes for young women.

# **Program Justification**

Runaway Youth Services address Safety Indicator: "Citizen perception of safety" and respond to Safety Strategy 2: "Safety system components work effectively together," Strategy 3: "Intervene early to keep juveniles out of the public safety system," and Strategy 4: "Treat drug/alcohol addiction and mental health issues."

Runaway Youth Services successfully impact detention reform efforts and reduced 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. Those children are more likely to reach their full academic potential, avoid involvement with juvenile justice and stay out of foster care. Reception Center services support and maximize law enforcement efforts to maintain officers on patrol versus using those scarce resources for social services. By intervening directly and immediately with youth in the earliest stages of delinquent behavior, services provide a critical component of the community's safety system.

# Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of youth and families receiving intervention & services	2,370	2,250	2,250	2,250
	% of youth served who return home or exit to other stable housing <sup>1</sup>	92.0%	85.0%	85.0%	85.0%

# **Performance Measure - Description**

<sup>1</sup> 'Stable housing' typically includes DHS custody which could include foster or group home placements. But most youth are reunited with family.

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Lead Agency: Program Contact: County Human Services Mary Li

# Legal/Contractual Obligation

# **Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$14,060	\$0	\$16,216	\$0
Contracts	\$689,641	\$203,738	\$709,247	\$189,476
Materials & Supplies	\$376	\$0	\$376	\$0
Internal Services	\$2,067	\$0	\$2,399	\$0
Subtotal: Direct Exps:	\$706,144	\$203,738	\$728,238	\$189,476
Administration	\$112,371	\$0	\$102,995	\$0
Program Support	\$90,176	\$0	\$64,918	\$0
Subtotal: Other Exps:	\$202,547	\$0	\$167,913	\$0
Total GF/non-GF:	\$908,691	\$203,738	\$896,151	\$189,476
Program Total:	\$1,11	2,429	\$1,08	5,627
Program FTE	0.16	0.00	0.17	0.00
Program Revenues				
Intergovernmental	\$0	\$203,738	\$0	\$189,476
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$203,738	\$0	\$189,476

# **Explanation of Revenues**

OCCF-Youth Investment - \$189,476 County General Fund - \$728,238

# Significant Program Changes

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



#### Program # 25139 - Anti-Poverty Services

**Priority:** 

Basic Needs

Program Offer Type: Existing Operating

Related Programs:

**Program Characteristics:** 

# **Executive Summary**

Anti-Poverty Services (APS) form the basis of a system of care designed to assist homeless and low-income households to become self-sufficient. Four core services – Basic Needs, Anti-Poverty Education and Support, Housing, and System Collaboration were provided in FY 07-08 to 1068 households and 3,485 individuals. Of those, 1,849 were children. Assistance ranges in both length of service – immediate, short, and long-term - and in intensity provided. For those receiving housing services, approximately 74% remain housed six months after exit.

# **Program Description**

Anti-Poverty Services comprise four core services.

Basic Needs - shelter, food, energy, transportation, clothing.

Anti-Poverty Education and Support - case management services delivered through a collaborative, one-on-one relationship. Case managers engage in a variety of activities to support households reaching identified goals and program outcomes. Jointly, a plan is built to achieve self-sufficiency by addressing existing barriers such as addiction, mental illness, un/underemployment, unstable housing, etc. Skill building provides households and individuals with skills such as financial management, asset building, vocational education and training, etc.

Housing - housing and supportive services that range from readiness to rent, housing identification and rent assistance.

System Collaboration - working with the County, the SUNSS school based services providers, community based providers, and other stakeholders, APS leverage funder investments to maximize resources, coordinate and link services to create efficiencies and improve outcomes, and ensure that quality and accountability is maintained throughout the system.

APS are part of the SUN Service System (SUNSS), a countywide integrated and coordinated system of care for school age youth and their families.

# **Program Justification**

Anti-Poverty Services addresses all the Basic Living Needs (BLN) priorities. Services assist households seeking services and provide them or make connections to meet basic needs as they relate to food, housing, parenting and school success.

In FY 07-08, 86% of the households served were at or below the Federal Poverty Level and 49% were headed by a single parent (46% were single female parents). 68% of the households served identify themselves as ethnic minorities.

By utilizing a multi-intervention approach targeted to a mix of needs, households become and remain stably housed.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of households to receive case management <sup>1</sup>	1,068	1,000	951	951
Outcome	% of households served that remain housed six months after exit <sup>2</sup>	74.0%	80.0%	75.0%	70.0%

# **Performance Measure - Description**

<sup>1</sup> Current year estimates are less than originally purchased and future year targets are reduced due to the impact of the current economic downturn on the local rental market resulting in reduced numbers of available affordable units. <sup>2</sup> "Housed" refers to permanent housing which is long-term community-based housing with no time limit.

# Version 6/11/2009 s

Lead Agency: Program Contact: County Human Services Mary Li

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$2,426	\$81,193	\$40,709	\$54,681
Contracts	\$498,110	\$2,292,523	\$498,110	\$3,603,862
Materials & Supplies	\$2,436	\$0	\$2,436	\$0
Internal Services	\$11,559	\$77,947	\$14,990	\$184,794
Subtotal: Direct Exps:	\$514,531	\$2,451,663	\$556,245	\$3,843,337
Administration	\$68,199	\$0	\$114,435	\$0
Program Support	\$25,091	\$0	\$49,500	\$0
Subtotal: Other Exps:	\$93,290	\$0	\$163,935	\$0
Total GF/non-GF:	\$607,821	\$2,451,663	\$720,180	\$3,843,337
Program Total:	\$3,05	9,484	\$4,56	3,517
Program FTE	0.04	0.85	0.42	0.58
Program Revenues				
Indirect for dep't Admin	\$35,466	\$0	\$94,715	\$0
Intergovernmental	\$0	\$2,451,663	\$0	\$3,843,337
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$35,466	\$2,451,663	\$94,715	\$3,843,337

# **Explanation of Revenues**

HUD Family Futures - \$1,129,060 OHCSD CSBG - \$755,612 OHCSD CSBG AARA - \$1,325,306 OHCSD HSP - \$74,111 OHCSD EHA - \$559,248 County General Fund - \$556,245

Significant Program Changes

Last year this program was: #25150, Anti-Poverty Services



#### Program # 25140 - Housing

Priority:Basic NeedsProgram Offer Type:Existing OperatingRelated Programs:25114A, 25115A, 25133

Lead Agency: Program Contact: County Human Services Mary Li

Version 2/27/2009 s

# **Program Characteristics:**

# **Executive Summary**

Housing administers public resources to expand affordable housing and infrastructure in low and moderate income communities through the Community Development Block Grant (CDBG), the Affordable Housing Development Program (AHDP), and the home improvement loan program. Additional program funds are earmarked for future use in the purchase of a mobile home park for preservation purposes. The program preserves approximately 50 and creates approximately six affordable housing units annually.

This program is a collaboration among DCHS, the city of Gresham, the city of Wood Village, the city of Fairview, the city of Troutdale, the city of Maywood Park, the city of Portland, and the community.

### **Program Description**

Using a regional collaborative approach and an advisory board comprised of citizens living in East County cities outside of Portland, housing administers Community Development Block Grant funds targeted to neighborhood revitalization, public services and housing rehabilitation in East County. The Affordable Housing Development Program which deeds County foreclosed properties to non-profit community development corporations for affordable housing development manages an on-going 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. Finally, program funds are reserved for the eventual purchase of a mobile home park at imminent risk of redevelopment.

# **Program Justification**

Housing addresses the Basic Living Needs (BLN) Priority: "All Multnomah County residents and their families are able to meet their basic living needs," BLN Indicator 2: "% of renting households paying less than 30% of income for housing;" and responds to Strategy 2: "Maintain a Healthy Community and Environment," and Strategy 5: "Assist in obtaining permanent and livable housing".

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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of public works projects completed	2	1	1	2
Outcome	# of affordable housing units preserved <sup>1</sup>	50	50	60	50
Outcome	# of affordable housing units created	6	6	4	6

#### **Performance Measure - Description**

<sup>1</sup> Preservation refers to units that are currently used for affordable housing purposes but are at risk of conversion to market rate housing, displacing low and fixed income residents.

FY 08-09 funds were used for housing preservation. In FY 09-10, funds will revert to public works, thus reducing the total number of units projected to be purchased.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2009	2009	2010	2010	
Personnel	\$90,945	\$43,262	\$111,783	\$38,850	
Contracts	\$0	\$643,155	\$0	\$658,524	
Materials & Supplies	\$3,705	\$1,100	\$0	\$0	
Internal Services	\$20,031	\$13,405	\$22,936	\$15,548	
Subtotal: Direct Exps:	\$114,681	\$700,922	\$134,719	\$712,922	
Administration	\$18,249	\$0	\$18,689	\$0	
Program Support	\$14,645	\$0	\$11,780	\$0	
Subtotal: Other Exps:	\$32,894	\$0	\$30,469	\$0	
Total GF/non-GF:	\$147,575	\$700,922	\$165,188	\$712,922	
Program Total:	\$848	3,497	\$878	378,110	
Program FTE	1.03	0.50	1.12	0.42	
Program Revenues					
Indirect for dep't Admin	\$6,099	\$0	\$7,969	\$0	
Intergovernmental	\$0	\$412,664	\$0	\$299,415	
Other / Miscellaneous	\$0	\$288,258	\$0	\$413,507	
Program Revenue for Admin	\$0	\$0	\$0	\$0	
Total Revenue:	\$6,099	\$700,922	\$7,969	\$712,922	

# Explanation of Revenues

Strategic Investment Project - \$288,258 Multnomah Cnty HUD CDBG - \$299,415 RRP Loan Repays - \$19,000 LoanRepays-SpecINeed - \$106,249 County General Fund - \$134,719

Significant Program Changes

Last year this program was: #25140, Housing



# Program # 25143 - SUN Service System Administration

**Priority:** 

Type: Administration

Program Offer Type:

Accountability

Lead Agency: Program Contact: County Human Services Peggy Samolinski

Related Programs: 25139, 25144, 25145A, 25146A, 25149, 25151, 25153, 25154, 25155, 25146B, 25145B

# **Program Characteristics:**

# **Executive Summary**

Support services for the SUN Service System (SUN SS) Division of County Human Services (DCHS) include management and oversight functions for the contracted and county provided direct services in the system, as well as the development and maintenance of partnerships with the system's funders and stakeholders. The 21 FTE in this division are responsible for direct service provision, contract management, technical assistance and training, program monitoring, data collection, reporting and coordinating service delivery associated with the SUN Service System. The SUN SS serves more than 63,000 people annually.

# **Program Description**

SUN SS administration staff has responsibility for leadership, partnership development, direct staff supervision and program oversight for the SUN Service System. It is responsible for data collection, technical assistance, training and reporting functions for the SUN SS and the Community Services divisions of the DCHS. Responsibilities include supporting the overall County policy promoting school age services, ensuring high quality services by both County staff and contracted service providers, maintaining communication internally and with the SUN Service System and partner communities. It provides oversight for the contract management functions related to the SUN SS and ensures that accurate data is collected and reported to stakeholders, contractors, the BCC and to funders. Last year, the SUN SS saw significant impact on its antipoverty goals of increasing school success and self-sufficiency. 73% of students served increased state benchmark scores in reading. Average daily attendance for students served was 94%. About 92% of families had permanent housing at exit from services.

# **Program Justification**

Adequate administrative support reaches the overall Accountability priority. The SUN Service System provides an integrated system of social and educational support services for school-age youth and their families. It promotes school success as a means to alleviate poverty. The administrative functions described in this offer ensure that programs and activities are responsive and accountable to the BCC, stakeholders, clients, the community and funders.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of times school district & system partners meet to align and monitor services.	16	8	12	12
	% of funder required reports completed & submittedon time.	100.0%	100.0%	100.0%	100.0%
Output	# of group data system trainings held	48	48	66	66

#### **Performance Measure - Description**

Alignment and monitoring meetings include meetings of: SUN SS Districts Council, SUN Core Services Workgroup, SUN Allocation Workgroup, SUN System Integration Workgroup, SUN Evaluation Workgroup, and grant policy and sustainability groups.

# Version 6/11/2009 s

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$775,440	\$0	\$739,538	\$0
Contracts	\$100,000	\$0	\$94,880	\$0
Materials & Supplies	\$14,652	\$0	\$14,652	\$0
Internal Services	\$111,408	\$0	\$139,787	\$0
Subtotal: Direct Exps:	\$1,001,500	\$0	\$988,857	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$1,001,500	\$0	\$988,857	\$0
Program Total:	\$1,00	1,500	\$988	3,857
Program FTE	8.04	0.00	7.50	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$988,857

Significant Program Changes

Last year this program was: #25143, SUN Service System Administration



# Program # 25145A - SUN Community Schools

**Priority:** 

Education

Existing Operating

Program Offer Type:

Lead Agency: Program Contact: County Human Services Peggy Samolinski

Version 6/22/2009 s

Related Programs: 40024, 25139, 25143, 25144, 25146A, 25149, 25151, 25153, 25154, 25155, 25146B, 25145B

### **Program Characteristics:**

# **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. These 45 full-service sites serve approximately 13,000 students, 67% of whom receive free or reduced lunch rates. 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, 73% of participants improved benchmark scores and had a 95% school attendance rate. 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 Community Schools provide a comprehensive array of social and support services that allow 13,000 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 45 elementary, middle and high schools. They include: 1) social and health services to meet basic needs; 2) extended-day 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 CS is a national model and services are based on best practices and tied to the needs of local neighborhoods and schools. SUN CS is a collaborative partnership with the city of Portland, school districts, non-profits, state and the county.

# **Program Justification**

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. Basic needs of children and families are met through a comprehensive set of social and support services. SUN CS support parents and caregivers in preparing students to learn (through parent educational nights, classes, etc.). Student academic performance is promoted through extended-day activities, classes, tutoring and mentoring. SUN CS enhance student engagement, leadership and resilience through youth development activities, small group size, significant adult relationships and relevant, culturally-appropriate programs. 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. About 69% of participants met reading benchmarks and 79% improved classroom academic performance. SUN CS serve the neediest children, targeting those living in poverty and performing below standards. About 61% are racial/ethnic minorities and 67% qualify for free and reduced lunch (compared to 48% in the districts). SUN CS contribute to closing the achievement gap, with participants of color showing higher academic gains than Caucasian participants. This offer aligns with the recommendations of the SUN Service System Coordinating Council.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of children ages 5-18 served <sup>1</sup>	12,949	9,200	11,000	9,200
Outcome	% who improve state test scores in Reading	73.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended <sup>2</sup>	95.0%	90.0%	92.0%	92.0%
Outcome	% who improved classroom behavior	70.0%	75.0%	75.0%	75.0%

# Performance Measure - Description

<sup>1</sup>Actuals and estimates for # served reflect SUN CS exceeding purchased amounts due to additional resources leveraged beyond County funding. DCHS does not presume continued contractor "overperformance" in projections. Outputs reflect the annual number served; outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshhold; 6,376 children participated at this level last year. <sup>2</sup> 92% attendance rate is considered Annual Yearly Progress as defined by No Child Left Behind.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$90,120	\$44,791	\$95,387	\$40,920
Contracts	\$2,643,612	\$464,021	\$2,637,278	\$477,247
Materials & Supplies	\$3,535	\$1,000	\$4,535	\$7,040
Internal Services	\$30,483	\$4,821	\$24,477	\$4,268
Subtotal: Direct Exps:	\$2,767,750	\$514,633	\$2,761,677	\$529,475
Administration	\$472,816	\$0	\$564,314	\$0
Program Support	\$172,885	\$0	\$133,935	\$0
Subtotal: Other Exps:	\$645,701	\$0	\$698,249	\$0
Total GF/non-GF:	\$3,413,451	\$514,633	\$3,459,926	\$529,475
Program Total:	\$3,92	8,084	\$3,98	9,401
Program FTE	0.90	0.60	1.00	0.50
Program Revenues				
Indirect for dep't Admin	\$2,193	\$0	\$1,726	\$0
Intergovernmental	\$0	\$514,633	\$0	\$529,475
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$2,193	\$514,633	\$1,726	\$529,475

# Explanation of Revenues

City of PDX Parks & Rec - \$311,571 St Dept of Ed ODE21C - \$150,382 Oregon Community Schools - \$67,522 County General Fund - \$2,761,677

Significant Program Changes

Significantly Changed

Last year this program was: #25145A, SUN Community Schools



**Priority:** 

# Program # 25145B - SUN Community Schools - Scale

Education

Program Offer Type: Existing Operating

Lead Agency: Program Contact: County Human Services Peggy Samolinski

Version 2/27/2009 s

Related Programs: 40024, 25139, 25143, 25144, 25145A, 25146A, 25149, 25151, 25153, 25154, 25155, 25146B

Program Characteristics: Backfill State/Federal/Grant

# **Executive Summary**

This offer provides backfill to maintain current service level at two SUN Community Schools with state grant funding that is ending or diminishing. These schools serve approximately 540 high poverty students and their families. Without this increased general fund, these two sites will severely limit services and may have to close as full-service community schools. Last year at these two sites, students showed strong academic gains and had a 94% average daily school attendance. SUN CS is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families. These schools together with those in offer #25145A make up the current service level.

# **Program Description**

This offer is for SUN CS services at Marshall High School in Portland Public Schools and Harold Oliver Primary (HOP) in Centennial School District. SUN CS in this offer provide a comprehensive array of social and support services that allow more than 540 students to come to school ready to learn and succeed academically and that foster family success. Services are developmentally appropriate and operate year-round. They include: 1) social and health services to meet basic needs; 2) extended-day Activities; 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. This offer maintains services at these high-need schools and increases geographic equity by preserving service access in the Centennial School District, which has a high concentration of poverty and English Language Learners. These schools are among the most needy in the County. According to the Poverty Index used by SUN Service System to determine need, Marshall is the highest ranked high school and HOP is in the top two quartiles of the county's 153 schools in terms of poverty. SUN CS services are based on best practices and tied to the needs of local neighborhoods and schools.

# **Program Justification**

SUN CS support education priority strategies. Basic needs of children and families are met through a comprehensive set of social and support services. SUN CS support parents and caregivers in preparing students to learn. Student academic performance is promoted through extended-day activities, classes, tutoring and mentoring. Research demonstrates that SUN CS are effective in improving student academic success and attendance, as well as engagement, behaviors and other skills that lead to life success. Marshall and HOP SUN CS have shown significant impact in the school and community. At Marshall, SUN CS regular participants gained seven credits on average (six credits per year are needed to be on track for graduation); 92% of 9th-11th graders remained in school the following year and 96% of seniors graduated. At HOP, 84% of students met/exceeded reading benchmarks and 73% math. Loss of this funding would result in hundreds of vulnerable children and family members (estimated 300-400 children and more than 150 adults) losing service and may ultimately result in the closure of the community school sites. This would have a significant impact on student achievement, poverty and family stability in these communities and would create a gap in the service system in this critical area of outer SE and East County. SUN CS serve the neediest children targeting those living in poverty and performing below standards. In these two schools, 69% of students qualify for free and reduced lunch (compared to 48% in the districts) and 51% are ethnic minorities. This of the SUN Service System Coordinating Council, which supports sustaining existing community school sites so that the capacity and relationships built and investments made over the last 5 years are not lost.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of children ages 5-18 served	542	400	400	400
Outcome	% who improve state test scores in Reading	73.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended	95.0%	90.0%	92.0%	92.0%
Outcome	% who improved classroom behavior	70.0%	75.0%	75.0%	75.0%

#### **Performance Measure - Description**

# served are for the two SUN CS sites in this offer; outcomes are for the current service level at 45 SUN CS.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds		
Program Expenses	2009	2009	2010	2010		
Contracts	\$0	\$93,000	\$93,000	\$0		
Subtotal: Direct Exps:	\$0	\$93,000	\$93,000	\$0		
Administration	\$0	\$0	\$0	\$0		
Program Support	\$0	\$0	\$0	\$0		
Subtotal: Other Exps:	\$0	\$0	\$0	\$0		
Total GF/non-GF:	\$0	\$93,000	\$93,000	\$0		
Program Total:	\$93	\$93,000		\$93,000		
Program FTE	0.00	0.00	0.00	0.00		
Program Revenues						
Intergovernmental	\$0	\$93,000	\$0	\$0		
Program Revenue for Admin	\$0	\$0	\$0	\$0		
Total Revenue:	\$0	\$93,000	\$0	\$0		

**Explanation of Revenues** 

County General Fund - \$93,000

Significant Program Changes

Last year this program was: #25145A, SUN Community Schools



**Priority:** 

Education

**Existing Operating** 

Program Offer Type:

Lead Agency: Program Contact: County Human Services Peggy Samolinski

Version 6/11/2009 s

Related Programs: 25139, 25143, 25144, 25145A, 25146A, 25151, 25153, 25154, 25155, 25146B, 25145B

**Program Characteristics:** 

# **Executive Summary**

Social and Support Services for Educational Success program (SSSES) fosters academic achievement by providing yearround school-linked, age appropriate and culturally specific academic support, case management, family engagement, and skill building groups. The SSSES serves approximately 1500 high-risk youth, 87% of whom are ethnic minorities. SSSES has demonstrated success in returning and keeping youth in school, with 94% of clients attending public school full time and a 90% school attendance rate. SSSES is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

# **Program Description**

Social and Support Services for Educational Success provides services for 1,500 high-risk youth (6-17) and their families so that youth remain in or return to school. These services are delivered at community and school sites to youth attending regular and/or alternative schools who are at risk of academic failure. SSSES target six specific populations of youth and families of color: African American, African Immigrant, Asian Pacific Islander, Latino, Native American and Slavic, in addition to Caucasian youth. Key services include: case management with identified academic and life goals; skill building groups; academic support activities such as tutoring, mentoring, reading club, gender-specific groups, and conflict resolution classes; and parent outreach/engagement. With a culturally specific focus on youth and families, SSSES staff work with SUN Community School programs and other school personnel. About 71% of students served last year increased state benchmark scores in reading and 72% in math.

# **Program Justification**

SSSES is directly tied to the education priority. Youth in this program are at risk for academic failure due to poor attendance, failing grades, language barriers, family instability and behavior issues: 90% of youth served in FY08 were at risk. Case managers build supportive and mentoring relationships with youth that allow them to build personal assets leading to school and life success. In the report "Critical Hours," Dr. Beth Miller argues that mentor relationships and supports "build intrinsic motivation and initiative" in adolescents who often experience alienation from adults and have a tendency to engage in risky behavior. Developing a consistent relationship with a trusted, caring adult is a primary identified issue by the youth served. SSSES services that meet basic needs allow youth to focus on school and provides their caregivers with the resources to support educational success. SSSES engage youth at risk for academic failure in a variety of school and community activities. Increased access to social services and additional learning opportunities outside of, but connected to, the classroom have been shown as "promising practices" to reducing the achievement gap. SSSES provides this link - in schools and in the community.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# served	1,573	2,000	1,735	1,735
Outcome	% who improve state test scores in reading	71.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended	90.0%	90.0%	90.0%	90.0%

# **Performance Measure - Description**

Outcomes are analyzed for students who participate for 45 days or more; for FY08, 945 students participated at that level.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$81,504	\$0	\$95,389	\$0
Contracts	\$1,761,422	\$357,366	\$1,761,420	\$332,351
Materials & Supplies	\$2,221	\$0	\$2,221	\$0
Internal Services	\$13,999	\$0	\$18,638	\$0
Subtotal: Direct Exps:	\$1,859,146	\$357,366	\$1,877,668	\$332,351
Administration	\$312,060	\$0	\$344,567	\$0
Program Support	\$114,475	\$0	\$86,605	\$0
Subtotal: Other Exps:	\$426,535	\$0	\$431,172	\$0
Total GF/non-GF:	\$2,285,681	\$357,366	\$2,308,840	\$332,351
Program Total:	\$2,64	3,047	\$2,64	1,191
Program FTE	0.90	0.00	1.00	0.00
Program Revenues				
Intergovernmental	\$0	\$357,366	\$0	\$332,351
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$357,366	\$0	\$332,351

# **Explanation of Revenues**

OCCF - \$332,351 County General Fund - \$1,877,668

# Significant Program Changes

Significantly Changed

Last year this program was: #25149, Social & Support Svcs for Education Success



#### Program # 25151 - Parent Child Development Services

**Priority:** 

Education

**Existing Operating** 

Program Offer Type:

Lead Agency: Program Contact: County Human Services Peggy Samolinski

Version 4/08/2009 s

Related Programs: 25139, 25143, 25144, 25145A, 25146A, 25149, 25153, 25154, 25155, 25146B, 25145B

# **Program Characteristics:**

# **Executive Summary**

Parent Child Development Services (PCDS) serves approximately 600 families, using a nationally recognized, evidence based curriculum, Parents As Teachers. PCDS provides services for young children (birth through age 5) and their parents to promote positive parenting, healthy child development and school readiness. This program aligns with the Early Childhood Framework is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families. This offer seeks County General Fund to maintain this program in FY10.

#### **Program Description**

Parent Child Development Services provide an evidence based curriculum to 700 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, 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 delivered in both community sites and in school sites. They are developmental and culturally appropriate. Parents As Teachers (PAT), an evidence-based curriculum is used as the foundation for intervention with families. Last year, at the time of exit from the program 98% of children served had up to date immunizations and 91% were within a normal developmental stage. All of the parents gained new skills from program participation.

#### **Program Justification**

Parent Child Development Services supports the Education priority and is an important service component in the Early Childhood Framework. 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 and promote school readiness. These opportunities are critical for families struggling to meet basic needs and who may not have other such opportunities; 45% of families who participated in the program in FY08 were at or below the Federal Poverty Level. The Oregon State University's Family Study Center 1998 research shows a strong correlation between 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. Likewise school completion impacts adult success in life. Child development programs are an important gateway in this continuum.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# families served	718	600	600	600
Outcome	% of children up to date on immunizations	98.0%	95.0%	95.0%	95.0%
Outcome	% children screened who are at appropriate developmental stage at exit	91.0%	90.0%	90.0%	90.0%

**Performance Measure - Description** 

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$90,561	\$0	\$95,389	\$0
Contracts	\$1,186,615	\$177,516	\$1,208,828	\$165,090
Materials & Supplies	\$2,303	\$0	\$2,303	\$0
Internal Services	\$10,604	\$0	\$2,219	\$0
Subtotal: Direct Exps:	\$1,290,083	\$177,516	\$1,308,739	\$165,090
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$1,290,083	\$177,516	\$1,308,739	\$165,090
Program Total:	\$1,46	7,599	\$1,47	3,829
Program FTE	1.00	0.00	1.00	0.00
Program Revenues				
Intergovernmental	\$0	\$177,516	\$0	\$165,090
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$177,516	\$0	\$165,090

# **Explanation of Revenues**

OCCF - \$165,090 County General Fund - \$1,213,350

# Significant Program Changes

Last year this program was: #25151, Child Development Services



# Program # 25154 - Alcohol, Tobacco & Other Drug Services

**Priority:** 

Program Offer Type:

**Basic Needs** 

Existing Operating

Lead Agency: **Program Contact:**  **County Human Services** Peggy Samolinski

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**Related Programs:** 25139, 25143, 25144, 25145A, 25146A, 25149, 25151, 25153, 25155, 25146B, 25145B

## **Program Characteristics:**

# **Executive Summary**

This program provides alcohol and drug screening, assessment, referral, outreach and Level I treatment to children aged 12-17 and their families. These services screen 300 youth for drug and alcohol issues and connect them with treatment as needed, either through third party insurance or 60 treatment slots funded in this offer. This program is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

#### **Program Description**

Alcohol, Tobacco and Other Drug (ATOD) services are 75% screening, assessment, linkage and referral, outreach and prevention and 25% treatment. This approach identifies youth with substance abuse issues and links them to treatment services; provides outpatient treatment for identified youth; and educates youth about the risks of ATOD use. Screening offers a review of drug and alcohol use to determine behaviors and patterns that may require further assessment. Assessment involves a more in depth interview with the youth and his/her family about drug and alcohol use. This results in a rapid referral and connection to treatment. The program leverages third party insurance for youth who have insurance. Direct treatment slots within the program are targeted to those without other resources. Prevention and Outreach activities include skill-building groups (teaching refusal skills, for example) and groups for youth who are at risk for (but not yet demonstrating) substance abuse, such as children from drug-affected families. This program offers early intervention through education, screening, assessment and referral.

#### **Program Justification**

This program supports the Education priority. By reducing or eliminating ATOD use, the program helps youth remain in school thus increasing the likelihood they will be successful academically and, ultimately, have a healthy and self-sufficient adulthood. Research indicates that the more successful a young person is in school, the less likely he/she is to use, abuse or become dependent on ATOD. This program offers early intervention through education, screening and assessment and provides an important gateway into other youth ATOD services throughout the county. In the Oregon Healthy Teens 2006 survey, 24% of county 8th graders said they drank alcohol in the previous 30 days. Early ATOD use is strongly correlated with future use. Early intervention is key to breaking the cycle; and the earlier the intervention, the better the likelihood of preventing substance abuse. Most other youth ATOD services focus only on treatment. This program targets youth early to avoid long-term use and the need for treatment services. It provides an important and unique entry point into other youth ATOD treatment programs throughout the county.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# youth served	355	300	300	300
	% youth who participate in treatment who reduce use of ATOD	90.0%	70.0%	70.0%	70.0%

#### **Performance Measure - Description**

Performance trends are reviewed over a several year period to determine if changes in targets are needed. This year we did not increase the target for % of youth who participate in treatment who reduce use of ATOD; this will be reassessed in FY10 based on performance trends.

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$9,057	\$0	\$0	\$0
Contracts	\$190,386	\$0	\$200,020	\$0
Materials & Supplies	\$140	\$0	\$0	\$0
Internal Services	\$1,209	\$0	\$0	\$0
Subtotal: Direct Exps:	\$200,792	\$0	\$200,020	\$0
Administration	\$26,614	\$0	\$31,769	\$0
Program Support	\$9,792	\$0	\$9,056	\$0
Subtotal: Other Exps:	\$36,406	\$0	\$40,825	\$0
Total GF/non-GF:	\$237,198	\$0	\$240,845	\$0
Program Total:	\$237	7,198	\$240	),845
Program FTE	0.10	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$200,020

Significant Program Changes

Last year this program was: #25094B, Family and Youth Addiction Treatment Continuum SUN SS Scale



# Program # 25155 - Services for Sexual Minority Youth

**Priority:** 

Education

Program Offer Type:

Existing Operating

Lead Agency: **Program Contact:**  **County Human Services** Peggy Samolinski

**Related Programs:** 25139, 25143, 25144, 25145A, 25146A, 25149, 25151, 25153, 25154, 25146B, 25145B

# **Program Characteristics:**

# **Executive Summary**

This program offers counseling, skill building and support services to over 300 sexual minority youth (SMY). Its impact is enhanced through technical assistance and training to approximately 400 SUN Service System, school and other direct service staff to work effectively with sexual minority youth. The program increases school retention and success; last year 79% of youth served re-enrolled or remained in school. About 98% of training participants reported an increased knowledge of SMY issues and competency in serving these youth. SMY 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 Services for the Sexual Minority Youth program provides community-based services specifically designed to meet the needs of SMY youth and their families so that youth remain in and/or return to school. Direct services to SMY include counseling services, leadership development and support groups. The program provides operational support for the Sexual Minority Youth Resource Center so that SMY youth have a supportive environment for socialization and peer support. These direct services comprise 70% of program funding. Technical assistance, training and support to SUN Service System staff, schools and partners increases the awareness of the issues that SMY youth face, and increases competency in working with SMY youth. This is the only county-funded program focused on Sexual Minority Youth.

## **Program Justification**

This program supports the Education priority. The program utilizes a two pronged approach:1) providing direct services and a safe place in which SMY youth can feel comfortable and participate in supportive services that reflect their unique needs and 2) enhancing the understanding and skill levels of community providers to provide competent and relevant services to SMY youth. Due to difficulties with family, peers and the broader community, SMY 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. About 72% of youth served last year by the SMY program reported a reduction in risky behaviors. Research has found a direct link between academic performance and experiences of harassment and unsafe learning environments. The 2005 "From Teasing to Torment: School Climate in America Survey" conducted by the Gay, Lesbian, Straight Education Network (GLSEN) found that 90% of lesbian, gay, bisexual and transgendered (LBGT) students report verbal harassment at school. About 66% reported feeling unsafe at school because of their sexual orientation. A Seattle study found that 28% of SMY youth dropped out of school. The direct service components provide support for SMY youth outside of school, so that they will remain in or re-enroll in school.

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# served in counseling and Resource Center Services	295	300	300	300
	% of resource center youth who re-enroll or remain in school <sup>1</sup>	79.0%	60.0%	60.0%	60.0%
	% of training participants who increase knowledge about sexual minority issues <sup>1</sup>	98.0%	85.0%	85.0%	85.0%

#### **Performance Measure - Description**

<sup>1</sup> Performance trends are reviewed over a several year period to determine if changes in targets are needed. This year, we did not increase the target for % of youth who re-enroll or remain in school. This will be reassessed in FY10 based on performance trends.

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	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$7,362	\$0	\$0	\$0
Contracts	\$104,843	\$0	\$104,843	\$0
Materials & Supplies	\$201	\$0	\$0	\$0
Internal Services	\$941	\$0	\$0	\$0
Subtotal: Direct Exps:	\$113,347	\$0	\$104,843	\$0
Administration	\$15,024	\$0	\$16,985	\$0
Program Support	\$5,527	\$0	\$4,842	\$0
Subtotal: Other Exps:	\$20,551	\$0	\$21,827	\$0
Total GF/non-GF:	\$133,898	\$0	\$126,670	\$0
Program Total:	\$133	3,898	\$126	6,670
Program FTE	0.08	0.00	0.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# Explanation of Revenues

County General Fund - \$104,843

Significant Program Changes

Significantly Changed

Last year this program was: #25155, Services for Sexual Minority Youth



#### Program # 25156A - Bienestar Social Services

**Priority: Basic Needs** Program Offer Type: Existing Operating **Related Programs:** 40026, 25156B

# **Program Characteristics:**

# **Executive Summary**

Bienestar de La Familia (Well-being of the Family) Social Services provides case-management, information and referral, service linkage, coordination and resource recruitment to address the needs of the Latino community and other immigrant populations. In particular the site has seen a significant growth in African Immigrant families participating in services. The program provides culturally specific and linguistically appropriate services to 300 children, adults and parents in order to impact poverty, promote family stability, support academic success and assist families to meet basic living needs. This program works closely with staff in La Clinica de al Buena Salud (Health Clinic) at the site.

#### **Program Description**

Bienestar Social Services is sited fulltime at the Baltazar Ortiz Community Center and is part of a multi-disciplinary team. This team includes mental health/drug and alcohol and healthcare services and partners with Hacienda CDC. Services in this offer include individual and family case management, service coordination and crisis intervention to ensure that children and families' basic needs are met for food, stable housing, energy assistance, parenting skills, employment, clothing, physical and mental health. Solution-focused case management is provided to children and families experiencing complex, single or multiple issues that affect their ability to attain or maintain school success, healthy family functioning and self-sufficiency. Yearly, approximately 75 families received case management services. Although primarily focused on serving the Latino community, the program has expanded to include culturally specific services for Somali immigrants and refugees and Russian-speaking families as those populations have grown in the nearby housing complex and neighborhood. On-site service coordination includes recruitment, coordinating use of the community building, developing and maintaining partnerships, facilitating and staffing service provider meetings.

# **Program Justification**

This program supports many of the basic living needs priorities. Bienestar is unique because it provides multi-entry access to a wide range of basic services for a large population of Latinos and other immigrants. Bienestar serves a large and growing population in the county that is traditionally underserved. Services are provided at the Ortiz Center and across the county in families' homes, schools and other locations. The nutrition/food program serves more than 250 immigrant and refugee families a month. The anti-poverty programs promote self-sufficiency by providing job training and school support services. In 2007-08 through a partnership with the city of Portland's School-Family-Housing Initiative, case managers leveraged and delivered \$88,000 rent assistance to needy families. Bienestar links with other countywide efforts that serve the unique needs of the Cully neighborhood. The program also initiates consultation and coordination efforts with other providers to build cultural competency among them and lead efforts to solve community problems.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of individuals served by case management	284	300	300	300
Outcome	% of families entering w/unstable housing that are in permanent housing at exit	0.0%	75.0%	75.0%	75.0%
Output	# families who received food to meet basic needs	2,675	2,700	2,700	2,700

# **Performance Measure - Description**

Measure Changed

Last year's offer was joint between the Department of County Human Services (SUN Service System Division & Mental Health and Addictions Division) and the Health Department, and measures reflected a variety of outcomes across the three programs. Measures in this offer are new and reflect specific measures for Bienestar Social Services. The housing outcome is being collected starting in FY 08-09.

All of the 2007-2008 performance measures are available for the previous submitted offer.

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Lead Agency: **Program Contact:**  **County Human Services** Peggy Samolinski

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$259,174	\$0	\$346,688	\$0
Materials & Supplies	\$6,395	\$0	\$6,395	\$0
Internal Services	\$41,498	\$0	\$62,377	\$0
Subtotal: Direct Exps:	\$307,067	\$0	\$415,460	\$0
Administration	\$40,700	\$0	\$50,523	\$0
Program Support	\$14,974	\$0	\$14,402	\$0
Subtotal: Other Exps:	\$55,674	\$0	\$64,925	\$0
Total GF/non-GF:	\$362,741	\$0	\$480,385	\$0
Program Total:	\$362	2,741	\$480	),385
Program FTE	2.80	0.00	3.30	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$415,460

# Significant Program Changes

Last year this program was: #25156A, Bienestar/ La Clinica Health and Social Services



# Program # 25156B - Bienestar Mental Health Services

**Priority:** 

**Basic Needs** Program Offer Type: Existing Operating

**Related Programs:** 40020, 40024, 25067, 25156A

## **Program Characteristics:**

# **Executive Summary**

Bienestar de La Familia (Wellbeing of the Family) is a multidisciplinary approach serving a large Latino community. Bienestar provides culturally specific, linguistically appropriate direct mental health and addiction treatment services to children, adolescents, adults and families at sites throughout Multnomah County. Qualified mental health professionals and an Addiction Specialist served 616 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 88% 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. Purchase of this offer would restore mental health services to the Bienestar site.

# **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 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.

#### **Program Justification**

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

# **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Total unduplicated children, families and adults served	616	2,000	615	615
	% of uninsured children and families receiving mental health services in Spanish	88.0%	84.0%	85.0%	85.0%

## **Performance Measure - Description**

Last year the Program Offer 25156 was a joint offer with the Health Department (La Clinica) and the Office of School and Community Partnerships (Bienestar Social Services) so the current year purchased figures included those served by La Clinica and Bienestar Social Services.

Previous year actual, current year estimate and next year offer include only the individuals served by Bienestar mental health and addiction staff.

# Version 4/08/2009 s

Lead Agency: **Program Contact:**  **County Human Services** Peggy Samolinski

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$261,198	\$0	\$270,476	\$0
Materials & Supplies	\$4,778	\$0	\$4,778	\$0
Internal Services	\$87,607	\$0	\$0	\$0
Subtotal: Direct Exps:	\$353,583	\$0	\$275,254	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$353,583	\$0	\$275,254	\$0
Program Total:	\$353,583		\$275,254	
Program FTE	2.80	0.00	2.80	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

County General Fund - \$275,254

# **Significant Program Changes**

Last year this program was: #25156A, Bienestar/ La Clinica Health and Social Services

The program offer was combined last year with the Health Department and School and Community Partnerships. The Bienestar mental health consultants and alcohol and drug specialist continue to provide the same program. Purchase of this offer plus the other Bienestar offer (25156A) brings the program to the current level of funding.

Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.

# **Significantly Changed**