Multnomah County				
Program #78334 - Healt	h - Supplemental Datasets for Ar	nalytics and Reporting		FY 2024 Proposed
Department:	County Assets	Program Contact:	Chris Clancy	
Program Offer Type:	New	Program Offer Stage:	Proposed	
Related Programs:				
Program Characteristics	s: One-Time-Only Request			

Executive Summary

The Health Department seeks to better leverage data to improve business decisions. Much of the data needed to improve internal processes and make strategic business decisions is not in a format that is accessible or ready for automation. If approved, this program will fund four Limited Duration IT staff who bring in and improve the key data sets required to strategically improve Health Department's operations and decision making. The goal is to increase the number of projects and requests IT will complete in FY 2024 related to these data sets. This is a refined continuation of FY 2023: 40108-23

Program Description

This program offer will add an IT Business Systems Analyst and three Developer positions, all on a limited duration basis. These positions will address Health Department Projects around data, automation of reporting, and metrics. Their work will support the key business goals of the divisions and also maximizes the automation of data sets and data analysis.

There is a backlog of priority data related projects. These projects were scored and ranked using criteria that cover racial equality, COVID-19 response, access to data, staff efficiencies, client/patient outcomes and fiduciary risk.

The following examples cover Public Health and Integrated Clinical Services:

Public Health requires access to data currently not available for automated reporting. This will support their business goal of creating automated public dashboards. This work involves multiple data sets and any necessary architecture changes to scale including OHA, ORPHEUS, CareWare, and may include morbidity and mortality data.

Integrated Clinical Services (ICS) requires data to support their Value Based Care transformation and Shared Accountability Model implementation with CCOs and OHA. The division requires several new datasets created and faster turnaround times. These data sets are separate from what will be covered with the CEDARS Project. This ultimately translates to faster delivery of analytics to end users who need the data to make clinical, operational, and financial decisions. ICS relies heavily on the EDAT team to create these data sets to meet those reporting needs. Example projects include Pharmacy dataset and Shared Accountability Model dataset.

Finally there are deferred maintenance projects which are required in order for the Health Department to have continued access to critical data sets. Example projects here include SQL Server Upgrades and the ORPHEUS Re-Architecture.

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Health Department prioritized requests completed within 3 months	N/A	N/A	N/A	90%
Outcome	Percent of Project Time on these supplemental datasets for these staff members	N/A	N/A	N/A	75%

PM#1 - The progress made on rapidly addressing the Health Department's prioritized requests.

PM#2 - Measures the focused time for the resources on the priority requests.

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds		
Program Expenses	2023	2023	2024	2024		
Personnel	\$690,852	\$0	\$0	\$790,062		
Materials & Supplies	\$0	\$0	\$0	\$9,938		
Total GF/non-GF	\$690,852	\$0	\$0	\$800,000		
Program Total:	\$690	\$690,852		\$800,000		
Program FTE	0.00	0.00	0.00	0.00		
Program Revenues						
Other / Miscellaneous	\$0	\$0	\$0	\$400,000		
Financing Sources	\$0	\$0	\$0	\$400,000		
Total Revenue	\$0	\$0	\$0	\$800,00		

Explanation of Revenues

This program is funded with one-time-only General Funds in the amount of \$400,000 and \$400,000 from the Health Department Integrated Clinical Services via internal service billing.

Significant Program Changes

Last Year this program was: FY 2023: 40108 IT: IT Business System Analyst