

Department:	Health Department	Program Contact:	Rachael Banks
Program Offer Type:	Existing Operating Program	Program Offer Stage:	As Requested
Related Programs:	40048, 40001		
Program Characteristics:	In Target		

Executive Summary

The Public Health Director provides leadership as the local public health authority (LPHA). The LPHA has the statutory responsibility to lead the public health system and report to the Board of Health who oversees the local public health agreement with the State. The LPHA also plays a unique and required governmental public health role by being responsible for guiding policies, systems, and programs that promote and protect the health of, and prevent disease for, all residents and diverse communities within Multnomah County. Equity-focused strategies include direct services, policy interventions, public education, and communications, community partnerships, planning, assessment, research, and evaluation.

Program Summary

The Office of the Director supports the Multnomah County Board of Health (BOH) in its authority and responsibility to set health policy for the county by identifying pressing public health issues through data, community wisdom, and promising practices. This coordination results in policy and systems level changes that reduce health disparities in the leading causes of preventable death. The current focus is chronic disease and injury prevention policy and systems interventions.

Leadership and Policy: Assessment and implementation of public health system reform; leadership on the Coalition of Local Health Officials, the Governor-appointed State Public Health Advisory Board, and convening the Multnomah County Public Health Advisory Board. Key activities include implementing public health education and communication campaigns.

Program Design and Evaluation Services (PDES): This program is a shared unit between local public health authority and the Oregon Health Authority. PDES provides Public Health Modernization evaluation and support; program and policy evaluation support; conducts applied public health research on key emerging issues to inform policy strategies; and collaborates with partners to improve community health, shape public policy, and reduce health inequities.

Community Partnerships & Capacity Building: Community Health Improvement Plan contracts with community partners/coalitions, identifies and implements community-driven recommendations addressing longstanding and persistent health inequities through aligning public health activities with community needs and priorities and shifting public health practice and organizational culture toward the elimination of health disparities.

Partnership Coordination: Coordinates division-level health equity work, community engagement, and partnerships to decrease health disparities. Strategies include: partnering with Pacific Islander, Latinx, Native American, and Alaska Native communities to support identification of priorities; working with Pacific Islander and Latinx communities; supporting cultural specific Community Health Worker certification training; and building and maintaining a culturally responsive workforce.

Performance Measures

Measure Type	Primary Measure	FY19 Actual	FY20 Budgeted	FY20 Estimate	FY21 Offer
Output	# of Multnomah County Public Health Advisory Board meetings	12	12	12	12
Outcome	# of policy and/or service system strategy presentations to the BOH	2	5	5	5
Output	# internal/external partners provided TA in applying culturally responsive partnership/equity strategies	15	20	25	20

Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$1,660,043	\$1,131,006	\$1,900,488	\$1,814,333
Contractual Services	\$975,109	\$385,000	\$452,433	\$960,500
Materials & Supplies	\$153,519	\$31,987	\$185,321	\$52,063
Internal Services	\$257,536	\$129,952	\$203,611	\$224,539
Total GF/non-GF	\$3,046,207	\$1,677,945	\$2,741,853	\$3,051,435
Program Total:	\$4,724,152		\$5,793,288	
Program FTE	11.49	6.77	12.07	10.68

Program Revenues				
Intergovernmental	\$0	\$1,677,945	\$0	\$2,851,435
Other / Miscellaneous	\$0	\$0	\$0	\$200,000
Total Revenue	\$0	\$1,677,945	\$0	\$3,051,435

Explanation of Revenues

This program generates \$212,275 in indirect revenues.

- \$ 719,500 - State grant: MCH Child and Adoles, PDES Morbidity Monitoring Project and Behavioral Risk Factor Survey System
- \$ 305,000 - Alaska Tobacco Prevention
- \$ 316,900 - DHS Multicultural HS
- \$ 197,000 - Alaska Obesity EAP
- \$ 545,000 - NIH Marijuana Legalization
- \$ 114,000 - Alaska Marijuana Program Evaluation
- \$ 130,765 - Public Health Modernization Local \$ 200,000 - HSO County Based Services - 404708

Significant Program Changes

Last Year this program was: FY 2020: 40001-20 Public Health Administration and Quality Management

For FY 2021, County General Fund was added to support staff and contracts to plan and implement culturally specific Latinx strategies. In addition, as part of divisional and program offer reorganizations, PDES is being consolidated into PHA-QM from FY 2020: 40048-20 Community Epidemiology. The Office of the Director will also have State Public Health Modernization funding (\$379,933) to support regional communicable disease datasharing and local strategies focused on Board of Health work; and Health Share of Oregon funding (\$200,000) to support Community Powered Change (Community Health Improvement Plan) strategies.