



Program #40011 - STD/HIV/Hep C Community Prevention Program

4/18/2018

Department: Health Department **Program Contact:** Kim Toevs
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Proposed
Related Programs: 40061, 40012, 40025
Program Characteristics:

Executive Summary

The STD/HIV/Hep C Community Prevention Program meets the statutory obligation to investigate and interrupt disease transmission as a core public health function. The program prioritizes efforts to reduce STD inequities among racial and sexual minority adolescents and young adults. It includes the critical services of disease tracking, partner notification, focused public health clinical services, and related wraparound services that link clients to services such as HIV care. These services remain critical functions as the county continues to see significant increases in syphilis and gonorrhea.

Program Summary

Multnomah County is succeeding in reducing new HIV cases through condom distribution, testing, linking infected individuals to HIV treatment, and preventing infection with medication called HIV Pre Exposure Prophylaxis (PrEP). New HIV cases decreased 24% in past two years from previous five-year average. The increase in STDs among County residents observed over the past five years continues. Comparing new rates this year to the past five-year average. There were 260 new syphilis cases identified (increase of 4%). A total of 2,085 new cases of gonorrhea (increase of 19%) and 5,230 new cases of chlamydia (increase of 23%). These infections threaten fertility and pregnancy outcomes and have permanent neurological consequences. The syphilis rate for gay and bisexual men is as much as 200 times higher than for heterosexual men. New syphilis cases are increasing among heterosexual women, which is very concerning due to potentially devastating outcomes in pregnancy. There have been seven cases of syphilis in pregnancy among County residents the past 12 months.

The STD/HIV/Hep C Community Prevention Program uses culturally-specific, evidence-based, population-focused approaches to prevent disease transmission. Program areas include: Partner Services - Disease Intervention Specialists contact infected people and their sex/needle-sharing partners, link them to testing and treatment, and counsel for behavior change. STD Clinical Services - Medical staff provide timely evaluation, treatment, and prevention counseling for people without health care access, including for rare, complex cases, in a judgment-free, culturally-relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals. Additionally, staff provide consultations and continuing medical education to medical providers in the community. The STD clinic is a designated training site for medical providers. Testing services are also provided in geographic areas of highest morbidity. Partnerships - Targeted community-based testing, health promotion, and condom distribution is provided through direct services and subcontracts with community partners. Collaboration with community organizations and health care systems enhance programmatic capacity. Epidemiology - Case investigation identifies population-level patterns of STD/HIV infection to inform health care and other systems to appropriately target resources and efforts. Multnomah County STD Clinic, in partnership with local public health lab surveillance, is one of only ten sentinel sites across the US that works with the Centers for Disease Control (CDC) to identify emerging drug-resistant strains of STDs.

Performance Measures

Measure Type	Primary Measure	FY17 Actual	FY18 Purchased	FY18 Estimate	FY19 Offer
Output	Number of STD and HIV test clinical encounters	5,330	5,000	5,500	5,000
Outcome	Percent of all County gonorrhea/syphilis/HIV cases diagnosed through this program	19%	20%	15%	15%
Quality	Percent of syphilis/HIV cases investigated	80%	85%	87%	85%
Output	Number of patients initiated on PrEP	127	150	160	150

Performance Measures Descriptions

2) Shows impact of program’s ability to find, diagnose, and treat reportable STDs and capacity to target services to those at highest risk. Decrease in FY18 due to community partner capacity to provide targeted testing. 3) Priority diseases recommended by CDC (high priority gonorrhea also investigated although not included here). 4) HIV PrEP is a new public health intervention implemented in FY17.

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.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2018	2018	2019	2019
Personnel	\$1,037,445	\$1,007,718	\$323,806	\$2,455,702
Contractual Services	\$159,444	\$238,500	\$134,863	\$1,674,969
Materials & Supplies	\$99,534	\$34,395	\$81,003	\$43,109
Internal Services	\$390,346	\$119,741	\$242,365	\$495,208
Total GF/non-GF	\$1,686,769	\$1,400,354	\$782,037	\$4,668,988
Program Total:	\$3,087,123		\$5,451,025	
Program FTE	8.51	10.78	2.77	22.50

Program Revenues				
Indirect for Dept. Admin	\$93,254	\$0	\$238,795	\$0
Intergovernmental	\$0	\$1,090,733	\$0	\$4,318,688
Service Charges	\$0	\$309,621	\$0	\$350,300
Total Revenue	\$93,254	\$1,400,354	\$238,795	\$4,668,988

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 for HIV prevention and State Support for Public Health disease investigation. Federal CDC and HRSA grants also contribute to program revenues.

State Local Public Health Authority IGA: \$829,913
Federal STD Surveillance Network Grant (SSuN): \$200,000
HIV EIO: \$3,181,744
PH Modernization: \$107,031
Medical Fees: \$350,300

Significant Program Changes

Last Year this program was: FY 2018: 40011 STD/HIV/Hep C Community Prevention Program