

Department: Health Department **Program Contact:** Kim Toevs
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Adopted
Related Programs: 40012, 40025
Program Characteristics:

Executive Summary

HIV, STDs and Hepatitis C account for almost 80 percent of all reportable diseases in the County. This cost effective program prevents and reduces epidemics, and their consequent toll on individual health by making over 40,000 outreach contacts; by controlling the spread of disease using evidence based prevention interventions and 6,750 clinical STD services for those at highest risk.

Program Summary

Prevention is the key strategy, using culturally specific, evidence-based population focused approaches. Disease spread is reduced by: 1) Partner Services: Staff contact infected people, encourage treatment, partner notification and behavior change. 2) Community Testing: Staff and subcontractors visit bars, jails, internet and other "hookup" sites to test, educate, and promote behavior change. 3) STD Clinic: Provides timely evaluation, treatment, and prevention counseling for people without health care access. STD rates highly correlate to poor access to quality, culturally competent, timely health care. 4) Partnerships: Collaborates with businesses, community organizations, and other counties to enhance capacity. Helps people at-risk link to care, drug treatment, counseling, etc. 5) Harm Reduction Services/Supplies: Syringe Exchange is proven to keep infection rates low among injectors, partners and their infants. Free condoms are distributed to 40 community locations. Overdose prevention supplies significantly reduce drug-related harm/deaths. 6) Behavior Change/Education: Community-based interventions to reduce risky sexual and drug behavior and to promote sexual health and relationship skills and knowledge. 7) Success: strong record of meeting national benchmark performance measures, nationally-recognized for innovation and program coordination, high client satisfaction across all demographics. Because these diseases disproportionately affect racial, ethnic and sexual minority communities, we base our service delivery on local epidemiology to prioritize reducing disparities. In place for 20+ yrs, this program is demonstrably effective. 8) Cost Effective: Preventing disease saves money over time. Delayed treatment increases disease spread and costly chronic conditions such as AIDS, liver disease, infertility and poor maternal/child health. Untreated, HIV leads to poverty, inability to work or maintain stable housing.

Performance Measures Below: 1. This performance measure quantifies the amount of non-clinical community-based outreach and education work the program provides each year. 2. This performance measure illustrates the impact of the STD/HIV/Hep C Program's ability to find, diagnosis, and treat reportable STDs, including HIV. This measure also demonstrates the program's capacity to target services to those at highest risk for STDs.

Performance Measures					
Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	# of community outreach/health promotion encounters	46,900	40,000	53,000	40,000
Outcome	% of all County gonorrhea/syphilis/HIV cases diagnosed through this program	31%	30%	37%	30%
Quality	% of gonorrhea/syphilis/HIV cases investigated	84%	90%	94%	90%
Quality	# of STD clinical encounters (visit/phone results)	8,121	6,750	7,720	6,750

Performance Measures Descriptions

3. The 90% goal is negotiated with the Oregon State STD Program, and is comparable to benchmarks set by other states nationally. If resources don't allow all cases to be investigated, a prioritization algorithm is applied. 4. This measure quantifies the amount of clinical service the program provides each year.

Legal / Contractual Obligation

ORS 433 mandates disease prevention & control. Ryan White CARE Act Part A requires local maintenance of effort for HIV prevention services. Oregon State DHS HIV Prevention contractual program elements. Oregon State DHS STD disease investigation assurances. CHAT grant requires training youth peer educators through African American houses of faith.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$1,935,760	\$601,621	\$1,957,080	\$804,510
Contractual Services	\$339,578	\$272,098	\$233,442	\$445,698
Materials & Supplies	\$144,550	\$174,344	\$244,546	\$135,480
Internal Services	\$310,236	\$340,631	\$298,180	\$375,320
Total GF/non-GF	\$2,730,124	\$1,388,694	\$2,733,247	\$1,761,007
Program Total:	\$4,118,818		\$4,494,255	
Program FTE	18.50	6.30	19.02	7.66

Program Revenues				
Indirect for Dept. Admin	\$89,052	\$0	\$113,306	\$0
Intergovernmental	\$0	\$1,196,323	\$0	\$1,538,012
Other / Miscellaneous	\$0	\$18,000	\$0	\$18,000
Service Charges	\$0	\$174,371	\$0	\$204,995
Total Revenue	\$89,052	\$1,388,694	\$113,306	\$1,761,007

Explanation of 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. The budget for FY2015 includes the \$65,000 increase for needle exchange added by the Board of County Commissioners in FY2014.

State Local Public Health Authority IGA: \$1,222,566
CDC STD Surveillance Grant: \$150,000; Medical Fees: \$ 204,995
HealthShare Wound Care: \$ 97,476; Federal Ryan White: \$37,970
Cascade AIDS Project: \$18,000; Youth Educator Grant: \$30,000

Significant Program Changes

Last Year this program was: 40011 STD/HIV/Hep C Community Prevention Program

Minor FTE changes include a Medical Tech and a part-time Administrative Analyst both added with new grant funding.