

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Requested  
**Related Programs:** 40001  
**Program Characteristics:** In Target

**Executive Summary**

The Public Health Office of the Director provides leadership for the local public health authority. Public Health, in partnership with the Multnomah County Board of Health (BOH), plays a unique, mandated governmental role. This program is 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 within the Office of the Director include policy interventions, public education and communications, community partnerships, planning, capacity building, and research, evaluation, and assessment.

**Program Summary**

The Office of the Director supports the BOH to set health policy for Multnomah County. The main goal is to reduce disparities experienced by BIPOC communities, especially chronic disease and injury disparities, to lower rates of the leading causes of preventable death. Activities include:

**Leadership and Policy** - Key activities include assessment and implementation of public health system reform; leadership on coalitions/boards; convening the Multnomah County Public Health Advisory Board (MC-PHAB); and implementing public health education and communication campaigns.

**Community Epidemiology (CE)** – Epidemiology/research staff and Program Design and Evaluation Services (PDES) identify and analyze health issues among community populations to guide data-driven response. CE collaborates with partners to identify the determinants of health and disease; assess health equity; and evaluate interventions, programs, and policies.

**Community Partnerships & Capacity Building** - Coordinating and implementing division-level community engagement and partnership strategies to address community priorities. Activities include convening groups to address BIPOC community concerns; supporting community partners' provision of Community Health Worker trainings; and implementation of the Community Health Improvement Plan (CHIP) to eliminate health disparities.

**Racial Equity** - The Office of the Director uses Oregon REALD, vital statistics, and surveillance data to analyze racial disparities. The Office works closely with BIPOC community members, partners, and coalitions to determine best approaches to address health inequities. MC-PHAB advises Public Health with a focus on ethics in public health practice and developing long-term approaches that address the leading causes of death. Board members represent various community groups to provide a diversity of perspectives, with a focus on recruiting BIPOC members. The Office also relies on feedback from community-based organizations to develop policy and system change.

**Performance Measures**

Measure Type	Primary Measure	FY20 Actual	FY21 Budgeted	FY21 Estimate	FY22 Offer
Output	# of Multnomah County Public Health Advisory Board meetings	13	12	12	12
Outcome	# of presentations to BOH about strategies that address disparities within BIPOC communities	5	5	5	6
Output	# of cultural specific and multicultural community partners and events that promote health equity	NA	NA	NA	50

**Performance Measures Descriptions**

Performance Measure 2: strategies are defined as policy and/or systems improvements and disparities are focused on leading causes of preventable death and disease.

## Legal / Contractual Obligation

Oregon Revised Statute Chapter 431 State and Local Administration and Enforcement of Public Health Laws

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
<b>Program Expenses</b>	<b>2021</b>	<b>2021</b>	<b>2022</b>	<b>2022</b>
Personnel	\$1,969,285	\$1,771,389	\$2,631,680	\$1,470,661
Contractual Services	\$452,433	\$960,500	\$441,677	\$777,419
Materials & Supplies	\$185,321	\$52,031	\$213,551	\$62,094
Internal Services	\$203,611	\$219,515	\$337,376	\$195,893
<b>Total GF/non-GF</b>	<b>\$2,810,650</b>	<b>\$3,003,435</b>	<b>\$3,624,284</b>	<b>\$2,506,067</b>
<b>Program Total:</b>	<b>\$5,814,085</b>		<b>\$6,130,351</b>	
<b>Program FTE</b>	13.07	10.43	16.03	9.17

<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,803,435	\$0	\$2,306,067
Other / Miscellaneous	\$0	\$200,000	\$0	\$200,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,003,435</b>	<b>\$0</b>	<b>\$2,506,067</b>

## Explanation of Revenues

This program generates \$195,893 in indirect revenues.

\$765,000 - State grant: MCH Child and Adoles, PDES Morbidity Monitoring Project and Behavioral Risk Factor Survey System;

\$320,000 - Alaska Tobacco Prevention; \$180,000 - Alaska Obesity EAP; \$416,743 - NIH Marijuana Legalization;

\$120,000 - Alaska Marijuana Program Evaluation; \$170,824 - Public Health Modernization Local;

\$200,000 - HSO County Based Services - 404708; \$250,000 - PDES Public Health Modernization Support;

\$61,000 - Tech Assist to Accountability & Metrics; \$17,000 - HIV Program Planning & Evaluation;

\$5,500 - Public Health IRB

## Significant Program Changes

**Last Year this program was:** FY 2021: 40096A Public Health Office of the Director

Significant Changes: In FY22, 4.6 FTE and associated costs are being moved from FY21 Program Offer Epidemiology, Analytics, and Evaluation (#40098) to the Public Health Office of the Director.

COVID-19-Related Impacts: During FY21, the Office of the Director shifted BOH focus from chronic disease and violence prevention to COVID-19; Community Partnerships & Capacity Building staff also shifted focus from wider content areas to COVID-19; Community Health Improvement Plan implementation was paused to shift focus to COVID-19; and PDES worked closely with Public Health and Oregon Health Authority to provide research and evaluation support related to COVID-19 response.