

**Department:** Health Department      **Program Contact:** Sara McCall  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 4007A, 40010B, 40048  
**Program Characteristics:**

### Program Description

Communicable disease control is a foundational public health program that no other entity can carry out. Oregon law determines what diseases are reportable to governmental public health. Communicable Disease Services (CDS) receives these reports and implements state guidelines for response.

CDS aims to lessen the impact of communicable diseases in Multnomah County by reducing disease spread. CDS keeps people safe by using the statutory authority to collect and analyze data about communicable diseases, investigate outbreaks, and implement disease-specific interventions.

The Communicable Disease (CD) and Sexually Transmitted Infections (STI) teams investigate reportable communicable diseases, which is a core governmental public health function. Through individual interviews, teams determine illness causes and identify people and settings who may be exposed. Teams recommend interventions such as isolation and quarantine, infection control practices, health education and behavior changes to halt disease spread. The teams respond to disease outbreaks in settings such as restaurants, long term care facilities, schools/daycares, and shelters. The STI team provides partner notification services as recommended by the Oregon Health Authority (OHA).

The Tuberculosis (TB) case management team investigates possible TB infections in the community and ensures people diagnosed with TB disease adhere to their treatment plan, another core governmental public health function. Per OHA guidelines, they test contacts to TB clients and offer treatment for latent TB infection (LTBI) if needed. The team also evaluates TB in newly arrived refugees, which is required of local public health by OHA and the Centers for Disease Control and Prevention (CDC).

CDS contributes data to an international disease surveillance system, sharing crucial information with OHA and CDC for tracking communicable disease threats. CDS is the only entity in Multnomah County that can provide this data.

### Performance Measures

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number of disease report responses (CD, TB, STI)	5,065	4,750	4,538	14,000
Output	Percentage of syphilis and HIV cases investigated	76%	85%	70%	70%
Quality	Percent of tuberculosis (TB) clients completing treatment within 12 months	100%	96%	100%	96%
Quality	Percent of work/daycare/school-restrictable diseases with complete occupation and attendance information	n/a	80%	99%	99%

### Performance Measures Descriptions

1) Historically only reported on CD disease responses; the higher FY26 target reflects the addition of STI, LTBI, and TB data for FY26. 2) All TB patients, for whom 12 months of treatment or less is recommended, alive at diagnosis, initiated treatment with one or more drugs, and counted. 3) Percentage of newly reported HIV and syphilis cases that are successfully interviewed by DIS case investigators. 100% of cases are initiated to attempt an interview. 4) These diseases include diphtheria, measles, mumps, Salmonella Typhi, shigellosis, STEC, hepatitis A & E, pertussis, and rubella.

## Legal / Contractual Obligation

ORS Chapters 433.OAR 333, Divisions 17, 18, 19. OHA ACDP Investigative Guidelines, per OAR 333, Div. 19. OHA Program Elements 01, 03, 07, 10, 25, 43, 51, 73. OHA and CLHO Assurances.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2025	2025	2026	2026
Personnel	\$1,748,646	\$1,673,640	\$2,423,893	\$1,933,009
Contractual Services	\$55,110	\$18,180	\$47,627	\$208,534
Materials & Supplies	\$87,129	\$37,361	\$52,176	\$86,493
Internal Services	\$182,759	\$1,219,764	\$331,851	\$1,340,809
<b>Total GF/non-GF</b>	<b>\$2,073,644</b>	<b>\$2,948,945</b>	<b>\$2,855,547</b>	<b>\$3,568,845</b>
<b>Program Total:</b>	<b>\$5,022,589</b>		<b>\$6,424,392</b>	
<b>Program FTE</b>	9.11	8.99	13.73	11.99

Program Revenues				
Intergovernmental	\$0	\$2,678,004	\$0	\$3,288,222
Other / Miscellaneous	\$0	\$245,941	\$0	\$255,623
Service Charges	\$0	\$25,000	\$0	\$25,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,948,945</b>	<b>\$0</b>	<b>\$3,568,845</b>

## Explanation of Revenues

This program generates \$269,039 in indirect revenues.

\$13,180 - Intergovernmental, \$255,623 -Occupational Health Fees, \$331,500 - PHM Regional - CDS, \$196,004 - Metro Are Pertussis Surveillance, \$270,090 - HIV/STI Statewide Services(HSSS) Federal, \$629,229 - HIV/STI Statewide Services (HSSS) State, \$25,000 - CD-OHS/CDC HepB Perinatal Case Mgt, \$480,356 - PHN Local - CDS, \$999,047 - State Support for Public Health - CD, \$148,427 - TB Case Management, \$144,259 - TB Treatment and Case Management, \$76,130 for JYNNEOS Vaccine Efficacy

## Significant Program Changes

**Last Year this program was:** FY 2025: 40010A Communicable Disease Prevention and Control

FY 2026 FTE changes: 6.00 FTE Disease Intervention Specialists (DIS) and 1.00 Program Supervisor moved from PO 40010B to 40010A.

Changes to existing structures/teams: Added 1.00 Program Supervisor to Management

CD: Removed 2.00 FTE CHN, 1.00 Epidemiologist, 1.00 Program Tech (LD) and added 3.00 DIS; STI: 1.00 DIS (vacant);

TB: Removed 0.80 FTE CHN, 1.00 Nursing supervisor, 1.00 CHS2

Funding: EISO/HSSS: \$0 in FY 2025; \$900,300 in FY 2026 (added to cover FTE moved from 40010B to 40010A); General Fund: \$1,930,576 in FY 2025; \$2,936,110 in FY 2026; PHM Local: \$1,033,913 in FY 2025; \$480,356 in FY 2026; PHM Regional: \$301,015 in FY 2025; \$0 in FY 2026 (moved to 40048)