

Health Department Community Budget Advisory Committee

TO: Chair Deborah Kafoury and County Board of Commissioners (4) pages
FROM: Health Department Community Budget Advisory Board
DATE: March 10, 2017
SUBJECT: Budget Advisory Committee Report & Recommendations

EXECUTIVE SUMMARY

As newly organized CBAC, we invested a great deal of time and energy into the creation of our values statement last budget cycle to ground our work for budget recommendations on our values as a collective. With the changes in administration, a new sitting president, we thought this was a critical year to remind ourselves and our County representatives of our stance on equity. Our

Values Statement follows:

Budget Advisory Committee 2016 Values Statement

We are transformative leaders.

Our work addresses the intersectional roots of oppression, and redefines systems of power. Change comes through both individual and collective transformation. As we do the work, we will practice the values and refine our skills as leaders.

We offer expert knowledge.

We are the experts on what is needed in our communities. By virtue of being community members, we are uniquely qualified to make recommendations that will be impactful and serve a greater vision. We offer a level of authority that is inherently a shift in power by amplifying the active and meaningful voices of the communities that Multhomah County serves.

We uphold racial justice.

We recognize that both the physical and mental health of people of color, and the survival and well-being of communities of color, are matters of justice. As a government body, we recognize the trauma (both historic and present) that our communities suffer at the hands of government agencies; still, we seek to repair and restore a

sense of safety and justice. By balancing scientific knowledge, practical experience, and the wisdom and beliefs of those we serve, we advance the critical process of healing.

We operate with dignity and respect.

We honor the humanity of those who participate in this work as well as the community members impacted by the work. We consider community partnerships essential in designing long-term, effective solutions to public health challenges. We view numbers not only as necessary tools for designing equitable budgets and policies, but also as representations of real, tangible impacts on the day-to-day lives of our friends and neighbors.

We believe in inter-cultural intelligence.

We bring a diverse, multi-lingual, inter-generational approach to knowledge-seeking. In evaluating equity, we seek the voices of those missing from the discussion. We hold self-evident the wisdom of communities and value their judgments as equal to ours. In order to facilitate community participation to the greatest extent possible, we consider barriers to inclusion such as language, transportation, childcare, and food insecurity and strive to see the need for these crucial access tools reflected at the budget level. We are a malleable entity and realize that the best way to serve those that are to be impacted positively is to change as needs arise.

We hold ethics at the core.

We build trust by investing time into our relationships, showing respect by being clear with our purpose, process and intent. We bring self-awareness to ourselves as individuals and our body as a whole in ensuring congruence and a seamless integration of word and action. Serving ethically and consistently is a principle goal of ours as we seek to build a bridge of interconnectedness and interdependence between ourselves and those we serve.

PROCESS - We began meeting on the 2018 budget in September 2016. Our first conversations focused on planning the schedule of upcoming presentations from division directors and developing a presentation framework to focus presentations so that we could gather critical information. We received presentations from leaders of Mental Health and Addictions Services and Public Health. Several of our meetings were cancelled due to snow days. Wendy Lear, Director of Business Operations, provided a final and thorough presentation on the budget

process and the department's out of target requests, which facilitated our deliberations and the development of this report.

EMERGING ISSUES & CHANGES - This year the Health Department faced significant cuts and uncertainty. We are not sure how the new federal administration's legislation on the Affordable Care Act will impact health care services and whether there will be resources for health care expansion. The County is also purchasing a new enterprise resource system and cost impacts to the health department are high. We learned that the Health Department had to eliminate over 120 positions to meet the budget constraint. Out of target requests included one-time-only items that were carry-overs from last fiscal year and new items to help plan for and deliver more effective services into the future.

RECOMMENDATIONS

Last year we urged prioritization of several one-time-only requests that were funded. We recognize that some of these program offers are once again listed among the out of target requests. We understand that monies allocated were not fully expended and we'd like to rearticulate our request that these items remain in the Chair's budget this year. Priority one-time-only requests for the CBAC are as follows:

- #40017B North Portland Dental Expansion Carryover
- #40061B Overdose Prevention Strategy

In addition to these one-time-only requests, our committee prioritized the following programs for inclusion in the Chair's 2018 budget:

- 1. #40018B WIC Re-design
- 2. #40077B Mental Health Treatment & Medication for the Uninsured
- 3. #40051D Corrections Health

In making these recommendations, which we've listed in order of priority, we've considered the Health Department's thoughtful analysis and demonstrated resourcefulness. Funding for these programs will not only address disparities in services, but also allow for the re-organization of critical programs for more effective partnerships and service to our communities.

ACKNOWLEDGEMENTS The Committee would like to give special thanks to Health Department leaders who spent time with us explaining their values and decision-making processes in crafting this year's budget. We'd especially like to thank Joanne Fuller and Wendy Lear who provided critical context for how changes from the state and federal administration might impact department revenue and service strategies. We had numerous changes on our committee over the past year as well, and several key leaders moved on to assume different roles. We'd like to thank Ana del Rocío Valderrama, Lori Stegmann, Nafisa Fai, and Mai Vang for their volunteerism and contributions to our work.