

Program #40010B - Communicable Disease Clinical and Community Services **FY 2024 Adopted**

Department: Health Department **Program Contact:** Kim Toevs
Program Offer Type: Existing **Program Offer Stage:** Adopted
Related Programs:
Program Characteristics: Backfill State/Federal/Grant

Executive Summary

Communicable Disease (CD) is a foundational public health program that protects the health of the community by preventing, identifying, and treating specific infectious diseases, as well as tracking patterns of disease to inform programming and community. CD Clinical and Community Services provides sexual health services and community testing/prevention outreach to prevent STD and HIV transmission and provides limited tuberculosis (TB) evaluation and treatment. Immunization and testing services related to COVID-19 are in program offer 40010C.

Program Description

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

Multiple racial disparities persist for STIs, including HIV. Addressing these disparities is a prioritized strategy for reducing overall disease burden. Prevalence and interview data identify disparities, as well as transmission modes and patterns driving the disproportionate impact. Program leadership reviews data monthly through dashboards, and the program produces new tools when needed. Outreach engages and offers testing to communities at highest need, including LGBTQ and homeless communities. Contracted culturally specific organizations help the program engage these communities. Other strategies include outreach at homeless camps, peer leaders, and ads on social media and hook-up sites. STD clinic surveys collect client input. The next survey will focus on how to better serve culturally specific communities. Due to a decrease in external funding, impacts are expected on the health and well-being of our community that will exacerbate existing health disparities among marginalized populations.

Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of clinical visits (STD, HIV, TB)	5,036	6,700	6,476	6,300
Outcome	Percent of all County gonorrhea/syphilis/HIV cases diagnosed through this program	14%	15%	14%	12%
Quality	Percent of syphilis/HIV cases investigated	78%	85%	78%	80%
Output	Number of patients initiated on HIV prevention medication (PrEP)	260	450	466	480

Performance Measures Descriptions

Measure 1: Includes STD, TB, and outreach testing. Measure 2: shows the impact and efficiency of the program to find, diagnose, and treat a significant portion of reportable STDs relative to the entire health care system. Measure 3: Percentage of newly reported HIV and syphilis cases that are successfully interviewed by DIS case investigators. 100% of cases are initiated to attempt an interview. Numbers are decreased for FY24 due to decreases in external funding.

Legal / Contractual Obligation

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

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$374,699	\$4,115,406	\$1,340,864	\$2,591,331
Contractual Services	\$124,681	\$2,412,167	\$0	\$541,784
Materials & Supplies	\$181,660	\$159,425	\$73	\$304,806
Internal Services	\$762,634	\$579,332	\$456,008	\$766,828
Total GF/non-GF	\$1,443,674	\$7,266,330	\$1,796,945	\$4,204,749
Program Total:	\$8,710,004		\$6,001,694	
Program FTE	2.80	32.45	7.55	18.57

Program Revenues				
Intergovernmental	\$0	\$7,045,823	\$0	\$3,853,542
Service Charges	\$0	\$220,507	\$0	\$351,207
Total Revenue	\$0	\$7,266,330	\$0	\$4,204,749

Explanation of Revenues

This program generates \$325,209 in indirect revenues.

STD/HIV/Hep C is funded by an intergovernmental agreement between Multnomah County as the local public health authority (LPHA) and the Oregon Health Authority for HIV prevention and State Support for Public Health disease investigation. Federal CDC and HRSA grants also contribute to program revenues. \$39,700 - HSO County Based Services, Federal \$250,000 - Surveillance Network - GY05, Federal \$ 369,138 - HIV Prevention Block - CTS Clinic, State \$ 1,894,286 - HIV Early Intervention & Outreach GY06, Federal \$10,500 - ELC Gonococcal Infections, Federal \$324,500 - Sexually Transmitted Diseases Client Services, State \$732,318 - Public Health Modernization Local - STD, State \$20,100 - TB Class B Waiver, Federal \$98,000 - TB Class B Waiver, \$170,599 - STD Program Mcaid FFS, \$3,753 - STD Program Mcaire, \$107,890 - STD Prog Pt Fee 3rd Party, \$68,965 - STD Program Pt Fees, Local \$115,000 - TBD Clackamas EISO in 403100

Significant Program Changes

Last Year this program was: FY 2023: 40010B Communicable Disease Clinical and Community Services

In FY 2023, the OHA 5 year HIV Early Intervention Services and Outreach (EISO) grant award ended. Beginning in January, 2023, OHA has continued funding EISO activities at a significantly reduced level. Budgeted EISO grant funding to the STD program area for FY24 is \$1,894,286 in contrast to the \$4,861,365 budgeted for FY23. The EISO grant operates on a calendar year grant cycle and funding reductions went into effect January, 2023, however the program has leveraged Public Health Modernization and other revenue to maintain previous staffing levels for the second half of FY23. Effective July 2023, major program adjustments will need to be implemented in order to fit into the constraints of the drastically reduced budget. This will include reductions to staffing and direct service delivery. Prioritization of services retained will be informed by surveillance and informatics data, utilizing an equity lens.