



MULTNOMAH COUNTY, OR

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# FY 2020 ADOPTED BUDGET

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## Volume 3

County Human Services

Health Department

Library

Nondepartmental

Joint Office of Homeless Services

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## Understanding Program Offers

This volume contains program offers submitted by departments and funded in the budget. Each section is separated by department or division and contains the following items, in order:

- Introduction to the department, a department budget overview, budget trends summary, and a budget summary by division.
- Division narratives including significant changes by division.
- List of all of program offers in the department.
- The department's program offers.

Program offers form the basis for the County's budget process. The offers constitute a department's budget request and provide information to the Board of County Commissioners so they can select programs that best serve the community.

Program offers are labeled with a five digit document number and title (e.g. 50005 - DCJ Human Resources). Throughout the budget document, readers will see references to program offers by number and/or title. To find a program offer that is referenced in this document, go to the department's section in Volume 2; the program offers are listed in numerical order.

## What Makes a Good Program Offer

A good program offer explicitly shows the relationship between the program and the desired results for services. Program offers should:

- Describe how they will make a significant contribution.
- Show why the County's spending on this program is effective.
- Show evidence the program can deliver and measure its results.
- Give accurate performance measures to track the program's contributions.
- Link the offer to the policy direction/frameworks.
- Describe program activities in layperson's terms.

Program offers are not about funding programs simply because they already exist – they are about outcomes. They emphasize meeting the County's goals, not preserving the government status quo. The following pages describe the configuration of each program offer and the major types of information each should contain.

## Anatomy of a Program Offer

### *Executive Summary & Description*

In Multnomah County's budget, a "program" is an organizational unit that provides services to the public or to other County departments/divisions. Program offer documents explain all aspects of the program through the following sections: executive summary and description, performance measures, legal and contractual mandates, revenue/expense detail, explanation of revenues, and significant program changes.

The program executive summary should briefly and clearly explain the activities in the program offer. The description should describe how the program will support department strategies or known County policy frameworks. If the offer represents a change in current practice (e.g. a reorganization or change in staffing levels, service hours, etc.), it should briefly describe the nature of that change. The description should cite research, experience, or logic to convincingly make the case for program selection. New programs should note how the department created program cost estimates.

"I have no data yet. It is a capital mistake to theorize before one has data. Insensibly one begins to twist facts to suit theories instead of theories to suit facts."

~Sir Arthur Conan Doyle, Sherlock Holmes

### *Performance Measures*

Performance measures are organized in a table in each program offer. The table identifies the type of measure, the measure's definition, and measure results. Where available, the table reports history, annualized current service level estimates (what's being delivered at the time of printing), and anticipated target service level for the upcoming year. Additional supporting information, such as explanations of notable performance changes, are located in the narrative section below the table. Every program offer includes two to four performance measures indicating the level of service expected if the program is selected. Two types of measures are required: the output, which represents the volume of work, and the outcome, which represents the measurable results of that work. For example, a hypothetical addictions treatment program for teenage girls might report the number of girls who received treatment (output), and the percentage of teenage girls who achieved sobriety and completed their treatment plan upon exit (outcome).

Departments may also include additional measures to further illustrate a program's performance, such as resource measures (inputs other than staffing or finances) and measures of service quality/efficiency. Using the addictions treatment example, inputs might be reported as the number of treatment beds available. Quality could be reported as the percent of teenage girls that rate counseling staff as engaging and supportive, and efficiency might be reported as the cost for each successful treatment completion.

### *Legal and Contractual Mandates*

Many program offers will be constrained by legal or contractual mandates. If a program offer is affected by a mandate, the mandate and its authorizing document (a statute, contract, etc.) should be noted.

### *Revenue/Expense Detail (Program Costs)*

This area shows the cost to the County of providing the program, as well as the revenues generated by the program for its support. These costs include personnel, contracted services, materials and supplies and internal services.

### *Explanation of Revenues*

This section explains how non-General Fund (Other Funds) revenues or General Fund fee revenues were estimated. Revenue estimates should clearly demonstrate the reasonableness of the estimate.

### *Significant Program Changes*

This section details significant programmatic changes that affect the program - not financial changes up or down. Such changes might include:

- Increases or decreases in the scope or level of services.
- Increases or decreases in net personnel resources (FTE's).
- Revenue increases or decreases.
- Impacts to other departments and/or service delivery programs.

In this section you will also find a reference from this year's program offer to its predecessor in the previous year, if applicable. (Note that program offer numbering can change between fiscal years.)



### Types of Programs

Program offers are categorized based on the “type” of services they deliver. Program offers fall into one of the following groups:

- Administration
- Support
- Operating Program
- New/Innovative Program
- Program Alternative/Reconstruction
- Internal Service
- Revenue

#### *Administration*

Department or division level management and related expenses (e.g. office space, supplies, telephones, etc.) Direct program supervision is considered to be a part of the operating program (NOT administration), and could be included in the operating program’s offer.

#### *Support*

An activity in a department that provides services directly to some or all operating programs within a department. Examples include the Health Department’s pharmacy, which supports the various health clinics; the Library’s Technical Services, which maintains the Library’s materials and catalog systemwide; or the District Attorney’s Human Resources unit.

#### *Operating Program*

An “on the ground” activity of the County. Includes front-line supervisors/ program managers with specific responsibilities for particular operating programs. For example, the Health Department’s Primary Care Clinics.

#### *New/Innovative*

“On the ground” or support activity the County currently does not perform.

#### *Program Alternative or Reconstruction*

A current or former program with changes to operations, different providers, or with different business models than in the previous year.

#### *Internal Service*

Programs that support countywide operations. Examples include Fleet or Information Technology services.

#### *Revenue*

Programs used to budget discretionary (primarily General Fund) revenues at the fund level. (Program revenues are budgeted within the applicable program offer.)

## Additional Program Details

### *Program Offer Characteristics*

Program offer documents also include information on program characteristics (see below). Program characteristics provide additional information on the type of funding for the program.

A letter at the end of a program offer number indicates a scaled program offer. Scaled offers are a way for the Board to make choices on the size of programs to fund (see next page).

At the top of each program offer, you will see a list of program characteristics (if they are applicable):

**Backfill** - Backfill is defined as discretionary dollars (General Fund) applied to a program formerly funded by a grant, state, or other dedicated funding source. Explicitly identifying backfill allows the Chair and the Board to decide to partially or fully backfill expiring grants, state, or federal funds with General Fund dollars.

**One-Time-Only Resources** - In most budget years, the County has a varying amount of one-time-only funds. These funds will not be available in the following years and thus should be spent on projects that do not have (or have minimal) ongoing expenses.

**Measure 5 Education Offers** - In Oregon we have a constitutional limit on how much real property tax we can spend for educational services. Multnomah County has General Fund revenues which are not derived from real property taxes, and these revenues can be expended on educational services without violating the Constitutional limitation. In order for the County to easily demonstrate that it has complied with the Constitutional limitation, departments can designate a program as a "Measure 5 Education Offer" indicating the program may be funded by non real property tax revenues.



### *Scaled Program Offers*

Program offers represent discrete increments of service and many County programs have the ability to deliver services at varying levels. For example, an alcohol and drug treatment program may be able to offer 100, 150 or 200 beds. Departments were asked, when appropriate, to provide decision-makers with the option to choose from those service levels. Scaled offers are indicated by including an A, B, C, etc at the end of the program offer number. When looking at scaled program offers, one should consider the following definitions:

- Base Level of Service - Program "A" is the base level of service that can be provided while still delivering the expected results. In the example above, the base level of service would be 100 beds.
- Increments of Service - Program "B" (and beyond, e.g. "C", "D") represent incremental levels of service that buy additional outcomes. In the alcohol and drug treatment example, Program "B" could be 50 additional beds, and another, separate increment (Program "C") could be 100 additional beds.

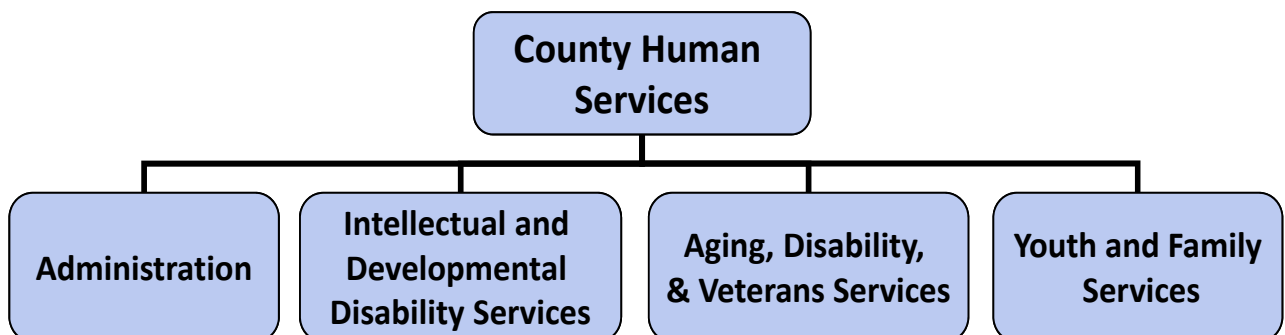
## Department Overview

The Department of County Human Services (DCHS) long-range goals remain anchored in the DCHS North Star which states “in Multnomah County, every person at every stage in life - has equitable opportunities to thrive.” Department priorities include ensuring quality of life, education access and support, and economic development and stability, and ensuring a diverse and inclusive system.

DCHS has a critical role in the County as the department designs programs, services and funding to provide stability for people across the lifespan. In childhood, DCHS supports people by promoting positive parenting, improving educational access and support for youth, and making sure children have enough to eat in the summer months. In adulthood, DCHS can support a young adult with a disability who wants to live in their own home and have a fulfilling and stable job, thus contributing to their economic stability. DCHS can help someone stay in an affordable home, and we provide safety and support for a survivor of domestic or sexual violence. DCHS supports older adults by helping veterans navigate the public programs they’ve earned as part of their service, setting up a class at a senior center to support people staying healthy, and intervene when older adults or people with disabilities are potentially being abused.

Outcomes for these services are stronger when people are treated as experts in their own lives. That’s why DCHS takes a trauma-informed and equitable services approach, providing the best opportunity to achieve the County and Department’s goals.

In addition to the key goals mentioned, the Department serves as the Area Agency on Aging, the Community Action Agency, the managing partner for the Schools Uniting Neighborhoods (SUN) program, the Domestic and Sexual Violence Coordination Office for the County and City of Portland, and the Community Developmental Disability Program (CDDP) for Multnomah County. DCHS accomplishes its goals with a budget of \$168.9 million and over 700 FTE.



### Budget Overview

The FY 2020 Department of County Human Services (DCHS) Adopted budget is \$169.0 million, a \$5.7 million increase and a net decrease of 1.70 FTE from the FY 2019 budget. The County General Fund contributes \$54.9 million or 32.5% of the total. The remainder of the DCHS budget, \$114.1 million, comes from Federal, State, and other revenue. The department’s budget is allocated across four divisions and funds over 700 full-time equivalent employees.

DCHS’s \$114.1 million in Federal, State, and local revenue is a \$3.9 million increase over the FY 2019 adopted budget. Two-thirds of DCHS budget comes from nearly 100 Federal and State sources, and many services provided by the department are reliant on State and Federal funding. The Oregon State Legislature is considering an option that could reduce State and Federal funds to the Intellectual and Development Disabilities Service Division (IDDS) from FY 2019 levels by as much as \$1.8 million in FY 2020 (see the IDDS Significant Changes for more information). The budget assumes this reduction will occur since a final decision has not been made. With significant uncertainty about the short- and long-term trajectory of funding streams, DCHS continues to monitor and adapt to funding changes as it works to protect the community’s most vulnerable citizens.

In FY 2020, the County transferred the Multi-Disciplinary Team from the Health Department to DCHS (25028 and 25028B). The County also transferred \$436,073 for the Benefit Acquisition Service to the Joint Office of Homless Services (10055A).

The FY 2020 DCHS allocation includes \$1,249,552 in one-time-only funding. The one-time-only funding is allocated in several program offers, including:

- Community Legal Clinic (25139B) \$100,000
- Universal Pre-School Study - Phase 2 (25153) \$100,000
- Family of Friends Mentoring Project (25162) \$25,000

A list of programs funded as one-time-only can be found in the Budget Director’s message on page 33.

Budget Trends	FY 2018	FY 2019	FY 2019	FY 2020	Difference
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	707.38	709.05	704.05	702.35	(1.70)
Personnel Services	\$68,141,060	\$72,566,022	\$73,466,268	\$77,586,456	\$4,120,188
Contractual Services	55,705,019	62,011,944	64,501,840	65,042,200	\$540,360
Materials & Supplies	2,437,800	2,869,972	2,643,213	2,032,118	(\$611,095)
Internal Services	19,824,016	21,666,970	22,667,178	24,292,021	\$1,624,843
Capital Outlay	<u>11,600</u>	<u>0</u>	<u>0</u>	<u>0</u>	\$0
<b>Total Costs</b>	<b>\$146,119,201</b>	<b>\$159,114,908</b>	<b>\$163,278,499</b>	<b>\$168,952,795</b>	<b>\$5,674,296</b>

Due to the transition to a new ERP system, some services that were budgeted in Contractual Services or Materials & Supplies before FY 2020 are now in Internal Services.

## Successes and Challenges

DCHS serves people from across the lifespan. For instance, 22,392 youth were served in SUN Community Schools. Additionally, 45,670 older adults and people with disabilities received Medicaid case management, in-home services, facility based services, medical benefits, or SNAP. DCHS also served 5,865 adults and children with intellectual and developmental disabilities, and their families.

The Department's challenges are the community's challenges. There are systemic barriers for people with low incomes, and people of color to gain access to wealth, stable housing, equitable education, health and quality of life.

As DCHS seeks to address the root causes of these inequities, the need for services increases without commensurate funding.

The Department has worked to mitigate these challenges through the successful implementation of three tools:

- A Racial Equity Focus. Much of the Department's efforts have gone into the racial equity strategies outlined below and in the Division Narratives to follow.
- Using Data and Performance Management. The DCHS Data Mart team, which is made up of members from each division, have focused on improving the way the department accesses, automates, transforms and analyzes data. In the past year these efforts have helped to use data in a variety of new ways to guide program decision making. For instance, the Data Mart Team and Emergency Management teamed up to create a nationally recognized DCHS Emergency Dashboard. This new tool allows DCHS to identify clients during a disaster within seconds when every moment counts.
- Quality improvement strategies and vision. DCHS divisions and quality improvement teams have been successful in improving backlogs for adult care home program applications from a six-week backlog to a one-day approval process; building capacity in the Money Management Program from serving 30 clients to 100 clients; facilitating and delivering recommendations for two equity improvement teams: Bilingual Pay Assessment and Selection, and Increasing Diversity in Interview panels.

### Diversity, Equity, and Inclusion

Last year, DCHS added “diverse and inclusive systems” as one of the four main domains to achieving the DCHS North Star. Without a focus on racial equity, DCHS knows it cannot succeed in its goals.

Since the Workforce Equity Strategic Plan (WESP) process began a year ago, DCHS has focused on two main aspects of actualizing racial equity:

- Policy work, which has consisted of several pilots with the Human Resource Department to examine hiring and retention practices.
- Engaging the workforce which has consisted of dozens of regular meetings with the Director, Deputy Director, Equity and Inclusion Manager, and Division leadership. Each Division has also lead a Racial Equity Assessment with staff.

Key racial equity activities include:

- Racial equity and trauma informed care trainings that emphasize skill building, expectation setting and learning.
- New efforts from the Diversity, Equity and Social Justice Committee are focused on increasing department culture, safety and engagement.
- An Equity dashboard and communications available on the Commons.
- Regular meetings between DCHS leadership and Employee Resource Group leadership.
- Completion of the Workforce Equity Strategic Planning document.
- Completed Racial Equity Assessments for the Director’s office and all divisions.
- Pilots to make hiring, compensation and retention more equitable.

### Budget by Division

Division Name	FY 2020 General Fund	Other Funds	Total Division Cost	Total FTE
Administration	\$7,833,484	\$0	\$7,833,484	44.80
Intellectual and Developmental Disabilities	4,168,372	20,454,445	24,622,817	155.80
Aging, Disability, and Veteran Services	13,412,061	66,163,953	79,576,014	423.45
Youth and Family Services	<u>29,460,902</u>	<u>27,459,578</u>	<u>56,920,480</u>	<u>78.30</u>
<b>Total County Human Services</b>	<b>\$54,874,819</b>	<b>\$114,077,976</b>	<b>\$168,982,795</b>	<b>702.35</b>

## Department Administration

Department Administration provides executive leadership and strategic vision for the Department of County Human Services (DCHS). The Director's Office works with elected leaders, stakeholders, system partners, community members and staff to ensure quality, equitable service delivery.

Department leadership is responsible for the provision of racially equitable practices, trauma informed practices, strategic partnerships, leadership and direction, stewardship of public resources, continuous quality improvement, performance management, emergency preparedness, innovation, communications, IT strategic planning, operations, and support and maintenance of a diverse qualified workforce.

Human Resources supports more than 700 departmental employees and addresses recruiting, hiring and retention issues, workforce planning, training, employee performance management, and labor relations.

Business Services provides financial and business functions including development, management and oversight of the department's budget, accounts receivable and payables, purchasing, and grants management. The unit coordinates department procurement and contracting functions and ensures implementation and compliance with all County contracting and procurement policies.

## Significant Changes

The significant changes in Department Administration center around the robust Workforce Equity strategies.

Some of the most significant efforts include:

- Holding Space gatherings where staff can discuss racial equity topics.
- A Quality Improvement process was conducted and recommendations were made to improve the interview panel selection process.
- Examining the bilingual pay and hiring structure. Recommendations range from signage for clients, to testing for language proficiency and a process for identifying skilled staff and compensating for the use of the skill per the Local 88 contract.
- DCHS is in the planning phase of a new project also supporting equity in recruitment and selection, as well as retention.
- Convening a Facilitators Community of Practice.

### Intellectual and Developmental Disabilities Service Division

The Intellectual and Developmental Disabilities Services Division (IDDSD) serves over 5,900 people with intellectual and developmental disabilities such as autism, cerebral palsy or an intellectual disability diagnosed prior to the age of 22. Services may span the entire lifetime. Policy, advocacy and research around quality of life for individuals with intellectual and developmental disabilities has converged on eight quality of life domains that guide the implementation of services: emotional, material, and physical well-being, interpersonal relations, social inclusion, personal development, self-determination, and rights.

IDDSD provides case management services supporting engaging and linking consumers and families to resources in the community and where eligible, to Medicaid funded residential, employment, in-home and non-County brokerage case management services. The division reviews more than 1,000 intake and eligibility referrals per year and provides abuse investigation services to participants, opening more than 400 investigations per year. Results from a current partner survey show 83% of respondents are satisfied or extremely satisfied with the support they receive from IDDSD. State audit results were favorable with IDDSD exceeding several statewide benchmarks.

IDDSD's FY 2020 strategic planning framework focuses on service quality, equity and inclusion, training and effective/supported workforce and system improvement to ensure high-quality services supporting quality of life for individuals and families.

### Significant Changes

The Governor's Recommended budget does not include a state funding increase for IDDSD but recommends a 2% reduction of the current funding level which is at 95% parity. IDDSD's unfunded FY 2020 cost will increase to a total of \$1.5 million (12.00 FTE). If the 2% State reductions are approved (93% equity), then that would mean another \$341,000 less in funding, bringing the total of unfunded deficit to over \$1.8 million for FY 2020.

This outlook raises many concerns, including increased caseloads due to budget cuts. Realistic caseloads support quality of life by increasing engagement and supporting clients to make informed decisions based on their goals. Service innovations this year include IDDSD's early adoption of the Data Mart and Tableau tools and participation in the Emergency Management Committee's mapping to assist in identifying vulnerable populations during emergencies.

IDDSD continues to work with the DCHS Diversity, Equity, and Social Justice Committee to inform leadership and guide internal equity efforts. IDDSD identified and prioritized action items in four key areas: Accountability & Transparency, Healing, Safety, Racial Equity Embedded in Everything. Current challenges include continued workload increases due to State mandates, including this year's roll out of the Oregon Needs Assessment (ONA). The State required IDDSD to separate assessor duties from case management, resulting in the loss of 8.00 FTE to distribute caseload. The State also mandated that individuals may not access a Medicaid service without an ONA, resulting in increased caseloads for the remaining case managers and longer wait times.



### Aging, Disability and Veterans Services

Aging, Disability and Veterans Services Division (ADVSD) is the federally designated Area Agency on Aging that represents the diverse needs of 220,000 older adults, people with disabilities, and veterans. ADVSD maintains a coordinated service system that supports individuals to achieve independence, health, safety, and quality of life. ADVSD services include 24-hour community resource information; social and nutrition services; eligibility for Medicaid health and long-term support services; access to Veterans benefits; protective and guardianship services; and adult care home licensing. ADVSD administers 27 programs that include over 45,000 participants receiving Medicaid long-term services and supports and over 7,900 participants receiving community social supports.

ADVSD has completed a racial equity assessment, identifying gaps that are contributing to systemic and institutional barriers for some employees and program participants. This will be the foundation for an equity action plan with priorities, outcome measures, and accountability timelines and reporting.

ADVSD uses performance management to guide program operations, inform program offers, and connect outcomes to impact. This system ensures staff and stakeholders have access to data, tracks division equity outcomes, creates staff efficiencies, improves client outcomes, and generates or recovers revenue. ADVSD has used data to support life-saving emergency management tools.

### Significant Changes

ADVSD is facing significant changes in how it does its work, due to changes in State-level systems and policies. Within the next two years, Oregon Department of Human Services will transition to a No Wrong Door system for public benefits eligibility, transforming the way that ADVSD staff do this work. The division is also seeing changes in other programs, such as Medicaid Long Term Services and Supports and Adult Protective Services.

Adult Protective Services successfully transitioned to the State's Centralized Abuse Management (CAM) database to track all referrals of abuse and neglect. The system will allow for greater coordination between counties and other abuse investigation programs (IDDSD and MHASD) to ensure timely and well-documented responses occur for all referrals involving vulnerable adults.

ADVSD redesigned funding allocations for both culturally specific and culturally responsive services for older adults in FY 2018. To evaluate the effectiveness and impact of these changes, ADVSD conducted a three-part evaluation with stakeholders, staff, and program participants. Key recommendations include: improve planning and communication; simplify the application and allocation process; facilitate partnerships; ensure funding is proportional to the size and needs of communities served; and align future funding opportunities with the County's equity goals and trauma informed care practices.

## Youth and Family Services

The Youth & Family Services (YFS) Division's North Star states that "all individuals and families have the opportunity to engage in the level and depth of culturally relevant services that they want, in order to thrive." YFS manages over 40 programs and initiatives that focus on two major impact areas: educational success and family stability. Within those impact areas, YFS has five core system and policy areas that represent our work: Energy Services, Anti-Poverty/Prosperity, Education Supports, Early Childhood and Domestic and Sexual Violence.

The Division manages programs funded by Federal, State, and local resources. These programs offer a wide range of interventions including access to SNAP benefits, domestic violence emergency response, kindergarten transition, housing stability assistance, participant supports, Assertive Engagement, sexual assault services, youth advocacy, after-school programming, home weatherization, and more.

Just over 80% of YFS funding is contracted out to partner agencies who work in the community, including a wide network of culturally specific organizations. Ensuring YFS provide quality supports to the contractors and their direct service staff is a high priority for the Division. YFS actively partners with local jurisdictions, such as local cities, Home Forward, the Joint Office for Homeless Services, school districts, and other departments within the County.

## Significant Changes

The FY 2020 budget continues YFS's commitment to educational success and family stability through high-quality direct services in three program areas and superior contract and program management that effectively supports contractors to deliver culturally responsive and culturally specific services.

Notable highlights for FY 2020 include:

- Commitment to Racial Equity. The division is actively engaged in restoring safety, trust and belonging within the division so that employees thrive.
- Runaway Youth Program redesign. Responding to shifting needs in the community for these services YFS will be supporting a redesigned system of supports for youth who feel unsafe in their own homes and who want a supportive environment in which to repair connections.
- Reestablish focused leadership in the Domestic and Sexual Violence Coordination Office. This leadership will oversee the Gateway Center (new to the County's domestic violence administration), and strengthening partner and community relationships.

### Department of County Human Services

The following table shows the programs that make up the department's total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>					
25000	Director's Office	\$3,173,686	\$0	\$3,173,686	16.80
25001	Human Resources	1,269,741	0	1,269,741	7.00
25002	Business Services	3,390,057	0	3,390,057	21.00
<b>Intellect./Devel. Disabilities Services</b>					
25010	IDDS Administration & Support	917,528	2,174,683	3,092,211	15.00
25011	IDDS Budget and Operations	595,568	3,643,361	4,238,929	20.00
25012	IDDS Services for Adults	1,127,359	5,442,062	6,569,421	45.80
25013	IDDS Services for Children and Young Adults	1,015,270	5,667,615	6,682,885	48.00
25014	IDDS Abuse Investigations	354,038	1,928,746	2,282,784	16.00
25016	IDDS Eligibility & Intake Services	158,609	1,597,978	1,756,587	11.00
<b>Aging, Disability and Veterans Services</b>					
25022	ADVSD Adult Care Home Program	232,660	3,155,618	3,388,278	19.00
25023A	ADVSD Long Term Services & Supports (Medicaid)	3,291,773	36,808,146	40,099,919	263.55
25023B	ADVSD LTSS Match Restoration	166,011	386,070	552,081	4.00
25024	ADVSD Adult Protective Services	582,164	5,838,793	6,420,957	38.35
25025	ADVSD Veterans Services	632,580	354,683	987,263	8.00
25026A	ADVSD Public Guardian/Conservator	1,642,741	0	1,642,741	11.00
25026B	ADVSD Public Guardian Training and Monitoring Support	25,000	0	25,000	0.00
25027	ADVSD Administration	593,168	1,597,139	2,190,307	8.80
25028A	ADVSD Multi-Disciplinary Team	710,824	555,641	1,266,465	4.65
25028B	ADVSD Multi-Disciplinary Team Mental Health Service Restoration	83,440	0	83,440	0.00
25029	ADVSD Transition & Diversion (Medicaid)	388,680	4,464,132	4,852,812	29.00
25032	ADVSD Outreach, Information & Referral	1,175,637	1,377,798	2,553,435	10.70
25033	ADVSD Nutrition Program	494,457	1,703,288	2,197,745	0.50
25034	ADVSD Health Promotion	89,669	1,614,437	1,704,106	6.90
25035	ADVSD Case Management & In-Home Services (non-Medicaid)	1,263,895	4,283,134	5,547,029	6.20
25036	ADVSD Safety Net Program	744,819	0	744,819	1.50

# County Human Services

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Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Aging, Disability and Veterans Services (cont'd)</b>					
25037	ADVSD Transportation Services	168,542	1,982,475	2,151,017	0.50
25038A	ADVSD Advocacy & Community Program Operations	1,026,001	2,042,599	3,068,600	10.80
25038B	ADVSD Advocacy & Community Area Plan Development	100,000	0	100,000	0.00
<b>Youth and Family Services</b>					
25041	YFS - Domestic Violence Crisis Services	376,438	0	376,438	0.00
25044	YFS - Domestic and Sexual Violence Coordination	522,161	224,832	746,993	3.90
25046	YFS - Domestic Violence Legal Services	210,503	35,000	245,503	0.00
25047	YFS - Domestic Violence Enhanced Response Team	855,856	540,526	1,396,382	9.00
25048	YFS - Culturally Specific and Underserved Domestic & Sexual Violence Services	696,833	0	696,833	0.00
25049	YFS - Sexual Assault Services	291,698	0	291,698	0.00
25050A	YFS - Gateway Center	284,627	943,415	1,228,042	4.00
25050B	YFS - Domestic Violence Specific Immigration Legal Services at Gateway Center	30,000	0	30,000	0.00
25051	YFS - Building Awareness: Violence Against Indigenous Women	50,000	0	50,000	0.00
25118	YFS - Youth & Family Services Administration	1,634,410	0	1,634,410	10.00
25119	YFS - Energy Assistance	0	12,338,527	12,338,527	7.90
25121	YFS - Weatherization	0	6,279,148	6,279,148	10.10
25131	YFS - Legal Services Day	125,000	0	125,000	0.00
25132	YFS - Long Term Rent Assistance (LTRA)	150,000	0	150,000	0.00
25133A	YFS - Housing Stabilization for Vulnerable Populations (HSVP)	2,025,554	2,017,775	4,043,329	1.82
25133B	YFS - Backfill Short Term Rental Assistance Reallocation	75,000	0	75,000	0.00
25135	YFS - Sex Trafficked Youth - Victims System of Care	649,099	0	649,099	1.00
25136	YFS - Culturally Specific Navigation Services for Immigrant Families	250,000	0	250,000	0.00
25137	YFS - Promise Neighborhoods Initiative	2,150,440	0	2,150,440	0.00
25138A	YFS - Runaway Youth Services (RYS)	571,181	100,000	671,181	0.00
25138B	Runaway Youth Services (RYS) (Scaled)	303,682	0	303,682	0.00
25139A	YFS - Multnomah Stability Initiative (MSI)	2,874,408	840,798	3,715,206	1.18
25139B	YFS - Multnomah Stability Initiative - Community Legal Clinic	100,000	0	100,000	0.00

# County Human Services

fy2020 adopted budget

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Youth and Family Services (cont'd)</b>					
25140	YFS - Community Development	145,567	371,180	516,747	1.00
25141	YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach	114,031	108,285	222,316	1.00
25143	YFS - Renter Relations	65,870	0	65,870	0.50
25145	YFS - SUN Community Schools	6,797,089	2,151,636	8,948,725	3.00
25147	YFS - Child & Family Hunger Relief	421,749	0	421,749	1.00
25149	YFS - SUN Youth Advocacy Program	2,565,028	200,000	2,765,028	1.00
25151	YFS - SUN Parent & Child Development Services	1,579,625	334,632	1,914,257	1.00
25152	YFS - Early Kindergarten Transition Program	392,869	75,535	468,404	1.00
25153	YFS - Universal Pre-School Study - Phase 2	100,000	0	100,000	0.00
25155	YFS - Sexual & Gender Minority Youth Services	304,127	0	304,127	0.00
25156A	YFS - Bienestar Social Services	1,155,056	113,297	1,268,353	8.60
25158	YFS - Early Learning Family and School Transition	40,950	784,992	825,942	0.50
25160	YFS - Data and Evaluation Services	1,527,051	0	1,527,051	10.80
25162	YFS - Family of Friends Mentoring Project	<u>25,000</u>	<u>0</u>	<u>25,000</u>	<u>0.00</u>
	<b>Total County Human Services</b>	<b>\$54,874,819</b>	<b>\$114,077,976</b>	<b>\$168,952,795</b>	<b>702.35</b>

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**Department:** County Human Services

**Program Contact:** Peggy Brey

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

The Department of County Human Services builds well-being in our community so every person, at every stage of life has equitable opportunities to thrive. The Director's Office develops and leads the department's mission, policies, communications and strategic initiatives; provides financial management; and supports the division's efforts to provide high quality and innovative services to the communities we serve.

**Program Summary**

**ISSUE:** The Department of County Human Services is made up of three divisions, staffed by over 700 FTE and is funded with a budget of over \$168 million dollars. The Department is funded through a blend of local, State and Federal funding with accompanying requirements and roles and programmatic commitments to the community.

**GOALS:** The Office leads the Department-wide efforts to reach the DCHS North Star which states that in Multnomah County, every person - at every stage in life - has equitable opportunities to thrive. In addition to the existing priorities of ensuring quality of life, education access and support, and economic development and stability, we've added a fourth priority: ensuring a diverse and inclusive system. The Director's office works to advance the Department's strategic initiatives and program service delivery through four main goals: a) maintaining good government practices of accountability and transparency; b) advancing an equity agenda both internally and with our community partners; c) ensuring high-quality program delivery; and d) effective engagement and communication with the community.

**ACTIVITIES:** The Director's Office ensures a safe, welcoming and equitable environment for staff and participants. The Office's immediate priority is to bring more equity and inclusion to our HR recruitment, compensation and retention strategies, as well as coordinate the efforts of the Department's Trauma Informed Care position, Equity and Inclusion Manager and Diversity, Equity, and Social Justice Committee (DESJC). Director's office activities also include a) ensuring DCHS meets its financial and regulatory requirements through budget development, fiscal compliance, data collections, and reporting; b) Department-wide performance management and sharing of quality improvement tools and techniques; c) identifying new approaches to DCHS work and the application of research for emerging and best practices and solutions; d) communication and coordination with the Board of County Commissioners, and e) communication with partners and participants by using multiple methods to engage with the community, including online tools.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of formal communications to employees <sup>1</sup>	50	50	50	50
Outcome	Percent of visitors who were able to find what they were looking for on the DCHS website	92%	85%	92%	95%
Outcome	Number of DCHS Web Pages Viewed	777,000	910,000	800,000	850,000

**Performance Measures Descriptions**

<sup>1</sup> Formal communications include director's listening sessions, all staff emails and meetings with staff groups such as district offices or the department Employees of Color employee group.



Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,335,515	\$0	\$2,530,545	\$0
Contractual Services	\$87,498	\$0	\$80,000	\$0
Materials & Supplies	\$264,878	\$0	\$38,159	\$0
Internal Services	\$328,292	\$0	\$524,982	\$0
<b>Total GF/non-GF</b>	<b>\$3,016,183</b>	<b>\$0</b>	<b>\$3,173,686</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,016,183</b>		<b>\$3,173,686</b>	
<b>Program FTE</b>	16.80	0.00	16.80	0.00

Program Revenues				
Intergovernmental	\$0	\$223,635	\$0	\$0
Other / Miscellaneous	\$2,267,554	\$0	\$2,677,933	\$0
<b>Total Revenue</b>	<b>\$2,267,554</b>	<b>\$223,635</b>	<b>\$2,677,933</b>	<b>\$0</b>

Explanation of Revenues

\$2,673,637 - County General Fund Department Indirect: Based on FY20 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2019: 25000-19 Director's Office

**Department:** County Human Services

**Program Contact:** Chris Robasky

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

DCHS Human Resources supports the quality of life, professional development, and education of approximately 700 employees. HR ensures DCHS achieves its goals through equitable recruitment, selection and retention of employees, and anticipating and planning for staffing needs. HR functions include outreach and recruiting, hiring and onboarding, maintaining records, staff retention and workforce and succession planning, training, employee and labor relations including equity for hiring and treatment of staff, and performance management.

**Program Summary**

**ISSUE:** There are many dynamics to ensure employees work in an environment that supports them and the community while also ensuring equity for a diverse workforce, in compliance with contracts, rules, and legal requirements.

**GOALS:** HR's goals are to ensure services and strategies support and add value to DCHS strategies; promote fair and equitable treatment of all employees; adhere to County personnel rules, policies and labor contracts; align with Central HR to develop and implement consistent and effective HR solutions and programs; and create workforce and succession planning to develop a diverse and talented pool of employees and candidates to meet future staffing needs.

**ACTIVITIES:** DCHS HR achieves its goals by providing consultation to managers, supervisors, and employees while working with union representation and aligning with Central/County HR and County counsel when necessary. Efforts in FY20 will focus on supporting the workforce in an uncertain environment, equity (including supporting the department's Workforce Equity Strategic Plan), professional development, education, compassion, and compliance, while supporting Department-wide goals. HR will continue to support implementation of the new ERP while maintaining service levels. HR continues to support department process improvement projects related to equity. Those projects include: 1) Bilingual pay assessment and selection. This project is designed to maximize the use of our employees' bilingual skills to serve our clients. The project takes into account new contract language for ad hoc pay and ensuring language proficiency; 2) Interview panel selection and preparation. This project seeks to ensure diversity in our panel selection and training panel members to ensure equitable assessment of interviewees; 3) Workforce Equity - Recruiting and Retention. HR supports this project lead by the Director's Office. The project will address identified disparities in the first year of employment, and seek to identify the sources of perceived disparities in access to positions and promotions. Improvements will be made to current processes for selection/hiring and for support during the initial trial service period.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Recruitments	202	220	245	245
Outcome	Placement/reassignment of employees impacted by reduced staffing	1%	3%	1%	1%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Federal, State and local laws and regulations relating to wage and hour, discrimination and harassment, leave of absence, privacy and other hiring and employment practices. Ensure compliance with two labor contracts related to pay, hours of work and other working conditions.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,028,541	\$0	\$1,105,777	\$0
Contractual Services	\$4,000	\$0	\$3,000	\$0
Materials & Supplies	\$4,779	\$0	\$20,486	\$0
Internal Services	\$118,740	\$0	\$140,478	\$0
<b>Total GF/non-GF</b>	<b>\$1,156,060</b>	<b>\$0</b>	<b>\$1,269,741</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,156,060</b>		<b>\$1,269,741</b>	
<b>Program FTE</b>	7.00	0.00	7.00	0.00

Program Revenues				
Other / Miscellaneous	\$1,156,060	\$0	\$1,129,263	\$0
<b>Total Revenue</b>	<b>\$1,156,060</b>	<b>\$0</b>	<b>\$1,129,263</b>	<b>\$0</b>

## Explanation of Revenues

\$1,129,263 - County General Fund Department Indirect: Based on FY20 Department Indirect Rates published by Central Finance.

## Significant Program Changes

Last Year this program was: FY 2019: 25001-19 Human Resources

**Department:** County Human Services

**Program Contact:** Rob Kodiriy

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

Business Services provides service in support of DCHS, ensuring effective and responsible stewardship of available financial resources and enabling informed decision-making for programs. Business Services' core functions are finance, procurement and contracting, budget and accounting, and business process support. Racial equity as well as alignment with the department's Workforce Equity Strategic Plan is a key focus in all our work.

**Program Summary**

**ISSUE:** More than 40% of the total funds in the Department are contracted to community-based providers for services to the populations served by DCHS. About 50% of DCHS contracts contain culturally specific and culturally responsive requirements. Roughly 70% of funding comes from over 100 funding sources including State, Federal, and grants. The diverse funding streams require effective contract execution, compliance and reporting, payment processing, and constant review of financial and internal controls to ensure ethical and responsible use of available financial resources.

**PROGRAM GOAL:** Business Services' goals are to provide support to Divisions through budgeting and fiscal planning, contracting and procuring and paying for the services and to maintain financial control and oversight through accounting, fund management, and financial reporting and risk management.

**PROGRAM ACTIVITY:** Business Services' activities include budget development, management, and reporting; accounts payable and receivable; procurement and contracting; grant accounting and reporting; and implementation of, and compliance with, all County, State and Federal fiscal policies and procedures related to the business of this department. We work across the County with other Departments and agencies. We also and serve as liaisons between the department and internal service providers such as County Finance, Central Budget, County Facilities, Fleet, Records, and IT.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Percent of invoices paid in 30 days or less (*estimated based on FY18 actual)	80%	87%	87%*	80%
Outcome	Percentage of financial reports submitted to the satisfaction of the grantor	99%	99%	98%	99%
Output	Number of executed contracts/amendments (*effective 1/2019 JOHS contracts don't go through DCHS)	400	375	300*	300
Outcome	Percent of annual contracts executed prior to start date	85%	85%	85%	85%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,703,316	\$0	\$2,884,302	\$0
Contractual Services	\$40,000	\$0	\$40,000	\$0
Materials & Supplies	\$42,033	\$0	\$42,354	\$0
Internal Services	\$288,368	\$0	\$423,401	\$0
<b>Total GF/non-GF</b>	<b>\$3,073,717</b>	<b>\$0</b>	<b>\$3,390,057</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,073,717</b>		<b>\$3,390,057</b>	
<b>Program FTE</b>	21.00	0.00	21.00	0.00

Program Revenues				
Other / Miscellaneous	\$2,808,715	\$0	\$2,966,656	\$0
<b>Total Revenue</b>	<b>\$2,808,715</b>	<b>\$0</b>	<b>\$2,966,656</b>	<b>\$0</b>

Explanation of Revenues

\$2,966,656 - County General Fund Department Indirect: Based on FY20 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2019: 25002-19 Business Services

**Department:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Intellectual and Developmental Disabilities Services Division (IDSD) Administration provides oversight of the division to ensure the delivery of services that increase quality of life for individuals with intellectual and developmental disabilities. This oversight is focused on the accurate and timely delivery of services and improved systems that support clients in living independent and healthy lives in the community. Administration leads the division in continuous quality improvement, coordination of daily functions, advocacy at the local and state levels, and collaborative efforts with partner agencies.

### Program Summary

**ISSUE:** IDSD Administration and Support provides department oversight of staff, quality assurance, and system improvement in order to maximize client services and provide leadership as the Community Developmental Disability Program (CDDP) for Multnomah County, which is a Medicaid authority status conferred by the state. An intellectual or developmental disability is a condition such as cerebral palsy, autism or intellectual disability that a person is born with or that develops during childhood, and is expected to continue indefinitely.

**PROGRAM GOALS:** Business strategies related to organizational transformation, systems change, professional development and staff support directly improve quality of life for individuals with intellectual and developmental disabilities by increasing the delivery and accessibility of quality services. The goals of Administration and Support include a) optimize day-to-day functioning and staff development in order to demonstrate public stewardship and accountability; b) deliver quality, timely, culturally appropriate, and HIPPA-compliant services to support the health, safety, independence and inclusion of clients; c) improve policies and remove barriers to access by advocating for clients; and d) increase resources for clients through collaborative partnerships.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to four general areas of activity: coordination, quality, advocacy, and collaboration. In the area of coordination, Administration and Support is responsible for overall staff development, office management, implementing new and innovative ways to accomplish work, and ensuring timely provision of services within federal and state guidelines. In the area of quality, Administration and Support is responsible for the creation of the strategic plan, metrics, and dashboards for performance management, monitoring the inter-agency agreement with the state, maintaining the quality assurance of records and practices, and collecting and responding to customer feedback. In the area of advocacy, Administration and Support focuses on identifying and removing barriers for access to services and informing policy through open and continuous dialogue with state and local agencies. In the area of collaboration, Administration and Support identifies and works with a variety of community-based organizations to increase the delivery of equitable and inclusive service, offering customer choice to a diverse community across the county. Racial equity is a key focus for the work in these four areas.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of client records audited annually for Medicaid compliance <sup>1</sup>	590	350	350	120
Outcome	% of federally-funded plans re-authorized annually <sup>2</sup>	56%	100%	75%	40%
Outcome	% of survey respondents satisfied with the services they receive	83%	80%	83%	83%

### Performance Measures Descriptions

<sup>1</sup>The number of records audited will decline if IDSD loses the 1 FTE Program Specialist Sr. There will be an increase in the number of plans missing the re-authorization deadline, and an increase in the amount of general funds requested to bring these plans into compliance.

<sup>2</sup> The gains made in bringing plans into compliance with the advent of the new Oregon Needs Assessment (ONA), will be lost in FY20 without the 1 FTE Program Specialist Sr.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$289,983	\$1,740,246	\$150,303	\$1,589,351
Contractual Services	\$715,538	\$1,000	\$715,538	\$1,000
Materials & Supplies	\$31,212	\$53,469	\$29,153	\$36,816
Internal Services	\$38,698	\$547,989	\$22,534	\$547,516
<b>Total GF/non-GF</b>	<b>\$1,075,431</b>	<b>\$2,342,704</b>	<b>\$917,528</b>	<b>\$2,174,683</b>
<b>Program Total:</b>	<b>\$3,418,135</b>		<b>\$3,092,211</b>	
<b>Program FTE</b>	2.00	16.00	1.00	14.00

Program Revenues				
Intergovernmental	\$0	\$2,342,704	\$0	\$2,174,683
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,342,704</b>	<b>\$0</b>	<b>\$2,174,683</b>

Explanation of Revenues

\$2,173,683 - State Mental Health Grant Case Management  
 \$1,000 - State Mental Health Grant Local Admin

Significant Program Changes

Last Year this program was: FY 2019: 25010-19 IDDSD Administration & Support

Decreased 3.0 FTE: 1.0 Research Analyst Senior, 1.0 Office Assistant 2, 1.0 Program Specialist Sr.

Increased: 1.0 FTE Office Assistant 2 moved from PO 25011

Decreased: 1.0 FTE Program Technician moved to PO 25011



**Department:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Intellectual and Developmental Disabilities Services Division (IDSD) Budget and Operations maintains regulatory compliance for mandated functions that directly increase quality of life for individuals with intellectual and developmental disabilities. This unit provides clients with choice and support for living independent and healthy lives in the community by increasing capacity, delivery, and payment of client in-home supports, residential placements, and employment opportunities while responding to continuously changing State service requirements and maximizing revenue.

### Program Summary

ISSUE: IDSD Budget and Operations must meet the increasing demand for services and ensure that quality business and staffing practices are adaptable as the number of clients and State service requirements constantly increase and change.

PROGRAM GOALS: Research shows that efforts to support quality of life for individuals with intellectual and developmental disabilities must function at the personal, program, community, state and national levels, and must enhance the individual's opportunity to choose the activities, supports and living arrangements that are right for them. The goals of Budget and Operations align with demonstrated best practices and include: a) increase the capacity of community-based residential, personal support and employment providers by ensuring timely contracting, training, certification and payment; b) increase equitable access to services by approving and processing service requests based on client choice and needs and by providing financial support for emergency and long-term housing; c) implement new policies, procedures, and training that maintain compliance with County, State, and Federal regulatory requirements; and d) ensure the fiscal accountability of the Division through budgeting and revenue tracking.

PROGRAM ACTIVITY: The four goals outlined above correspond to four general areas of activity: capacity, access, compliance, and budgeting. In the area of capacity, Budget and Operations provides interpersonal support for navigating the technical requirements for services. As such, it is responsible for credentialing and timesheets for Personal Support Workers, certifying IDD child foster care homes, partnering with the Adult Care Home Program to increase the number of certified homes for clients, and contracting with employment and residential providers. In the area of access, Budget and Operations verifies, authorizes, and tracks service revenue for 24-hour residential care, supported living, foster care, employment, transportation, family support, in-home client support, targeted case management and local administration. In the area of compliance, Budget and Operations determine regulatory requirements; initiates, negotiates, and amends contracts with providers; and oversees public procurement and implementation of County administrative procedures. In the area of budgeting, Budget and Operations reviews and reports funding allocations and service expenditures, secures budget approval, settles contracts with the State, and tracks all budget costs for employees and client services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of 337 client enrollment forms accurately processed monthly <sup>1</sup>	100%	N/A	N/A	N/A
Outcome	% of clients referred who are accepted into an employment setting	89%	90%	90%	90%
Outcome	% of service plans authorized and built in state billing system within 10 business days <sup>2</sup>	53%	90%	60%	0%
Output	# of direct service provider timesheets processed annually for clients receiving in-home services. <sup>3</sup>	N/A	N/A	36,000	39,600

### Performance Measures Descriptions

<sup>1</sup>This measure is being retired, as 100% accuracy is consistently achieved.

<sup>2</sup>This measure is lower than expected for FY18 due to an increase in the volume of service plans. With the expected decrease in staff for this group, performance will decline to 0% in FY20.

<sup>3</sup>New measure for FY20 reflects an increase in time sheet volume for service providers hired by IDD clients.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$2,755,321	\$0	\$2,317,821
Contractual Services	\$551,543	\$455,851	\$595,568	\$514,304
Materials & Supplies	\$0	\$39,592	\$0	\$22,165
Internal Services	\$0	\$919,731	\$0	\$789,071
<b>Total GF/non-GF</b>	<b>\$551,543</b>	<b>\$4,170,495</b>	<b>\$595,568</b>	<b>\$3,643,361</b>
<b>Program Total:</b>	<b>\$4,722,038</b>		<b>\$4,238,929</b>	
<b>Program FTE</b>	0.00	25.00	0.00	20.00

Program Revenues				
Intergovernmental	\$0	\$4,170,495	\$0	\$3,643,361
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,170,495</b>	<b>\$0</b>	<b>\$3,643,361</b>

Explanation of Revenues

\$2,970,376 - State Mental Health Grant Case Management; \$125,000 - State Mental Health Grant Self Directed Individual/Family; \$158,681 - State Mental Health Grant Local Admin; \$121,719 - HAP Housing Program; \$110,000 - State Mental Health Grant Long Term Support for Children; \$50,000 - State Mental Health Grant Special Projects; \$44,585 - Partners for Hunger-Free Oregon; \$27,000 - State Mental Health Grant Ancillary Service; \$10,000 - State Mental Health Grant Special Projects Services for Adults in Foster Care; \$10,000 - State Mental Health Grant Special Projects Services for Children in Foster Care; \$10,000 - State Mental Health Grant Room and Board State General Fund; \$3,000 - State Mental Health Grant Family Support Services; \$3,000 - United Way Housing Assistance

Significant Program Changes

Last Year this program was: FY 2019: 25011-19 IDDSD Budget and Operations

Decreased 5 FTE: 3.0 Program Specialists, 1.0 Program Specialist Sr., 1.0 Office Assistant Sr.

Decreased: 1 FTE Office Assistant 2 moved to PO 25010

Increased: 1 FTE Program Technician moved from PO 25010

**Department:** County Human Services      **Program Contact:** Mohammad Bader  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Intellectual and Developmental Disabilities Services Division (IDSD) Adult Services support the quality of life of individuals with intellectual and developmental disabilities, with a special emphasis on personal development, social inclusion, health and safety, and self-determination as characterized by client authority, autonomy, and responsibility. Adult Services include service coordination and monitoring, individual support plans, needs and risk assessments, and connections to resources. All services are inclusive, culturally appropriate, and support clients to make informed decisions based on their goals.

**Program Summary**

**ISSUE:** Adult Services address the need for extensive home and community based long-term support instead of expensive and isolating institutional care so that individuals with intellectual and developmental disabilities can maintain their independence, health, and safety within the community. An intellectual or developmental disability is a condition such as cerebral palsy, autism or intellectual disability that a person is born with, or that develops during childhood, and is expected to continue indefinitely.

**PROGRAM GOALS:** Policy, advocacy and research around quality of life for individuals with intellectual and developmental disabilities has converged on eight quality of life domains that guide the implementation of Adult Services: emotional, material, and physical well-being, interpersonal relations, social inclusion, personal development, self-determination, and rights. The goals of Adult Services are aligned with these domains and include: a) assist individuals in accessing a residential placement of their choice; b) provide planning and supports that increase client achievement of personal goals; c) support clients in connecting to and using both funded and natural supports; d) maintain and improve the health and safety of clients through service access and monitoring; e) increase the life choices available to clients; and f) optimize client involvement in education, employment, and purposive activity.

**PROGRAM ACTIVITY:** The six goals outlined above correspond to four general areas of activity: assessment, connection, service coordination, and monitoring. In the area of assessment, Adult Services is responsible for conducting needs assessments that determine service levels and categories. In the area of connection, Adult Services connect clients to residential, educational, employment, and interpersonal resources. This includes a map of family, friends and community members that can serve as resources for clients. In the area of service coordination, Adult Services engage the client in person-centered planning to identify interests, strengths, choices, and goals, and document this information in an Individual Support Plan that outlines a path to goal achievement. The Service Coordinator also provides ongoing, individualized support to clients. In the area of monitoring, Adult Services engage in regular monitoring of service providers and partner with Community Justice, Mental Health, Vocational Rehabilitation, and crisis services to ensure the health and safety of clients.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total number of adults served each month	1,760	1,800	1,800	1,820
Outcome	Total monitoring contacts for adults <sup>1</sup>	24,208	8,000	18,000	18,000
Outcome	% of adult survey respondents who report that they like where they live	88%	85%	88%	88%

**Performance Measures Descriptions**

<sup>1</sup> IDD hired 10 temporary monitors in FY18, and so the monitoring numbers went up. Those temporary staff left in June, 2018, and so the expected monitoring numbers for FY19 and FY20 are reduced.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$833,147	\$3,696,380	\$878,798	\$3,963,108
Contractual Services	\$0	\$10,000	\$10,000	\$0
Materials & Supplies	\$14,254	\$47,135	\$9,976	\$40,787
Internal Services	\$217,857	\$1,175,134	\$228,585	\$1,438,167
<b>Total GF/non-GF</b>	<b>\$1,065,258</b>	<b>\$4,928,649</b>	<b>\$1,127,359</b>	<b>\$5,442,062</b>
<b>Program Total:</b>	<b>\$5,993,907</b>		<b>\$6,569,421</b>	
<b>Program FTE</b>	9.00	36.80	9.00	36.80

Program Revenues				
Intergovernmental	\$0	\$4,928,649	\$0	\$5,442,062
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,928,649</b>	<b>\$0</b>	<b>\$5,442,062</b>

Explanation of Revenues

\$5,411,737- State Mental Health Grant Case Management  
 \$30,325 - State Mental Health Grant Psychiatric Treatment and Supervision

Significant Program Changes

Last Year this program was: FY 2019: 25012-19 IDDSD Services for Adults

**Department:** County Human Services      **Program Contact:** Mohammad Bader  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Intellectual and Developmental Disabilities Services Division (IDSD) Child and Young Adult Services support the quality of life of individuals with intellectual and developmental disabilities, emphasizing self-determination, personal development, social inclusion, health, and safety. Child and Young Adult Services include service coordination, monitoring, individual support plans, needs assessments and connections to resources targeted toward optimal child development and transition from child to adult services. All services are inclusive and support clients to make informed decisions based on their goals.

**Program Summary**

**ISSUE:** Child and Young Adult Services address the need for extensive home and community based long-term support services instead of expensive and isolating institutional care so that individuals with intellectual and developmental disabilities can maintain their independence, health, and safety within their community. An intellectual or developmental disability is a condition such as cerebral palsy, autism or intellectual disability that a person is born with, or that develops during childhood, and is expected to continue indefinitely.

**PROGRAM GOALS:** Policy, advocacy and research around quality of life for individuals with intellectual and developmental disabilities has converged on eight quality of life domains that guide the implementation of services: emotional, material, and physical well-being, interpersonal relations, social inclusion, personal development, self-determination, and rights. The goals of Child and Young Adult Services align with these domains and include: a) identify the best housing option for each child and young adult, with a focus on keeping children in the family home; b) provide planning and family supports that optimize child development and transition from child to adult services; c) support clients and families in connecting to and using both funded and natural supports; d) maintain and improve the health and safety of clients through service access and monitoring; and e) optimize client involvement in education, employment, and purposive activity.

**PROGRAM ACTIVITY:** The goals outlined above correspond to four general areas of activity: assessment, connection, service coordination, and monitoring. Needs assessments are conducted to determine levels and categories of service. Services connect clients to community, educational, and developmental resources. This includes a map of family, friends and community members that can serve as resources, as well as training opportunities for families. Service coordinators engage the client in person-centered planning to identify interests, strengths, choices, and goals, and document this information in an Individual Support Plan that outlines a path to goal achievement. IDSD aims to match the service coordinator linguistically and culturally with clients to provide individualized support and to coordinate with agencies, such as the Social Security Administration, Public Guardian Program, and Vocational Rehabilitation. Supports help young adults create life plans and transition to independence within the community. Service coordinators monitor service providers and partner with Oregon DHS, Mental Health, and emergency response services to ensure the client health and safety.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of children (birth -17) served each month	1,678	1,700	1,800	1,900
Outcome	% of children retained in the family home	91%	90%	90%	90%
Output	Number of young adults (aged 18-21) served each month <sup>1</sup>	460	700	500	550
Outcome	Number of monitoring contacts for children and young adults <sup>3</sup>	26,767	9,000	20,000	9,000

**Performance Measures Descriptions**

<sup>1</sup> Multnomah County partnered with brokerages to streamline the process for clients requesting brokerage service. This resulted in a slower increase in the number of young adults served by Multnomah County in FY19.

<sup>2</sup> With the expected staff decrease of 1 FTE Program supervisor, there will be less supervisory support on complex cases, and a reduction in the amount of monitoring as service coordinators spend more time on clients in crisis. The amount of monitoring is expected to decrease in FY20.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$708,447	\$4,000,429	\$784,836	\$4,120,372
Contractual Services	\$25,000	\$0	\$25,000	\$0
Materials & Supplies	\$12,670	\$53,985	\$8,865	\$44,334
Internal Services	\$154,786	\$1,320,418	\$196,569	\$1,502,909
<b>Total GF/non-GF</b>	<b>\$900,903</b>	<b>\$5,374,832</b>	<b>\$1,015,270</b>	<b>\$5,667,615</b>
<b>Program Total:</b>	<b>\$6,275,735</b>		<b>\$6,682,885</b>	
<b>Program FTE</b>	8.00	41.00	8.00	40.00

Program Revenues				
Intergovernmental	\$0	\$5,374,832	\$0	\$5,667,615
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,374,832</b>	<b>\$0</b>	<b>\$5,667,615</b>

Explanation of Revenues

\$5,667,615 - State Mental Health Grant Case Management

Significant Program Changes

Last Year this program was: FY 2019: 25013-19 IDDSD Services for Children and Young Adults

Decreased 1.0 Program Supervisor

**Department:** County Human Services      **Program Contact:** Mohammad Bader  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Intellectual and Developmental Disabilities Services Division (IDSD) Abuse Investigations provides abuse investigation and prevention services to increase the quality of life for individuals with intellectual and developmental disabilities. These services ensure the health and safety of clients, as well as client rights and access to criminal justice protections. The Abuse Investigation team delivers timely and responsive services that are person-centered and collaborative.

**Program Summary**

**ISSUE:** Abuse Investigations address the need to protect the health, safety, and rights of individuals who are at increased risk for exploitation and abuse due to their intellectual or developmental disability.

**PROGRAM GOALS:** Abuse Investigations directly address four of the core quality of life domains identified by the research on enhancing quality of life for individuals with intellectual and developmental disabilities: emotional, material, and physical well-being, and rights. The goals related to these domains include a) increase access to developmental disability services and criminal justice protections through the abuse investigation process; b) increase and maintain client health and safety through safety plans; c) improve service delivery for clients by partnering with local, state and federal agencies; and d) prevent further abuse through a required protective service action plan.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to three general areas of activity: access, collaboration, and prevention. In the area of access, abuse investigators are responsible for ensuring that timely and appropriate safety plans are in place so that clients have access to the direct supports they need for their health and safety. Additional responsibilities include unbiased screening and investigation of alleged abuse, neglect, or exploitation of adults now or previously enrolled in IDD services. These services are conducted under the oversight of the State Department of Human Services Office of Training, Investigation, and Safety, and include investigations of care providers and non-care providers. In the area of collaboration, abuse investigators maintain close working relationships with local, state, and federal law enforcement agencies and community partners, and participate in the District Attorney's Multi-Disciplinary Team, the ADVSD Public Guardian/Conservator program, and the Critical Case Review Committee, designed to discuss and find safe options for high-risk clients experiencing complex situations. In the area of prevention, abuse investigators provide technical assistance and follow-up for protective service and required action plans. These services ensure programmatic compliance with Oregon Administrative Rules, statutes, and contracts, and reduce the risk of abuse, neglect, and exploitation of clients.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of investigations closed	296	175	200	175
Outcome	% of abuse referrals screened within 3 working days <sup>1</sup>	92%	90%	90%	90%
Output	Number of programmatic monitoring visits performed <sup>2</sup>	27	N/A	N/A	N/A
Outcome	% of sites monitored that were found to be in compliance with Oregon Administrative Rules <sup>2</sup>	100%	N/A	N/A	N/A

**Performance Measures Descriptions**

<sup>1</sup> Due to OAR rule change in effect October 1st, 2018, abuse referrals must be screened within 3 working days instead of 5 working days. The FY18 actual of 92% reflects the previous benchmark of 5 working days. The FY19 estimate and FY20 offer reflect the new benchmark of 3 working days.

<sup>2</sup> The Output and Outcome measures associated with programmatic monitoring are no longer applicable and are being retired.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$274,019	\$1,664,278	\$294,935	\$1,483,745
Contractual Services	\$0	\$1,000	\$0	\$1,000
Materials & Supplies	\$3,958	\$21,376	\$2,770	\$14,961
Internal Services	\$48,371	\$500,255	\$56,333	\$429,040
<b>Total GF/non-GF</b>	<b>\$326,348</b>	<b>\$2,186,909</b>	<b>\$354,038</b>	<b>\$1,928,746</b>
<b>Program Total:</b>	<b>\$2,513,257</b>		<b>\$2,282,784</b>	
<b>Program FTE</b>	2.50	15.50	2.50	13.50

Program Revenues				
Intergovernmental	\$0	\$2,186,909	\$0	\$1,928,746
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,186,909</b>	<b>\$0</b>	<b>\$1,928,746</b>

Explanation of Revenues

\$1,072,965 - State Mental Health Grant Abuse Investigation Services  
 \$591,431 - State Mental Health Grant Local Admin  
 \$264,350- State Mental Health Grant Case Management

Significant Program Changes

Last Year this program was: FY 2019: 25014-19 IDDSD Abuse Investigations

Decreased 2 FTE: 2.0 Program Specialists.



**Department:** County Human Services      **Program Contact:** Mohammad Bader  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Intellectual and Developmental Disabilities Services Division (IDSD) Eligibility and Intake Services increase access to essential quality of life supports and resources for individuals with intellectual and developmental disabilities. These entryway services emphasize awareness, access, choice, and community inclusion for individuals seeking support. Eligibility and Intake Services, as determined by State and Federal rules, are self-directed, community and family inclusive, culturally appropriate, and support clients to make informed decisions based on their goals.

**Program Summary**

**ISSUE:** Eligibility and Intake Services address the need for awareness and understanding of available services and provide assistance with navigating the application and eligibility processes for intellectual and developmental disability services for both children and adults.

**PROGRAM GOALS:** Research shows that efforts to support quality of life for individuals with intellectual and developmental disabilities must enhance the individual's opportunity to access and choose the activities, supports and living arrangements that are right for them. Eligibility and Intake Services constitute the point of entry to all IDSD vocational, residential, case management, and in-home services. The goals of Eligibility and Intake Services align with demonstrated best practices and include: a) increase understanding of available services and eligibility requirements; b) increase connections of individuals to community resources; c) increase application rates through direct application support; d) increase access to funded services by determining eligibility and enrolling clients according to State regulatory requirements.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to three general areas of activity: awareness, connection, and access. In the area of awareness, Eligibility and Intake Services conduct community outreach to increase awareness and understanding of Multnomah County Intellectual and Developmental Disabilities services and processes. This outreach results in referrals from community partner agencies, including schools, medical providers, parent networks, and social service agencies. Referrals and inquiries are followed up with a phone call that provides detailed information about services and next steps. In the area of connection, Eligibility and Intake Services contact the potential client in their primary language to schedule an intake appointment at a location convenient for them. While waiting for a formal eligibility determination, potential clients are connected to community partner agencies that may provide needed resources, such as health insurance application, early intervention, or housing supports. In the area of access, Eligibility and Intake Services provide an intake appointment, one-on-one application support, initial needs assessment, service information, eligibility determination, and referral to brokerages, which are alternative non-County case management systems. Applicants are contacted regarding the outcome of their eligibility determination and eligible clients are paired with a Service Coordinator.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of intake eligibility referrals <sup>1</sup>	932	1,000	1,000	1,000
Outcome	% of referrals made eligible for DD services	78%	76%	76%	76%
Outcome	% of applicants satisfied with the intake support they receive <sup>2</sup>	98%	80%	100%	N/A
Output	# of 90-day extension requests submitted to the state <sup>3</sup>	N/A	N/A	220	440

**Performance Measures Descriptions**

<sup>1</sup>Based on state forecasting, eligibility referrals will stay level in FY19 and FY20.

<sup>2</sup>This measure is being retired, as high satisfaction is consistently achieved.

<sup>3</sup>New measure in FY20. IDSD has 90 days to make eligibility determinations. Requests must be made for determinations that take longer than 90 days. The number of 90-day extension requests will double if Eligibility and Intake Services loses their 1 FTE Office Assistant Sr.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$118,351	\$1,175,163	\$124,967	\$1,171,193
Contractual Services	\$10,000	\$0	\$10,000	\$0
Materials & Supplies	\$1,584	\$17,422	\$1,108	\$11,085
Internal Services	\$19,348	\$380,877	\$22,534	\$415,700
<b>Total GF/non-GF</b>	<b>\$149,283</b>	<b>\$1,573,462</b>	<b>\$158,609</b>	<b>\$1,597,978</b>
<b>Program Total:</b>	<b>\$1,722,745</b>		<b>\$1,756,587</b>	
<b>Program FTE</b>	1.00	11.00	1.00	10.00

Program Revenues				
Intergovernmental	\$0	\$1,573,462	\$0	\$1,597,978
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,573,462</b>	<b>\$0</b>	<b>\$1,597,978</b>

Explanation of Revenues

\$1,050,453 - State Mental Health Grant Local Admin  
 \$547,525 - State Mental Health Grant Case Management

Significant Program Changes

Last Year this program was: FY 2019: 25016-19 IDDSD Eligibility & Intake Services

Decreased 1.0 Office Assistant Sr.

**Department:** County Human Services      **Program Contact:** Felicia Nelson  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) Adult Care Home Program (ACHP) licenses, monitors, and provides equitable access to 617 quality adult care homes in Multnomah County. The ACHP licenses adult care homes to ensure compliance with health and safety rules and regulations developed to support older adults, people with disabilities, people with mental illness, and Veterans. Quarterly monitoring ensures residents' preferences are honored and their specific needs are met in a culturally appropriate, safe, and welcoming 24-hour setting.

**Program Summary**

**ISSUE:** The State of Oregon's approach to long-term services and supports for over 35 years has been to invest more Medicaid dollars in community settings as an alternative to nursing facilities. The State values the goal of reducing Medicaid cost and increasing choice for participants. Adult care homes are single family homes located in residential neighborhoods that offer assistance for up to five adults in a home-like environment. These homes are a key alternative to nursing facilities. Multnomah County has the majority of the nursing facilities in the state. Multnomah County has an exemption from the State of Oregon to create local licensing regulations that meet or exceed State requirements for adult care homes to ensure the highest quality and safety for county residents.

**PROGRAM GOAL:** The goal of the Adult Care Home Program is to ensure residents receive appropriate, person-directed, culturally specific, and safe services, and that the operators of the homes are in compliance with Multnomah County Administrative Rules (MCARs).

**PROGRAM ACTIVITY:** The ACHP accepts, reviews, and approves license applications for those interested in operating an adult care home. Once approved, all adult care home operators are trained on and follow MCARs which exceed the State of Oregon's minimum requirements. Multnomah County has 2,741 licensed beds in the 603 licensed adult care homes and 14 room and board facilities. All homes receive a minimum of three to four licensing and monitoring visits each year. These visits ensure that residents receive appropriate care and services, including personal care, nutrition, physical safety, nursing care, and medication management. ACHP takes corrective action when it identifies issues of noncompliance in the home. Program staff provide technical assistance to adult care home operators and issue written warnings, sanctions, or fines when there are serious deficits.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of licenses issued <sup>1</sup>	742	N/A	658	665
Outcome	% of adult care homes that were licensed accurately and timely based on ACHP audit findings	86%	85%	85%	85%
Outcome	% of adult care home residents satisfied with services received in adult care homes <sup>2</sup>	82%	82%	82%	82%
Outcome	Average Medicaid cost savings for adult care home residents compared to nursing facility placement <sup>3</sup>	66%	65%	65%	65%

**Performance Measures Descriptions**

<sup>1</sup>New measure: represents the # of licenses issued. Because new homes open and existing homes may close or change, the # of licenses issued in the FY exceeds a point-in-time home count. <sup>2</sup>The resident survey is from information collected in 2016. <sup>3</sup>The average monthly Medicaid cost of services provided to older adults, people with disabilities, and Veterans in an adult care home is \$2,947. This is 34% of the \$8,609 average Medicaid cost of a nursing facility placement for the same population.

## Legal / Contractual Obligation

Multnomah County has a contract with the Oregon Department of Human Services to administer the licensing, monitoring, and training functions of Adult Care Homes. The Board of County Commissioners passed Multnomah County Resolution §23.66 - §223.999 establishing the Adult Care Home Program.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$38,004	\$1,862,612	\$40,244	\$1,971,608
Contractual Services	\$195,164	\$381,830	\$182,160	\$393,218
Materials & Supplies	\$1,744	\$85,070	\$1,558	\$76,797
Internal Services	\$8,550	\$685,269	\$8,698	\$713,995
<b>Total GF/non-GF</b>	<b>\$243,462</b>	<b>\$3,014,781</b>	<b>\$232,660</b>	<b>\$3,155,618</b>
<b>Program Total:</b>	<b>\$3,258,243</b>		<b>\$3,388,278</b>	
<b>Program FTE</b>	0.38	18.62	0.38	18.62

Program Revenues				
Fees, Permits & Charges	\$0	\$354,830	\$0	\$354,830
Intergovernmental	\$0	\$2,659,951	\$0	\$2,800,788
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,014,781</b>	<b>\$0</b>	<b>\$3,155,618</b>

## Explanation of Revenues

\$2,800,788 - Title XIX  
 \$299,430 - Adult Care Home Program License Fees  
 \$20,400 - Adult Care Home Program Misc Fees  
 \$20,000 - Adult Care Home Program Fines  
 \$15,000 - Adult Care Home Program Conference Fees

## Significant Program Changes

**Last Year this program was:** FY 2019: 25022-19 ADVSD Adult Care Home Program

Previous measure: "# of adult care homes and room and board facilities licensed and inspected annually" FY18 Actual=617, FY19 Purchased=636, FY19 Estimate=617

**Department:** County Human Services      **Program Contact:** Irma Jimenez  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25023B  
**Program Characteristics:**

### Executive Summary

Aging, Disability & Veterans Services Division provides a continuum of programs that ensure older adults, people with disabilities, and Veterans have equitable and efficient access to quality services that meet their diverse needs. The Long Term Services & Supports Program (LTSS) is the Medicaid program that provides resources and case management to support individuals' independence and quality of life.

### Program Summary

**ISSUE:** Older adults with incomes below the poverty level and individuals with a physical disability, mental illness, or developmental disability can face health and safety risks and benefit from early intervention and effective management of complex care needs.

**PROGRAM GOAL:** The goals of LTSS case management services are to advocate and support safe, healthy, and independent living in the community for participants. These goals help prevent or minimize costly nursing facility placement, hospitalization, and hospital readmission. Promoting home and community-based services is a priority. The number of individuals living in community-based settings in Multnomah County far exceeds the national average.

**PROGRAM ACTIVITY:** Under contract with the State, there are two key Medicaid programs provided: service case management and eligibility case management. Service case management utilizes a person-centered approach to assess needs and jointly create plans with participants who are highly vulnerable and have complex social, daily living, and medical needs. The State refers to this as meeting "criteria for nursing facility level of care." Service case managers authorize, coordinate, and monitor services that address health and safety risks in the least restrictive environment. At any point in time, there are approximately 8,445 participants receiving service case management. The service case manager team consists of 89 budgeted FTE, which averages out to 95 participants to each case manager. Exact caseload sizes vary based on participants' care setting and case complexity.

Participants who meet financial eligibility guidelines, but do not meet the criteria for nursing facility level of care receive eligibility case management. These participants are enrolled in programs that meet basic health, financial, and nutritional needs through the Oregon Health Plan, Medicaid, or the Supplemental Nutrition Assistance Program (SNAP). They may also receive counseling to help choose the most appropriate managed care and Medicare Part D plans. At any point in time, there are approximately 32,160 participants receiving eligibility case management. The eligibility case manager team consists of 67 budgeted FTE, and case managers use a collaborative approach to conduct eligibility determination, enrollment, and benefit maintenance. Eligibility case managers do not carry individual caseloads.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants served in LTSS programs <sup>1 2</sup>	45,670	41,000	47,400	47,400
Outcome	% of participants who felt listened to by LTSS staff <sup>3</sup>	88%	N/A	90%	90%
Output	# of participants receiving Medicaid service case management <sup>1 4</sup>	10,047	10,500	10,700	10,700
Outcome	% of nursing facility eligible clients who are living in the community	85%	84%	84%	84%

### Performance Measures Descriptions

<sup>1</sup>Measure is a count from November 2017 - June 2018. The actual annual count would be more participants and we will be able to report the full year as of FY19. <sup>2</sup>Measure reworded for clarity. Measure was previously "annual # of participants served in health, financial, and nutritional programs." <sup>3</sup>New measure: based on responses to an optional participant experience survey administered at all LTSS branch offices. <sup>4</sup>Measure reworded for clarity. Measure was previously "annual # of participants receiving services and medical benefits."

## Legal / Contractual Obligation

ADVSD has a contract with the Oregon Department of Human Services to administer the Medicaid and SNAP programs in Multnomah County. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities. The programs are guided by Federal regulations or rules including those in the Social Security Act, Medicaid Administration, and SNAP.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$24,913,150	\$0	\$26,571,389
Contractual Services	\$3,206,609	\$120,000	\$3,291,773	\$217,900
Materials & Supplies	\$0	\$537,401	\$0	\$419,455
Internal Services	\$0	\$9,420,203	\$0	\$9,599,402
<b>Total GF/non-GF</b>	<b>\$3,206,609</b>	<b>\$34,990,754</b>	<b>\$3,291,773</b>	<b>\$36,808,146</b>
<b>Program Total:</b>	<b>\$38,197,363</b>		<b>\$40,099,919</b>	
<b>Program FTE</b>	0.00	262.55	0.00	263.55

Program Revenues				
Intergovernmental	\$0	\$34,566,156	\$0	\$36,222,867
Other / Miscellaneous	\$0	\$424,598	\$0	\$585,279
<b>Total Revenue</b>	<b>\$0</b>	<b>\$34,990,754</b>	<b>\$0</b>	<b>\$36,808,146</b>

## Explanation of Revenues

\$36,222,867 - Title XIX  
 \$170,646 - Providence Medical Center  
 \$154,590 - Oregon Health Sciences University Case Manager (FTE) grant  
 \$133,351 - Kaiser Foundation Hospitals  
 \$126,692 - Case Management Assessments for Medicaid Patients 18+

## Significant Program Changes

**Last Year this program was:** FY 2019: 25023-19 ADVSD Long Term Services & Supports (Medicaid)

Increase in 1.00 FTE Case Manager 2 due to increased hospital funding.

Previous measure: "% of participants who would recommend LTSS services" FY18 Actual=91%, FY19 Purchased=93%, FY19 Estimate=93%.

**Department:** County Human Services      **Program Contact:** Irma Jimenez  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25023A  
**Program Characteristics:**

### Executive Summary

The Long Term Services & Supports Program (LTSS) is the Medicaid program that provides resources and case management to support individuals' independence and quality of life. This program offer requests restoration of County General Fund (CGF) in response to the CGF Constraint and will be used as match adding \$386,070 of Medicaid funds.

### Program Summary

**ISSUE:** ADVSD LTSS program is in the process of transitioning a portion of the work duties from service case managers (case manager 2) to eligibility case managers (case manager 1). This shift moves the responsibility of financial eligibility redetermination from case manager 2s to case manager 1s. This shift will increase the work of the eligibility case managers by an average of 665 eligibility redeterminations per month division-wide. Branches do not currently have equitable workloads and the new positions will help to balance the workload.

**PROGRAM GOAL:** Additional positions will allow for staffing equity across branches as well as address the increase in case manager 1 workload due to the shift in redetermination work.

**PROGRAM ACTIVITY:** Under contract with the State, there are two key Medicaid programs provided: service case management and eligibility case management. Service case management utilizes a person-centered approach to assess needs and jointly create plans with participants who are highly vulnerable and have complex social, daily living, and medical needs. The State refers to this as meeting "criteria for nursing facility level of care." Service case managers authorize, coordinate, and monitor services that address health and safety risks in the least restrictive environment. Participants who meet financial eligibility guidelines, but do not meet the criteria for nursing facility level of care receive eligibility case management. These participants are enrolled in programs that meet basic health, financial, and nutritional needs through the Oregon Health Plan, Medicaid, or the Supplemental Nutrition Assistance Program (SNAP). They may also receive counseling to help choose the most appropriate managed care and Medicare Part D plans.

State mandates in the past year have significantly increased the workload of the case manager 2s. Moving financial eligibility redeterminations to case manager 1s will provide needed relief for case manager 2s and the ability to meet State standards in a timely manner. This program offer adds four positions: an office assistant 2 for the Home Care Worker unit to align the number with staffing in the other branches and units; two case manager 1s to address the increased workload from the shift of duties, and one case manager 2 to allow for branch staffing equity.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of service financial redeterminations completed by case manager 2s at Mid branch <sup>1</sup>	N/A	N/A	N/A	2,273
Outcome	% of service financial redeterminations completed on time at Mid branch <sup>1</sup>	N/A	N/A	N/A	100%

### Performance Measures Descriptions

<sup>1</sup>The transition of work assignments from case manager 2s to case manager 1's will be done in phases and will begin with the Mid branch.

## Legal / Contractual Obligation

ADVSD has a contract with the Oregon Department of Human Services to administer the Medicaid and SNAP programs in Multnomah County. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities. The programs are guided by Federal regulations or rules including those in the Social Security Act, Medicaid Administration, and SNAP.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$0	\$323,930
Contractual Services	\$0	\$0	\$166,011	\$0
Materials & Supplies	\$0	\$0	\$0	\$14,846
Internal Services	\$0	\$0	\$0	\$47,294
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$166,011</b>	<b>\$386,070</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$552,081</b>	
<b>Program FTE</b>	0.00	0.00	0.00	4.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$386,070
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$386,070</b>

## Explanation of Revenues

\$386,070 - Title XIX

## Significant Program Changes

Last Year this program was:



**Department:** County Human Services      **Program Contact:** Brian Hughes  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) Adult Protective Services Program (APS) helps vulnerable older adults, people with disabilities, and Veterans have improved quality of life by being free of abuse, financial exploitation, neglect, and self-neglect through equitable and efficient access to quality protective services that meet their diverse needs. APS conducts abuse investigations, links victims of abuse to health, legal, and social services to improve safety and reduce risk to prevent self-neglect, and provides community education about abuse prevention.

**Program Summary**

**ISSUE:** Older adults, people with disabilities, and Veterans can be at risk of abuse, financial exploitation, neglect, and self-neglect due to social isolation, physical impairment, health concerns, and dependence on others to meet their needs. It is estimated that one in nine vulnerable adults is the victim of abuse at some time during their life.

**PROGRAM GOAL:** The primary goal of the Adult Protective Services Program is to protect older adults, people with disabilities, and Veterans from abuse, neglect, self-neglect, and financial exploitation. APS serves a critical department-wide goal of ending abuse and neglect, stabilizing vulnerable adults in the most independent setting possible, holding perpetrators accountable, and providing community education.

**PROGRAM ACTIVITY:** APS receives referrals and investigates allegations of abuse, neglect, self-neglect, and financial exploitation of older adults, people with disabilities, and Veterans through a centralized screening number. Thirty APS investigators review all reported incidents of abuse both for those living in the community or residing in one of the 85 assisted living or residential care facilities or in one of 617 adult care homes in Multnomah County. APS staff link vulnerable adults to needed healthcare, housing, social services, and legal and participant advocacy agencies. The APS team consists of clinical services specialists, human services investigators, a risk case manager, and APS screeners. APS coordinates with law enforcement and the District Attorney's Office to prosecute offenders. The District Attorney's Office, law enforcement officers, the Public Guardian, and Multnomah County Counsel participate in monthly meetings to discuss criminal cases. The APS risk case manager provides short-term case management for vulnerable adults without a substantiated abuse claim but who are at high risk for abuse or self-neglect, or have a significant threat to their health and safety. Risk case management services stabilize individuals, providing intensive oversight for up to a year by creating linkages to appropriate agencies and ongoing services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of referrals to APS	7,301	7,000	7,775 <sup>1</sup>	7,800
Outcome	% of people receiving risk case management who did not have a reported abuse case after receiving services	93%	90%	90%	90%
Output	# of Adult Protective Service investigations completed <sup>2</sup>	2,508	2,400	2,385	2,400
Outcome	Re-abuse rate for individuals involved with APS	3.28% <sup>3</sup>	3.28%	3.28%	3.28%

**Performance Measures Descriptions**

<sup>1</sup>The referral rate has increased due to expansion of Mandatory Abuse Reporting requirements for more professions and increase in outreach for people to report abuse.

<sup>2</sup>In FY19 the State assumed responsibility for conducting investigations of abuse in nursing facilities, which will likely reduce the overall number of investigations completed by the County.

<sup>3</sup>Reabuse rate is calculated by the State and data is unavailable for FY18. Measure reflects FY17 reabuse rate.

## Legal / Contractual Obligation

Adult Protective Services is a mandated service by Oregon Administrative Rules. Multnomah County acts as the designated Area Agency on Aging and is required to perform this function under contract with the Oregon Department of Human Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$42,494	\$4,208,840	\$43,799	\$4,427,943
Contractual Services	\$562,822	\$10,000	\$538,365	\$5,000
Materials & Supplies	\$0	\$111,743	\$0	\$80,800
Internal Services	\$0	\$1,342,928	\$0	\$1,325,050
<b>Total GF/non-GF</b>	<b>\$605,316</b>	<b>\$5,673,511</b>	<b>\$582,164</b>	<b>\$5,838,793</b>
<b>Program Total:</b>	<b>\$6,278,827</b>		<b>\$6,420,957</b>	
<b>Program FTE</b>	0.35	38.00	0.35	38.00

Program Revenues				
Intergovernmental	\$0	\$5,673,511	\$0	\$5,838,793
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,673,511</b>	<b>\$0</b>	<b>\$5,838,793</b>

## Explanation of Revenues

\$5,838,793 - Title XIX

## Significant Program Changes

Last Year this program was: FY 2019: 25024-19 ADVSD Adult Protective Services

**Department:** County Human Services  
**Program Offer Type:** Existing Operating Program

**Program Contact:** Erin Grahek  
**Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging, Disability & Veterans Services Division (ADVSD) operates the County Veterans Service Office as part of the continuum of services the Division provides. The office works with Veterans to ensure they receive equitable and efficient access to quality services and programs that meet their diverse needs. Veterans Services supports anyone who served on active duty with the U.S. Armed Forces and their families by providing advocacy, access, and assistance to obtain all entitlements and benefits through the Federal Veterans Administration contributing to overall quality of life.

### Program Summary

**ISSUE:** Accessing Federal Veterans' benefits is complex and the wait time to obtain a decision can be long thereby delaying access to needed benefits for Veterans and their families.

**PROGRAM GOAL:** The goals of Veterans Services are to provide information, assistance, and advocacy to all who served in the military in order to improve their access to pension, disability, and health benefits. Veterans Services leverage strong community partnerships, resulting in increased community referrals for underrepresented Veterans.

**PROGRAM ACTIVITY:** Veterans Service Officers (VSOs) are trained and accredited by the Oregon Department of Veterans Affairs to represent Veterans and their families in their claims for benefits. VSOs are versed in applicable Federal and State laws to provide the best representation possible, free of charge. VSOs provide comprehensive counseling on Veterans Administration (VA) benefits; assist with VA healthcare enrollment; prepare and submit claims for VA compensation and pension; initiate and develop appeals; network with Federal, State, and local agencies; and provide outreach to Veterans involved with the justice system. ADVSD has committed to supporting Veterans by leading the County's Veterans Services Task Force to strengthen the network of community partners. The Veterans Service Office is also a supporting partner in "A Home for Everyone" efforts to end chronic homelessness for Veterans through participation in the "By Name List," a registry for Veterans who are homeless or at risk of homelessness. This effort increases awareness about VSOs and the services they provide in assisting Veterans to navigate the claims process as quickly and smoothly as possible. VSOs promote equity to Veterans and military families identified within underrepresented communities who face barriers to access Federal, State, and local benefits. The VSOs help Veterans apply for various services with different eligibility standards and conduct over 2,300 annual face-to-face appointments. At any given point in time the VSOs are serving over 8,100 Veterans in Multnomah County. The VSOs implement intentional and targeted outreach with multiple access options for LGBTQ Veterans, women Veterans, Veterans within communities of color, Veterans experiencing homelessness, justice-involved Veterans, as well as Veterans and military families experiencing socio-economic disparities.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of Veterans with new representation with Veterans Services <sup>1</sup>	761	890	820	820
Outcome	# of Veterans or eligible family members with new claims filed in the fiscal year	300	335	316	316
Outcome	New monthly compensation or pension awarded for ongoing benefit to Veterans due to VSO representation	\$487,893	\$606,349	\$547,121	\$547,121
Outcome	New retroactive benefits awarded to Veterans because of VSO representation in the last fiscal year	\$3,030,809	\$2,300,894	\$2,665,852	\$2,665,852

### Performance Measures Descriptions

<sup>1</sup>Representation is done by VSOs who are trained, accredited, and appointed as Power of Attorneys by Oregon Department of Veterans Affairs to represent Veterans and their families in their claims for benefits.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$473,852	\$272,042	\$499,488	\$293,490
Contractual Services	\$0	\$7,270	\$5,000	\$25,000
Materials & Supplies	\$28,079	\$13,153	\$26,693	\$7,544
Internal Services	\$107,670	\$50,445	\$101,399	\$28,649
<b>Total GF/non-GF</b>	<b>\$609,601</b>	<b>\$342,910</b>	<b>\$632,580</b>	<b>\$354,683</b>
<b>Program Total:</b>	<b>\$952,511</b>		<b>\$987,263</b>	
<b>Program FTE</b>	4.73	3.27	4.71	3.29

Program Revenues				
Intergovernmental	\$0	\$325,625	\$0	\$329,683
Beginning Working Capital	\$0	\$17,285	\$0	\$25,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$342,910</b>	<b>\$0</b>	<b>\$354,683</b>

Explanation of Revenues

\$329,683 - Oregon Department of Veterans Affairs  
 \$25,000 - Federal/State Beginning Working Capital

Significant Program Changes

Last Year this program was: FY 2019: 25025-19 ADVSD Veterans Services

**Department:** County Human Services      **Program Contact:** Mark Sanford  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25026B, 25026C  
**Program Characteristics:**

### Executive Summary

The Aging, Disability & Veterans Services Division (ADVSD) Public Guardian and Conservator Program (PGC) supports older adults, people with disabilities, and Veterans under court authority. PGC protects and enhances the quality of life for mentally incapacitated and impoverished adults who are victims of abuse, neglect, and financial exploitation by improving their safety and well-being. PGC also diverts at-risk individuals to less restrictive and costly alternatives to publicly funded guardianship.

### Program Summary

**ISSUE:** Without the Public Guardian and Conservator Program making vital decisions under court authority, extremely vulnerable adults would experience continued victimization, frequent emergency department and hospital psychiatric admissions, homelessness, unnecessary protective services and law enforcement intervention, involuntary civil commitments, and increased risk of premature death. The demand for PGC services is increasing due to the aging population and the rising incidence of abuse and neglect among older adults and people with disabilities.

**PROGRAM GOAL:** The goal of PGC is to provide legal protection and access to services and benefits while promoting the health and welfare for those served by minimizing unnecessary emergency department or hospital visits and arranging for needed medical, mental health, and residential care. The PGC program is an essential part of the County's response system to reduce financial fraud, abuse, and neglect when legal authority is required. PGC supports the DCHS strategy to reduce abuse and neglect in order to improve independence, health, and safety.

**PROGRAM ACTIVITY:** Public guardians serve as the court-appointed representative for adults with mental incapability with an IQ below 70, severe and persistent mental illness, Alzheimer's, and other dementias or brain injury. PGC participants are also functionally incapacitated, requiring intensive supports and specialized housing arrangements to balance the need for protection with the right to autonomy. Person-centered care plans address immediate risks, ensure adequate care arrangements, and stabilize medical and psychiatric conditions by achieving personal goals through community engagement. Public guardians are available 24/7 to make medical, psychiatric, financial, and life decisions for participants. The average caseload is between 35-39 participants monthly, consistent with national standards. Public guardians also provide community consultation for individuals who may not meet the legal or program criteria for needing a guardian yet still need assistance to find less restrictive alternatives. They provide information and services and identify less restrictive alternatives to address problems. Program staff train community partners and work with Adult Protective Services, families, community partners, law enforcement, hospitals, multi-disciplinary teams, and the court to intervene early to resolve fraud, abuse, and neglect of vulnerable adults. PGC participates on multi-disciplinary teams and provides case consultation to identify alternatives to public guardianship.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# County residents with a Public Guardian/Conservator	183	185	183	185
Outcome	% of new high-risk PGC participants with a reduction in hospital/emergency department visits within a year <sup>1</sup>	100%	90%	100%	95%
Outcome	% of PGC participants with properly managed assets to ensure ongoing eligibility and fraud protection	100%	100%	100%	100%
Outcome	% of PGC contacts diverted to a less costly and less restrictive resource	35%	31%	30% <sup>2</sup>	30%

### Performance Measures Descriptions

<sup>1</sup>Because this measure requires a 12 month service window, data for individuals newly appointed with a Guardian during FY18 is not yet available. The figure reported for FY18 Actual represents all high-risk PGC participants with a petition date during FY17.

<sup>2</sup>Overall contacts to PGC had decreased which could be due to increased community education therefore diverting people before they contacted PGC.

## Legal / Contractual Obligation

The decision to provide PGC service is established and guided by ORS Ch. 125 and County Ordinance, Ch. 23.501. If the County chooses to reduce the service, it remains obligated to current participants that are open with the court, but can stop taking new participants if the Board of County Commissioners makes a finding that the service is no longer needed.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,271,978	\$0	\$1,341,573	\$0
Contractual Services	\$76,192	\$0	\$25,591	\$0
Materials & Supplies	\$33,236	\$0	\$32,847	\$0
Internal Services	\$260,442	\$0	\$242,730	\$0
<b>Total GF/non-GF</b>	<b>\$1,641,848</b>	<b>\$0</b>	<b>\$1,642,741</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,641,848</b>		<b>\$1,642,741</b>	
<b>Program FTE</b>	11.00	0.00	11.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 25026-19 ADVSD Public Guardian/Conservator

**Department:** County Human Services      **Program Contact:** Mark Sanford  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25026A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Aging, Disability & Veterans Services Division (ADVSD) Public Guardian and Conservator Program (PGC) supports older adults, people with disabilities, and Veterans under court authority. PGC proposes to provide one-time contingency funding to support providing guardianship monitoring and fiduciary education for court-appointed fiduciaries in Multnomah County during a six-month transition to sustainable funding.

**Program Summary**

**ISSUE:** PGC established a contract with a nonprofit organization in September 2014. The program developed and operated by the nonprofit is now well established in Multnomah County and expanding to other counties in Oregon. This program offer provides one-time-only funding in FY 2020.

**PROGRAM GOAL:** The goal is to provide fiduciary training for court-appointed fiduciaries and monitoring services for people under guardianship, conservatorship, and other types of surrogate decision-making authority. These community based services are a vital resource for the local circuit court and provide additional support to the PGC program as an essential part of the County's response system to reduce financial fraud, abuse, and neglect. PGC and this contracted program supports the DCHS strategy to reduce abuse and neglect in order to improve independence, health, and safety.

**PROGRAM ACTIVITY:** The nonprofit has developed an education and resource program for court-appointed fiduciaries (guardians, conservators, trustees, personal representatives) to protect individuals who are subject to protective proceedings. The Multnomah County Circuit Court, Probate Department now mandates completion of the education class for newly appointed fiduciaries. Participants are required to pay a fee for the class and fee waivers are available through a court approval process. Approximately 1,500 fiduciaries are completing the class annually in Multnomah County. Trained volunteers monitor and conduct visits with individuals under guardianship, offering support to fiduciaries and submitting reports to the court for further review as necessary. Monitors frequently provide resources to further assist all parties involved with the protected individual and court action resulting in restoration of rights has resulted in a number of cases upon further review by the court. The program has volunteers in five counties. 65% of all their monitoring visits occur in Multnomah County.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of monitoring visits in Multnomah County	86	150	125	150
Outcome	% of class participants reporting improved skills or knowledge	88%	88%	91%	95%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$25,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$25,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$25,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:



**Department:** County Human Services

**Program Contact:** Dana Lloyd

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Aging, Disability & Veterans Services Division (ADVSD) Administrative Services provides division-wide leadership, budget development, performance management, program evaluation, data analysis, HIPAA compliance, and workforce equity strategies to ensure fiscal responsibility, compliance, and participant-focused outcomes. Racial equity is a key focus throughout ADVSD.

### Program Summary

**ISSUE:** To support quality performance and positive outcomes for program participants, ADVSD has a strategic direction and infrastructure that guides quality improvement, accountability, and program performance.

**PROGRAM GOAL:** Administrative Services promotes efficient, effective use of resources by maximizing budget resources, utilizing customer feedback, supporting data-informed decisions, and deploying continuous quality improvement projects. Administrative Services oversees the development of the division-wide equity plan, supports DCHS goals of protecting program participants through HIPAA compliance, and participates with department performance management plans.

**PROGRAM ACTIVITY:** ADVSD is the Area Agency on Aging for the County and is responsible for developing and ensuring access for 220,000 older adults, people with disabilities, and Veterans to a comprehensive, coordinated service system. Administrative Services serves a workforce of 420 FTEs through organizational and management functions. The core activities include leadership, advocacy, budget development, budget monitoring, data analysis, reporting, performance management, customer satisfaction initiatives, and program evaluation. Administrative Services is also responsible for protecting vulnerable adults' privacy through HIPAA compliance involving training and communication to staff, managing an auditing process for compliance, and investigating and mitigating breaches. Partnerships in this division-wide unit include the County Privacy Oversight Committee, DCHS Equity in Action team, and DCHS Performance Management Council. Administrative Services, in collaboration with ADVSD Leadership, oversees the development and implementation of activities to diversify the workforce and advance workforce equity in recruitment, retention, support, promotion, and development. ADVSD has completed a racial equity assessment, identifying gaps that are contributing to systemic and institutional barriers for some employees and program participants. This will be the foundation for an equity action plan with priorities, outcome measures, and accountability timelines and reporting.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total # of ADVSD employees	464	450	465	465
Outcome	% of ADVSD employees of color	34.7%	31.2%	34.7%	35.0%
Outcome	% of ADVSD employees who completed required annual HIPAA training on time	97%	97%	100% <sup>1</sup>	95% <sup>2</sup>

### Performance Measures Descriptions

<sup>1</sup>Reflects training completion rate for all ADVSD staff. Data on timeliness not available; hope to incorporate this with Workday in FY19 Actual.

<sup>2</sup>Unknown with Workday rollout.

## Legal / Contractual Obligation

ADVSD is designated the Type B Transfer Area Agency on Aging (AAA) for Multnomah County through a contract with the Oregon Department of Human Services and as guided by ORS Ch 410, to provide mandatory functions for older adults and people with disabilities. These include provision of quality staffing, service planning, senior and disability advisory councils, and comprehensive and coordinated service delivery for older adults and people with disabilities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$161,393	\$991,427	\$185,632	\$1,051,894
Contractual Services	\$159,743	\$111,500	\$357,170	\$67,750
Materials & Supplies	\$24,033	\$192,840	\$24,261	\$188,429
Internal Services	\$21,413	\$271,660	\$26,105	\$289,066
<b>Total GF/non-GF</b>	<b>\$366,582</b>	<b>\$1,567,427</b>	<b>\$593,168</b>	<b>\$1,597,139</b>
<b>Program Total:</b>	<b>\$1,934,009</b>		<b>\$2,190,307</b>	
<b>Program FTE</b>	1.23	7.57	1.32	7.48

Program Revenues				
Intergovernmental	\$0	\$1,563,427	\$0	\$1,593,139
Other / Miscellaneous	\$0	\$2,000	\$0	\$2,000
Beginning Working Capital	\$0	\$2,000	\$0	\$2,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,567,427</b>	<b>\$0</b>	<b>\$1,597,139</b>

## Explanation of Revenues

\$1,593,139 - Title XIX  
 \$2,000 - Special Risk Fund  
 \$2,000 - Federal/State Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 25027-19 ADVSD Administration

**Department:** County Human Services      **Program Contact:** Brian Hughes  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25028B  
**Program Characteristics:**

### Executive Summary

The Multi-Disciplinary Team (MDT) provides vulnerable older adults, people with disabilities, and Veterans with complex health, mental health, and social needs with equitable access to quality services. The MDT provides complex case consultation and in-home mental health and nursing services to isolated individuals with the goal of improving safety and quality of life. This is a reduced program offer, impacting the level of mental health services, which occurred in the transfer of funds from the Health Department. Purchasing 25028B will bring it to the current service level.

### Program Summary

**ISSUE:** Older adults, people with disabilities, and Veterans may experience complex issues related to health, mental health, functional care, and social issues that impact their ability to live safely in the community. These individuals often interact with multiple social, health, and public safety systems in an uncoordinated manner.

**PROGRAM GOAL:** The Multi-Disciplinary Team Program's goal is to improve participant stability and ability to live in the community safely. The MDT supports Medicaid and District Senior Center case managers and Adult Protective Services (APS) specialists to encourage participation and remove barriers to mental health and medical services and ADVSD programs.

**PROGRAM ACTIVITY:** The Multi-Disciplinary Team Program serves older adults, people with disabilities, and Veterans who have complex medical, mental health, and psychosocial needs and who have barriers to receiving needed support and assistance. Case coordination occurs in five branch offices located throughout the County. Each Multi-Disciplinary Team consists of an APS clinical services specialist, a community health nurse, a contracted mental health specialist, and an APS human services investigator or case manager; other professionals are involved as needed. These teams provide consultation, in-home assessments, and direct interventions to improve participant safety and stabilize participants in their own homes. Case managers bring complex cases for consultation and in-home nursing services or mental health services depending on their needs. Multi-Disciplinary Team staff may provide short-term monitoring following the closure of an APS investigation for people with complex care plans. An FY 2016 program evaluation of the Multi-Disciplinary Team Program led to substantive program improvements including targeting participants who are most likely to benefit from Multi-Disciplinary Team services. The evaluation also led to changes in how program impact is measured for participants; changes are scheduled for 2019.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants served by Multi-Disciplinary Team (MDT)	455	500	452	450
Outcome	# of participants who were referred to nursing clinical supports and/or mental health services through MDT <sup>1</sup>	68%	65%	66%	70%
Output	# of MDT participants who receive mental health services <sup>2</sup>	120	N/A	120	95 <sup>3</sup>
Outcome	% of MDT participants who registered an improvement after MDT intervention at close of case	63%	65%	62%	65%

### Performance Measures Descriptions

<sup>1</sup>Reworded measure. Last year reported the number of participants as an output. This year's PO has % of participants as an outcome. Data was FY18 Actual=308; FY19 Purchased=325; FY19 Estimate=300.

<sup>2</sup>New measure.

<sup>3</sup>When the program funds for MDT mental health services was transferred from the Health Department to ADVSD, the total program amount was reduced by 20%. See 25028B for the restoration of these mental health services.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$320,832	\$282,360	\$354,786	\$306,414
Contractual Services	\$321,606	\$11,653	\$307,431	\$160,687
Materials & Supplies	\$8,122	\$4,823	\$5,102	\$6,047
Internal Services	\$45,316	\$79,765	\$43,505	\$82,493
<b>Total GF/non-GF</b>	<b>\$695,876</b>	<b>\$378,601</b>	<b>\$710,824</b>	<b>\$555,641</b>
<b>Program Total:</b>	<b>\$1,074,477</b>		<b>\$1,266,465</b>	
<b>Program FTE</b>	2.45	2.20	2.45	2.20

Program Revenues				
Intergovernmental	\$0	\$378,601	\$0	\$555,641
<b>Total Revenue</b>	<b>\$0</b>	<b>\$378,601</b>	<b>\$0</b>	<b>\$555,641</b>

Explanation of Revenues

\$394,954 - Title XIX  
 \$160,687 - ADVSD Older/Disabled Mental Health

Significant Program Changes

Last Year this program was: FY 2019: 25028-19 ADVSD Multi-Disciplinary Team

Prior to FY 2020, the Health Department via MHASD funded the contracted Mental Health Specialists that serve on the ADVSD Multi-Disciplinary Teams. Funding consists of CGF (County General Fund) and State Mental Health funds. Starting in FY 2020 the Health Department will transfer the CGF (\$137,601) and State Mental Health funds to the Department of County Human Services via an interdepartmental agreement. This transfer will result in a decrease in overall funding for contract services; see scaled offer 25028B for restoration of these funds.

**Department:** County Human Services      **Program Contact:** Brian Hughes  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25028A  
**Program Characteristics:**

**Executive Summary**

The Multi-Disciplinary Team (MDT) provides vulnerable older adults, people with disabilities, and Veterans with complex health, mental health, and social needs with equitable access to quality services. The MDT provides complex case consultation and in-home mental health and nursing services to isolated individuals. This is a scaled program offer, addressing reductions in mental health services that occurred in the transfer from the Health Department. This purchase will retain services at the current level.

**Program Summary**

**ISSUE:** Older adults, people with disabilities, and Veterans may experience complex issues related to health, mental health, functional care, and social issues that impact their ability to live safely in the community. These individuals often interact with multiple social, health, and public safety systems in an uncoordinated manner.

**PROGRAM GOAL:** The Multi-Disciplinary Team Program's goal is to improve participant stability and ability to live in the community safely. The MDT supports Medicaid and District Senior Center case managers and Adult Protective Services (APS) specialists to encourage participation and remove barriers to mental health and medical services and ADVSD programs. The mental health services help stabilize or improve participants. The goal of this program offer is to maintain the existing service level for individuals referred through the Multi-Disciplinary Team process.

**PROGRAM ACTIVITY:** The Multi-Disciplinary Team Program serves older adults, people with disabilities, and Veterans who have complex medical, mental health, and psychosocial needs and who have barriers to receiving needed support and assistance. A key component of the MDT program is the mental health direct services. In 2014, a Portland State University study describes an overall lack of access to needed mental health services for older adults and people with disabilities. Through MDT referrals, a mental health specialist provides in-home screening, assessment and counseling to participants. A reduction of services would mean that isolated, and often homebound older adults would lack critical connection to their needed services. Such a reduction would also limit the ability to involve a mental health specialist during consultation and coordination of services for these same adults.

This program offer retains services at the current level, addressing reductions in mental health services that occurred in the transfer from the Health Department. If not funded, the program would reduce the level of available mental health services by at least 20%. The funding reduction would mean 25 or more people will not get MDT mental health services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of MDT participants who receive mental health services	N/A	N/A	N/A	25
Outcome	% of mental health service referrals that resulted in service	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$83,440	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$83,440</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$83,440</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services      **Program Contact:** Irma Jimenez  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) provides older adults, people with disabilities, and Veterans with equitable and efficient access to quality Medicaid long-term services and supports. Transition and Diversion services and programs promote home and community living for individuals, who would otherwise reside in a nursing facility. People living in the setting of their choice with person-centered planning that addresses their specific needs and preferences improves their quality of life.

**Program Summary**

**ISSUE:** Multnomah County and the State of Oregon are national leaders in supporting older adults, people with disabilities, and Veterans to live in community settings which are less costly and less restrictive than nursing facilities. The Centers for Medicare and Medicaid Services recognizes this goal as a best practice for controlling health care costs and ensuring a better experience for individuals needing Medicaid long-term services and supports.

**PROGRAM GOAL:** The Transition and Diversion Program goal is to help older adults, people with disabilities, and Veterans live in the community and setting of their choice rather than in institutional settings. The results from the Transition and Diversion Program include minimizing the use of more costly nursing facility care and reducing unnecessary hospitalizations and readmissions. The costs that are saved by serving people in the community are reinvested in the programs, allowing more people to be served in the setting of their choice.

**PROGRAM ACTIVITY:** The Transition and Diversion Program serves all nursing facility eligible individuals in Multnomah County. Transition and Diversion staff assess and assist individuals who live in nursing facilities to relocate to community settings if they desire to leave the nursing facility. This is done by connecting them with services and assistance to help them live safely in the community. Transition and Diversion staff work with individuals discharging from the hospital, who do not want to live permanently in a nursing facility, to return home or find a community living option such as an adult care home, assisted living facility, or residential living facility. They arrange for supports to ensure the safety of the individual returning to community living. The Transition and Diversion Program supports independent living and DCHS priority to reduce housing insecurity.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Annual # of transitions from a nursing facility	498	480	490	490
Outcome	% of transitions where participants returned home	51%	50%	50%	50%
Outcome	% of transitions where participants returned to a community-based facility	43%	45%	45%	45%
Outcome	% of all nursing facility residents transitioned on a monthly basis through Transition & Diversion	3.3%	3.5%	3.5%	3.5%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

ADVSD has a contract with the Oregon Department of Human Services to administer the Medicaid and Supplemental Nutrition Assistance Program (SNAP) programs in Multnomah County. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities. The programs are guided by Federal regulations or rules including those in the Social Security Act, Medicaid Administration, and SNAP.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$3,082,261	\$0	\$3,254,378
Contractual Services	\$362,048	\$55,000	\$388,680	\$55,000
Materials & Supplies	\$0	\$67,247	\$0	\$63,022
Internal Services	\$0	\$972,011	\$0	\$1,091,732
<b>Total GF/non-GF</b>	<b>\$362,048</b>	<b>\$4,176,519</b>	<b>\$388,680</b>	<b>\$4,464,132</b>
<b>Program Total:</b>	<b>\$4,538,567</b>		<b>\$4,852,812</b>	
<b>Program FTE</b>	0.00	29.00	0.00	29.00

Program Revenues				
Intergovernmental	\$0	\$4,057,249	\$0	\$4,337,466
Other / Miscellaneous	\$0	\$119,270	\$0	\$126,666
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,176,519</b>	<b>\$0</b>	<b>\$4,464,132</b>

## Explanation of Revenues

\$4,337,466 - Title XIX

\$126,666 - Long Term Care Case Management Assessment Medicaid 18+

## Significant Program Changes

Last Year this program was: FY 2019: 25029-19 ADVSD Transition & Diversion (Medicaid)



**Department:** County Human Services      **Program Contact:** Erin Grahek  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Aging, Disability & Veterans Services Division (ADVSD) Outreach and Information services are the entry point for helping people maintain their independence and contributes to quality of life through service access. The Aging and Disability Resource Connection Helpline (ADRC) is a contact center that provides people with access to information, assistance, and resources specific to their needs.

**Program Summary**

**ISSUE:** The network of public and private sector services and resources is complex and can be difficult to navigate and access. Multnomah County’s Aging and Disability Resource Connection Helpline (ADRC) assists older adults, people with disabilities, Veterans, and their family members to navigate this complex system by providing appropriate information, referral, assistance, and connection to community programs and benefits through their first contact with a trained specialist.

**PROGRAM GOAL:** The goal of the ADRC is to increase awareness of and access to services. The core service of the ADRC is Information, Referral and Assistance (I&R/A) which is governed by national standards through the Association of Information & Referral Services. Aging, Disability & Veterans Services Division’s outreach and information services help meet a department-wide goal to increase ease of resource navigation and equity in access for our community.

**PROGRAM ACTIVITY:** As the federally designated Area Agency on Aging, ADVSD is required to conduct outreach and provide specialized information and assistance to the most vulnerable older adults, people with disabilities, and Veterans. ADVSD and contracted partners have certified I&R/A specialists who provide comprehensive service delivery through information and assistance, follow-up, and crisis intervention. Specialists ensure vulnerable individuals in difficult circumstances get the help they need to ensure the safety of the participant or others. I&R/A specialists screen and refer individuals for Medicare and long-term care options counseling, public benefits such as Medicaid and the Supplemental Nutrition Assistance Program (SNAP), and more intensive services such as Oregon Project Independence, Medicaid in-home services, Adult Protective Services, Intellectual & Developmental Disabilities, and the Mental Health Crisis Line. The ADRC partners with 211info to create a cohesive information and assistance network. The top referrals from the ADRC include Medicare, housing assistance, energy assistance, and District Senior Centers. Community partnerships are central to the work as contracted District Senior Centers and Enhancing Equity partners provide 35% of all I&R/A client contacts. Community partners serve as a culturally responsive and culturally specific entry point for the community by providing outreach, education, recreation opportunities, and person-centered intergenerational services, and leveraging resources including volunteer hours and in-kind and cash donations.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of contacts to Aging and Disability Resource Connection Helpline <sup>1</sup>	27,507	N/A	28,500	28,500
Outcome	% of participants who would recommend ADRC	98%	92%	98%	97%
Output	# of referrals to County and community partner agencies from ADRC	41,802	64,800	41,802	42,000
Outcome	% of participants with a new ADVSD service after an ADVSD referral from ADRC <sup>2</sup>	25%	N/A	30%	30%

**Performance Measures Descriptions**

<sup>1</sup>New measure: includes all calls, emails, and in-person inquiries made to the ADRC Helpline through Multnomah County and contracted partners. <sup>2</sup>New measure.  
 Previous measure: “# of ADRC calls.” Available data is incomplete and unreportable for this measure.  
 Previous measure: “% of participants with increased ADVSD service utilization after contact with the ADRC” FY18 Actual=73%. FY19 Purchased=65%. FY19 Estimate=73%

## Legal / Contractual Obligation

In Multnomah County, ADVSD has a contract with the Oregon Department of Human Services to administer programs under the Federal Older Americans Act. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$283,127	\$860,979	\$260,815	\$890,704
Contractual Services	\$998,234	\$250,644	\$861,927	\$217,772
Materials & Supplies	\$8,362	\$41,817	\$4,549	\$54,221
Internal Services	\$58,873	\$213,048	\$48,346	\$215,101
<b>Total GF/non-GF</b>	<b>\$1,348,596</b>	<b>\$1,366,488</b>	<b>\$1,175,637</b>	<b>\$1,377,798</b>
<b>Program Total:</b>	<b>\$2,715,084</b>		<b>\$2,553,435</b>	
<b>Program FTE</b>	2.61	8.59	2.33	8.37

Program Revenues				
Intergovernmental	\$0	\$1,354,488	\$0	\$1,365,798
Beginning Working Capital	\$0	\$12,000	\$0	\$12,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,366,488</b>	<b>\$0</b>	<b>\$1,377,798</b>

## Explanation of Revenues

\$878,063 - Title XIX  
 \$260,855 - Outreach & Enrollment Assistance - MIPPA  
 \$161,201 - ADRC Technical Assistance  
 \$20,000 - Senior Health Insurance Benefits Assistance (SHIBA)  
 \$19,644 - Title IIIB  
 \$12,000 - Fed/State Beginning Working Capital  
 \$10,000 - Senior Medicaid Patrol Grant  
 \$9,585 - Title VIIB  
 \$3,000 - City of Troutdale  
 \$1,600 - Title IIIE

## Significant Program Changes

**Last Year this program was:** FY 2019: 25032-19 ADVSD Outreach, Information & Referral

**Department:** County Human Services

**Program Contact:** Erin Grahek

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Aging, Disability & Veterans Services Division (ADVSD) provides equitable and efficient access to quality nutrition services that meet diverse needs and expectations. Nutrition services increase health and reduce social isolation through culturally responsive and culturally specific services to maintain participants' independence and improve quality of life. Through Federal, State and County funding, a network of community partners provides nutrition education and nutritious congregate and home-delivered meals.

### Program Summary

**ISSUE:** As the federally designated Area Agency on Aging, ADVSD conducted listening sessions in 2016 with participants from diverse communities who identified that barriers to nutrition include a lack of both affordable food and access to culturally-specific meals.

**PROGRAM GOAL:** The Nutrition Program provides meals to older adults, people with disabilities, and Veterans who may be at nutritional risk, which is measured through a validated nutrition risk assessment. This program provides access to healthy meals; promotes health and prevents disease; reduces malnutrition risk and improves nutritional status; reduces social isolation; and links people to community-based services. Adequate nutrition, on a daily basis, is the key to a person maintaining adequate health necessary to live at home according to the U.S. Administration on Community Living.

**PROGRAM ACTIVITY:** The Nutrition Program is part of the access and early intervention continuum of care designed to support independent living. ADVSD funds organizations who provide congregate and home-delivered meals throughout Multnomah County that meet the tastes and preferences of diverse participants. Contracted providers serve those who have the greatest social and economic need with special attention to individuals who are isolated, low-income, minority, and have limited English proficiency. In FY 2018, 31.7% of program participants said they were an ethnic or racial minority. All nutrition providers are required to be culturally responsive to the priorities and challenges facing diverse communities. Providers delivering culturally specific services improve outcomes and meet preferences of a particular culture or group of cultures. In order to provide more culturally specific services, ADVSD shifted the nutrition budget for culturally specific services from 20% to 38% in FY 2018. Congregate meals are provided at nutrition sites, District Senior Centers, or other group settings. Home-delivered meals are delivered to homebound participants; frozen meals may be provided to cover weekends, holidays, and severe weather events. Meal contractors also provide nutrition education to promote better health by providing accurate nutrition and health information or instruction. ADVSD has contracted with an on-call dietitian to provide the required review of planned menus and ensure compliance with Federal and State nutrition guidelines.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of meals served	537,379	600,000	537,379 <sup>1</sup>	545,000
Outcome	% of high nutritional risk participants who experienced an improvement in their annual risk score	35%	25%	35%	35%
Output	% of meals through culturally specific services	6.4%	12.0%	7.0% <sup>1</sup>	8.0%
Output	% of home-delivered meal participants satisfied or very satisfied with nutritional services	87%	95%	92%	92%

### Performance Measures Descriptions

<sup>1</sup>After reallocating funds to culturally specific providers in FY18, the overall number of meals and percentage of meals served decreased because meal costs are higher for these providers.

## Legal / Contractual Obligation

In Multnomah County, ADVSD has a contract with the Oregon Department of Human Services to administer programs under the Federal Older Americans Act. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$59,175	\$0	\$80,998
Contractual Services	\$489,109	\$1,547,552	\$494,457	\$1,614,194
Materials & Supplies	\$0	\$1,743	\$0	\$1,742
Internal Services	\$0	\$6,945	\$0	\$6,354
<b>Total GF/non-GF</b>	<b>\$489,109</b>	<b>\$1,615,415</b>	<b>\$494,457</b>	<b>\$1,703,288</b>
<b>Program Total:</b>	<b>\$2,104,524</b>		<b>\$2,197,745</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$1,615,415	\$0	\$1,703,288
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,615,415</b>	<b>\$0</b>	<b>\$1,703,288</b>

## Explanation of Revenues

\$627,142 - Title IIIC-2  
 \$489,034 - Title IIIC-1  
 \$438,532 - U.S. Department of Agriculture  
 \$78,000 - OPI PWD Pilot Project  
 \$70,580 - Title IIIB

## Significant Program Changes

Last Year this program was: FY 2019: 25033-19 ADVSD Nutrition Program

**Department:** County Human Services  
**Program Offer Type:** Existing Operating Program

**Program Contact:** Erin Grahek  
**Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging, Disability & Veterans Services Division (ADVSD) provides health promotion activities and interventions that support healthy, active living, and chronic disease self-management that contribute towards quality of life. With community organizations providing culturally specific and culturally responsive services, ADVSD employs proven practices to improve health through exercise, disease self-management, healthy eating, and other activities. These services are part of the ADVSD access and early intervention continuum.

### Program Summary

**ISSUE:** Older adults are at risk of developing chronic health conditions and have risk factors for falling, precipitating further health decline and potential hospitalization.

**PROGRAM GOAL:** As a federally designated Area Agency on Aging, ADVSD is required by the U.S. Administration for Community Living to provide Evidence-Based Health Promotion and Disease Prevention (EBHP) programs that support older adults, people with disabilities, Veterans, and caregivers to adopt healthy behaviors, improve health status, better manage chronic conditions, reduce hospitalizations, and reduce risk of falling. Evidence-based programs have been proven to improve health outcomes and reduce healthcare costs.

**PROGRAM ACTIVITY:** Evidence-based health promotion activities include physical activity and exercise, healthy eating, chronic disease self-management, falls prevention, medication management, anxiety and depression management, and Alzheimer's disease and dementia support. Evidence-based health promotion also includes Care Transitions, a program which provides transition support from hospital to home. This program offer provides health promotion programs and outreach to minority and at-risk populations. With numerous community partnerships hosting preventative activities, ADVSD coordinates to streamline access to services and support healthy aging. Community agencies provide evidence-based programs including Tai Chi Moving for Better Balance; Living Well with Chronic Conditions; PEARLS – treatment program for depression; Diabetes Prevention Program; and Powerful Tools for Caregivers. Each program has required elements that are conducted with fidelity to the curriculum proven in clinical trials.

ADVSD uses a calendar of activities on the County website and a statewide database to manage registration and data collection. ADVSD contracts with agencies for both culturally responsive and culturally specific services in order to increase meaningful access. EBHP programs serve a wider department goal of preventing health decline and supporting the ability for individuals to age in place while providing proven healthcare cost savings.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of people enrolled in evidence-based health promotion (EBHP) activities	502 <sup>1</sup>	725	502	515
Outcome	% of EBHP fall prevention participants who had a reduction in fall risk compared to non-participants <sup>2</sup>	55%	55%	55%	55%
Outcome	% of EBHP Care Transition participants with a reduction in hospitalizations compared to non-participants <sup>2</sup>	36%	36%	36%	36%

### Performance Measures Descriptions

<sup>1</sup>Participation numbers have decreased due to fewer evidenced-based classes being offered and change in providers mid-year. <sup>2</sup>Outcomes are from national EBHP clinical trials and are not data from County participants; however, ADVSD undertakes fidelity monitoring to ensure similar outcomes. Falls prevention information taken from clinical trials from the Tai Chi: Moving for Better Balance Program. Hospitalization reduction is taken from clinical trials for Stanford's Chronic Disease Self-Management.

## Legal / Contractual Obligation

The Federal Older Americans Act requires funding be used for evidence-based activities that meet their standards for effectiveness as tested through clinical trials.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$829,544	\$0	\$819,592
Contractual Services	\$16,190	\$395,406	\$8,544	\$674,433
Materials & Supplies	\$8,927	\$11,266	\$8,962	\$41,832
Internal Services	\$60,179	\$105,950	\$72,163	\$78,580
<b>Total GF/non-GF</b>	<b>\$85,296</b>	<b>\$1,342,166</b>	<b>\$89,669</b>	<b>\$1,614,437</b>
<b>Program Total:</b>	<b>\$1,427,462</b>		<b>\$1,704,106</b>	
<b>Program FTE</b>	0.00	7.50	0.00	6.90

Program Revenues				
Intergovernmental	\$0	\$882,966	\$0	\$1,053,138
Other / Miscellaneous	\$2,063	\$235,565	\$0	\$561,299
<b>Total Revenue</b>	<b>\$2,063</b>	<b>\$1,118,531</b>	<b>\$0</b>	<b>\$1,614,437</b>

## Explanation of Revenues

\$292,681 - Older & Disabled Mental Health Services  
\$290,630 - ADRC Mental Health Grant  
\$258,970 - ADRC Person Centered Option Counseling  
\$243,299 - Providence Health Services - Metro Care Transitions  
\$104,149 - Evidence Based Health Promotion  
\$62,484 - Title IIIB  
\$44,224 - Title IIID  
\$318,000 - Legacy Metro Care Transitions

## Significant Program Changes

Last Year this program was: FY 2019: 25034-19 ADVSD Health Promotion

**Department:** County Human Services      **Program Contact:** Erin Grahek  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) provides supports through a continuum of access and early intervention programs, to have equitable and efficient access to quality services and programs. For individuals living at home, at risk for nursing facility placement, and not receiving Medicaid, case management, caregiver support, and in-home services provide critical supports that allow people to remain in their homes.

**Program Summary**

**ISSUE:** Older adults, people with disabilities, and Veterans may experience complex or multiple problems that interfere with their ability to remain in their homes. As the federally designated Area Agency on Aging, ADVSD creates a four-year strategic plan for service delivery based on extensive listening sessions. As a result of this feedback and Census data, ADVSD changed its funding allocation model to fund more culturally specific services with a focus on trauma informed case management and in-home supports. ADVSD supports family caregivers who experience emotional, financial, and health burdens as a result of their unpaid caretaking responsibilities.

**PROGRAM GOAL:** The goal of case management and in-home services is to engage participants in a person-centered, comprehensive approach to support their ability to remain at home, maintain independence, support their family caregivers and delay an individual's need for more costly Medicaid services and nursing facility care. Research conducted by Boston University showed that case management can improve housing stability and prevent isolation through services such as housekeeping or grocery shopping.

**PROGRAM ACTIVITY:** The Case Management and In-Home Services Program is part of the access and early intervention continuum, separate from Medicaid services, conducted through partnerships with culturally responsive and culturally specific community organizations. These services are funded through a variety of sources including County General Funds, Federal Older Americans Act, Oregon Project Independence, and U.S. Veterans Administration. Case managers work with individuals and their families to assess need for services; determine eligibility; authorize and coordinate services; and develop, implement, monitor, and evaluate the person-centered care plan. In-home services include housekeeping, personal care, grocery shopping, and adult day respite services. Case managers reassess participant needs, advocate on their behalf, and provide follow-up. Participants may also receive counseling on community and long-term services and support options. Options Counseling helps participants build a person-centered care plan to determine their best resources options.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of people receiving case management and/or in-home services	2,621	3,000	2,540	2,650
Outcome	% of Options Counseling clients with goals met and/or improved service enrollment	65%	75%	70%	70%
Output	# of family caregivers served <sup>1</sup>	355	N/A	355	355
Outcome	% of family caregivers who report services received were excellent or good	89%	90%	89%	90%

**Performance Measures Descriptions**

<sup>1</sup>New Measure



## Legal / Contractual Obligation

In Multnomah County, ADVSD has a contract with the Oregon Department of Human Services to administer programs under the Federal Older Americans Act. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$145,067	\$574,585	\$136,863	\$624,186
Contractual Services	\$990,602	\$3,502,003	\$1,041,855	\$3,646,987
Materials & Supplies	\$10,480	\$0	\$8,496	\$0
Internal Services	\$88,900	\$7,851	\$76,681	\$11,961
<b>Total GF/non-GF</b>	<b>\$1,235,049</b>	<b>\$4,084,439</b>	<b>\$1,263,895</b>	<b>\$4,283,134</b>
<b>Program Total:</b>	<b>\$5,319,488</b>		<b>\$5,547,029</b>	
<b>Program FTE</b>	1.13	5.27	0.97	5.23

Program Revenues				
Intergovernmental	\$0	\$4,031,969	\$0	\$4,243,899
Beginning Working Capital	\$0	\$12,000	\$0	\$12,000
Service Charges	\$0	\$40,470	\$0	\$27,235
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,084,439</b>	<b>\$0</b>	<b>\$4,283,134</b>

## Explanation of Revenues

\$2,594,023 - Veteran's Self Directed Home & Community  
 \$488,052 - Oregon Project Independence  
 \$340,714 - OPI PWD Pilot Project  
 \$323,650 - Title III E  
 \$245,404 - Title III B  
 \$150,672 - State General Fund – Sequestration Assistance  
 \$93,885 - Oregon Money Management Program  
 \$27,235 - Client Employer Provider Fees  
 \$12,000 - Federal/State Beginning Working Capital  
 \$7,499 - Title III D

## Significant Program Changes

**Last Year this program was:** FY 2019: 25035-19 ADVSD Case Management & In-Home Services (non-Medicaid)



**Department:** County Human Services

**Program Contact:** Erin Grahek

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

The Safety Net Program provides eviction prevention assistance and housing stabilization services to ensure clean and safe housing. The program provides funds for bed bug mitigation, medical equipment, dental services, and prescriptions to those with no other financial options to prevent health decline, increase independence, and improve quality of life.

### Program Summary

**ISSUE:** Older adults, people with disabilities, and Veterans may be unable to attain or retain housing, medical equipment, dentures, and prescription medication due to limited financial resources, lack of insurance coverage, limited mobility, and other health and public health factors.

**PROGRAM GOAL:** The first goal of the Safety Net Program is to support and maintain safe and stable housing for older adults, people with disabilities, and Veterans who are experiencing homelessness, or are at risk of losing their housing, through emergency housing assistance and services. The second goal is to increase independence and prevent health decline by ensuring individuals get their prescribed treatments through emergency medical and prescription assistance. The third goal is to reduce nutrition barriers, by providing denture assistance. Collectively, these three goals provide services and supports to address significant gaps.

**PROGRAM ACTIVITY:** The Safety Net Program is part of the access and early intervention continuum of ADVSD services and receives requests from numerous sources within Multnomah County and from community partners. The Aging & Disability Resource Connection Helpline is the primary access point for these services. Specific to the goal of providing or maintaining safe, stable housing, the Safety Net Program provides direct housing assistance by facilitating housing support services such as extreme cleaning and bed bug mitigation. To ensure individuals are able to get their prescribed treatments and prevent health decline, the Safety Net Program provides financial assistance for special medical needs, such as dentures, eyeglasses, and other durable medical equipment not covered by Medicaid, Medicare, or other programs. Short-term emergency prescription assistance is provided to cover the cost of medications and help develop a long-term prescription coverage plan.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of people who received Safety Net services	631	575	631	600
Outcome	% of participants in stable housing six months after receiving services	94%	95%	94%	95%
Outcome	% of fulfilled requests for medical needs assistance	81%	82%	81%	82%
Outcome	% of requests for Safety Net services fulfilled to avert eviction	77%	85%	77%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$154,028	\$0	\$171,798	\$0
Contractual Services	\$566,106	\$0	\$550,387	\$0
Materials & Supplies	\$1,789	\$0	\$1,790	\$0
Internal Services	\$20,836	\$0	\$20,844	\$0
<b>Total GF/non-GF</b>	<b>\$742,759</b>	<b>\$0</b>	<b>\$744,819</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$742,759</b>		<b>\$744,819</b>	
<b>Program FTE</b>	1.50	0.00	1.50	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25036-19 ADVSD Safety Net Services

**Department:** County Human Services

**Program Contact:** Erin Grahek

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) Transportation services helps individuals with transportation and mobility barriers to maintain their independence and quality of life. Transportation services provide participants with transportation coordination, bus passes and tickets, and emergency rides for increased mobility and access to health and social services.

**Program Summary**

**ISSUE:** As the federally designated Area Agency on Aging, ADVSD held community listening sessions in 2016 with participants from diverse communities who identified transportation coordination and services as a top priority. People with limited English proficiency were nearly twice as likely to indicate transportation was an important unmet need when compared to people fluent in English. Listening session participants specifically said lack of transportation hindered their ability to go to District Senior Centers and culturally specific organizations. According to AARP, more than 20% of Americans 65 and older do not drive and require mobility assistance.

**PROGRAM GOAL:** The goal of transportation services is to support older adults, people with disabilities, and Veterans to access social services, medical care, and community activities. Availability of transportation aligns with DCHS goals to improve equitable access to services and the health of participants.

**PROGRAM ACTIVITY:** Transportation services help address the persistent need of older adults, people with disabilities, and Veterans to access affordable transportation services for a variety of social services, attend medical appointments, and participate in community activities that reduce social isolation. Transportation services are funded through Medicaid and County Funds. Medicaid service case managers and contracted community partners, including District Senior Centers, assist participants with transportation scheduling and coordination. Transportation services include screening for eligibility, assessing needs, assisting in applications, authorizing and coordinating rides, and distributing bus passes and tickets purchased through contracts with local transportation providers. Other services include scheduled guaranteed rides (Premium Rides) from our partner, Ride Connection, and cab rides for urgent transportation needs that cannot be met by TriMet or Ride Connection. An additional component is conducting advocacy on behalf of older adults, people with disabilities, and Veterans requesting transportation services and bringing attention to the service network when demand exceeds transportation assistance supply.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants who received bus passes, tickets and/or other rides	908	1,000	908	1,000
Outcome	% of participants with improved utilization of ADVSD services after receiving transportation services	50%	40%	50%	50%
Outcome	% of participants who report increased mobility because of transportation services	89%	89%	89%	89%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

In Multnomah County, ADVSD has a contract with the Oregon Department of Human Services to administer programs under the Federal Older Americans Act. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$52,586	\$0	\$60,227
Contractual Services	\$168,542	\$2,045,425	\$168,542	\$1,913,455
Internal Services	\$0	\$14,464	\$0	\$8,793
<b>Total GF/non-GF</b>	<b>\$168,542</b>	<b>\$2,112,475</b>	<b>\$168,542</b>	<b>\$1,982,475</b>
<b>Program Total:</b>	<b>\$2,281,017</b>		<b>\$2,151,017</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$2,052,475	\$0	\$1,982,475
Beginning Working Capital	\$0	\$60,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,112,475</b>	<b>\$0</b>	<b>\$1,982,475</b>

## Explanation of Revenues

\$1,424,813 - Medicaid Community Transportation  
 \$500,062 - TriMet Community Transportation Local Match  
 \$52,000 - OPI PWD Pilot Project  
 \$5,600 - Title IIIB

## Significant Program Changes

Last Year this program was: FY 2019: 25037-19 ADVSD Transportation Services

**Department:** County Human Services      **Program Contact:** Erin Grahek  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25038B  
**Program Characteristics:**

**Executive Summary**

Aging, Disability & Veterans Services Division (ADVSD) Advocacy & Community Program Operations support a participant-directed service system through ADVSD advisory councils management, Area Plan development and management, contract administration, network advocacy, and program support.

**Program Summary**

**ISSUE:** As the federally designated Area Agency on Aging, ADVSD engages older adults, people with disabilities, and Veterans in a variety of ways to advise ADVSD on the needs of the community and assist in planning and development of services. To do this effectively, ADVSD must engage diverse communities who can share the needs and issues that they and their community face. ADVSD must also ensure that publicly funded programs are operated effectively to meet the needs of diverse communities.

**PROGRAM GOAL:** ADVSD Advocacy efforts ensure diverse feedback and enhance equity for volunteers, staff, and participants. Program Operations provide administrative support to community-based contracted organizations. The intent of this support is to ensure consistent, equitable, and quality-focused services to participants.

**PROGRAM ACTIVITY:** The Advocacy program includes contract monitoring, Area Plan development, participant advocacy, and management of three advisory councils (Multicultural Action Committee, Disability Services Advisory Council, and Aging Services Advisory Council). ADVSD develops and monitors contracts for social services and nutrition programs. The Area Plan, a requirement of the Older Americans Act, describes the scope of diverse needs in the service area and outlines the goals, objectives, and key tasks to be undertaken and is reported upon annually to the Federal Administration of Community Living. The councils advise ADVSD on the development and implementation of the Area Plan, ensure policies and activities meet the needs of those served and advocate by commenting on community policies, programs, and actions. Management of the advisory councils includes recruiting and retaining racially, ethnically, culturally, and regionally diverse membership, supporting regular meetings, and coordinating opportunities for member engagement and advocacy.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of volunteer hours donated to ADVSD	39,622	50,000	46,100	46,100
Outcome	# of opportunities for participant and community members to give feedback to ADVSD	31	50	41	36
Outcome	% of minority representation on ADVSD Advisory Councils	38%	40%	38%	38%
Outcome	% of ADVSD contract funds dedicated to culturally specific providers <sup>1</sup>	23%	38%	38%	38%

**Performance Measures Descriptions**

<sup>1</sup>Contracts are specific to Older Americans Act and Oregon Project Independence and exclude Adult Care Home Program, Adult Protective Services, Public Guardian/Conservator, and Long Term Services & Supports.

## Legal / Contractual Obligation

ADVSD is designated the Type B Transfer Area Agency on Aging for Multnomah County through a contract with the Oregon Department of Human Services and as guided by ORS Ch 410, to provide mandatory functions for older adults and people with disabilities. These include provision of quality staffing, service planning, senior and disability advisory councils, and comprehensive and coordinated service delivery for older adults and people with disabilities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$291,012	\$830,714	\$305,640	\$903,334
Contractual Services	\$200,650	\$315,934	\$130,364	\$370,813
Materials & Supplies	\$21,957	\$62,864	\$10,213	\$75,662
Internal Services	\$588,092	\$680,705	\$579,784	\$692,790
<b>Total GF/non-GF</b>	<b>\$1,101,711</b>	<b>\$1,890,217</b>	<b>\$1,026,001</b>	<b>\$2,042,599</b>
<b>Program Total:</b>	<b>\$2,991,928</b>		<b>\$3,068,600</b>	
<b>Program FTE</b>	2.73	7.87	2.79	8.01

Program Revenues				
Intergovernmental	\$0	\$1,682,165	\$0	\$1,815,609
Other / Miscellaneous	\$0	\$4,500	\$0	\$4,000
Beginning Working Capital	\$0	\$0	\$0	\$15,000
Service Charges	\$0	\$203,552	\$0	\$207,990
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,890,217</b>	<b>\$0</b>	<b>\$2,042,599</b>

## Explanation of Revenues

\$643,410 - Title IIIB, \$480,589 - Title XIX, \$244,550 - Foster Grandparent Program, \$207,990 - Contractor Rentals, \$165,715 - Medicaid Community Transportation, \$122,316 - Oregon Project Independence, \$66,971 - Veteran's Self Directed Home & Community, \$50,115 - Oregon Money Management Program, \$41,943 - OPI PWD Pilot Project, \$15,000 - Fed/State Fund - BWC, \$12,500 - Title IIIC-1, \$4,000 - Volunteer Foster Grandparent Program

## Significant Program Changes

Last Year this program was: FY 2019: 25038-19 ADVSD Advocacy & Community Program Operations

**Department:** County Human Services      **Program Contact:** Erin Grahek  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25038A  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Aging, Disability & Veterans Services Division (ADVSD) supports a participant-directed service system through advisory council management, strategic plan development and management, and network advocacy. This program offer is to expand our required needs assessment that guides the next Older Adult Area Plan with an in-depth focus on racial justice and equity. This offer would fund culturally-specific organizations to conduct outreach and engagement in their communities to bring diverse perspectives to the County's planning process.

### Program Summary

**ISSUE:** As the federally designated Area Agency on Aging, ADVSD is charged by the Older Americans Act and the State of Oregon to conduct a community needs assessment every four years. When examining the general older adult population, community need remains relatively static, so a more targeted approach is necessary to understand the needs of racially, ethnically and culturally diverse communities. Understanding regional population changes and migration effects of gentrification on program need and utilization will help planning efforts.

**PROGRAM GOAL:** The Older Adult Area Plan development is a key activity of the division. In order to develop the most informed plan, deep community engagement is essential. The last Area Plan was developed through a broad outreach effort, including 18 community listening sessions and 474 unique participants. These groups were facilitated by ADVSD staff. For the new plan the goal is to contract with culturally specific organizations to lead the community engagement activities, gaining an even deeper level of feedback from culturally specific communities and help analyze in a culturally specific way.

**PROGRAM ACTIVITY:** ADVSD will contract with Portland State University for a research fellow to get the most current and detailed demographic data of the community. This data will inform a contracting process that will provide opportunity for Culturally Specific organizations to lead the community needs assessment activity, within their communities. ADVSD used the Equity and Empowerment Lens to identify the need for increased engagement and leadership of racially and culturally diverse communities in developing the Area Plan.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of people who contribute feedback in the needs assessment	N/A	N/A	N/A	375
Outcome	% of needs assessment participants that are racial, ethnic and/or cultural minorities	N/A	N/A	N/A	75%
Outcome	# of currently unserved older adults who participate in needs assessment	N/A	N/A	N/A	110

### Performance Measures Descriptions

## Legal / Contractual Obligation

ADVSD is designated the Area Agency on Aging for Multnomah County through a contract with the Oregon Department of Human Services and as guided by ORS Ch 410, to provide mandatory functions for older adults and people with disabilities. These include: provision of quality staffing, service planning, senior and disability advisory councils, and comprehensive and coordinated service delivery for older adults and people with disabilities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$100,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

## Explanation of Revenues

## Significant Program Changes

Last Year this program was:



**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Domestic Violence Crisis Services improve the quality of life for victims who are currently fleeing or attempting to flee domestic violence. Individuals attempting to flee domestic violence need access to the type and level of service they desire when the time is right for them. Services include 24-hour wrap-around shelter support and mobile advocacy services that provide crisis services to victims who are unable to access established shelters or other crisis diversion services.

### Program Summary

**ISSUE:** Individuals fleeing domestic violence need immediate tailored services that are mobile and culturally responsive.

**PROGRAM GOAL:** This offer funds programs that help meet our community goal to provide immediate safety and emergency response systems for those fleeing domestic violence. It is part of the County's regional response to domestic violence. Services reach more than 400 individuals annually and serve a racially and ethnically diverse population.

**PROGRAM ACTIVITY:** There are two main program activities:

1. This program provides supports and wrap-around services to individuals and families staying in shelters funded by the Joint Office of Homeless Services. Comprehensive shelter support services are designed to provide secure, confidential, 24-hour specialized support for victims who are fleeing domestic violence. These services include meeting basic needs such as food and clothing, ongoing safety planning, intensive domestic violence support, specialized children's programming, advocacy, assistance accessing housing, legal referrals and assistance accessing other services.
2. Mobile advocacy services provide confidential, community-based, comprehensive crisis support to victims who are fleeing or attempting to flee domestic violence for whom existing shelter services are not adequate, such as large families or those needing accommodation for disabilities. Services are used by victims who are at risk of homelessness due to domestic violence. To reduce transportation or location barriers, mobile advocates are available to meet victims throughout the county. Services include meeting basic needs such as food and clothing, ongoing risk assessment and safety planning, intensive domestic violence support, emergency short-term motel stays, advocacy and assistance accessing other services. The mobile advocacy program leverages funds from the Short-Term Rent Assistance program administered by Home Forward, as well as private funds raised by nonprofits, to provide comprehensive emergency services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of domestic violence victims and children receiving comprehensive, specialized crisis services.	393	250	250	250
Outcome	% of adult survivors who work with an advocate to engage in safety planning by exit	100%	80%	80%	80%

### Performance Measures Descriptions

Numbers engaged have exceeded targets for second year; in year three this will be monitored and adjusted with contractors, as appropriate.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$361,960	\$0	\$376,438	\$0
<b>Total GF/non-GF</b>	<b>\$361,960</b>	<b>\$0</b>	<b>\$376,438</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$361,960</b>		<b>\$376,438</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25041-19 YFS - Domestic Violence Crisis Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Domestic Violence Crisis Services improve the quality of life for victims who are currently fleeing or attempting to flee domestic violence. Individuals attempting to flee domestic violence need access to the type and level of service they desire when the time is right for them. Domestic and Sexual Violence Administration and Coordination provides administration, planning, coordination, evaluation, technical assistance, and policy support for domestic and sexual violence intervention in Multnomah County.

### Program Summary

**ISSUE:** Domestic violence is a complex issue that requires a coordinated countywide response. Domestic violence is also a leading cause of violent victimization, accounting for more than 40% of all reported violent crime and 25% of all homicides in Multnomah County. Multnomah County spends an estimated \$10 million addressing domestic violence-related criminal costs and \$2.5 million in victim services annually.

**PROGRAM GOAL:** The goal of the program is to eliminate domestic and sexual violence by providing system-wide coordination and leadership for the community, as well as professional staffing and administration for the County's Domestic and Sexual Violence Coordination Office.

**PROGRAM ACTIVITY:** Program activities include system-wide leadership and policy work; administration of County, State, and Federal funds; coordinating collaborative responses to domestic violence; developing and coordinating effective intervention and prevention strategies; evaluating and assessing system responses in order to improve them; delivering trauma-informed crisis response services; and providing technical assistance and policy advice to partners throughout Multnomah County. This offer also includes administration of the Federal Open Doors grant, which provides technical assistance to both disability and domestic violence agencies to improve services for survivors with disabilities.

Initiatives and projects include the Family Violence Coordinating Council, a multidisciplinary stakeholder group; the Domestic Violence Fatality Review Team that analyzes cases that lead to domestic violence fatalities and identify system improvements; monthly community-based training for providers; delivering trauma-informed crisis response services alongside police; and providing subject matter expertise in training, consultation and capacity-building within County programs and departments. The office oversees victim services contracts and economic empowerment and employment program contracts including technical assistance, monitoring, and performance measurement to assess the impact and quality of contracted services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of professionals trained to understand dynamics of domestic violence and children's exposure to violence.	1806	2,000	2,000	2,000
Outcome	Percentage of nonprofit partners receiving higher scores on the Performance Indicator Tool	100%	100%	100%	100%
Output	Number of training events provided to public employees, law enforcement, and other community members.	72	75	75	75

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$428,861	\$100,619	\$372,166	\$127,171
Contractual Services	\$110,313	\$57,050	\$65,497	\$81,265
Materials & Supplies	\$31,316	\$2,161	\$29,638	\$3,749
Internal Services	\$50,694	\$13,190	\$54,860	\$12,647
<b>Total GF/non-GF</b>	<b>\$621,184</b>	<b>\$173,020</b>	<b>\$522,161</b>	<b>\$224,832</b>
<b>Program Total:</b>	<b>\$794,204</b>		<b>\$746,993</b>	
<b>Program FTE</b>	3.24	0.76	2.85	1.05

Program Revenues				
Intergovernmental	\$0	\$117,420	\$0	\$213,838
Other / Miscellaneous	\$0	\$3,600	\$0	\$3,600
Beginning Working Capital	\$0	\$2,000	\$0	\$7,394
<b>Total Revenue</b>	<b>\$0</b>	<b>\$123,020</b>	<b>\$0</b>	<b>\$224,832</b>

Explanation of Revenues

\$163,638 - US Department of Justice, Office on Violence Against Women  
 \$50,000 - City of Portland Intergovernmental Agreement  
 \$7,394 - Beginning Working Capital  
 \$3,600 - Domestic Partnership Fees  
 \$200 - Misc Charges/Recoveries

Significant Program Changes

Last Year this program was: FY 2019: 25044-19 YFS - Domestic and Sexual Violence Coordination

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Domestic Violence Legal Services funds legal advocacy and civil legal services for survivors of domestic violence through contracted services at local nonprofit agencies. It also supports advocacy in the restraining order services room at the Multnomah County Courthouse.

**Program Summary**

**ISSUE:** The cost of legal representation can be prohibitive for survivors who have low or no income and have been financially exploited by their abusers. There are very few resources for legal assistance available for survivors with low incomes. As a result, survivors of domestic violence often are forced to appear in court without representation or legal advocacy. Domestic violence survivors and provider agencies report that civil legal services are one of the highest unmet needs for domestic violence survivors.

**PROGRAM GOAL:** The goal of the program is to reduce domestic violence by providing civil legal advocacy and civil legal services to help survivors to safely end abusive relationships and resolve issues that cannot be addressed by human service or criminal justice interventions.

**PROGRAM ACTIVITY:** Program activities focus on the provision of legal assistance. Civil legal assistance is related to the reduction in reported domestic violence crimes and improves the likelihood that survivors will be able to obtain protective orders from courts, which is a significant factor in reducing rates of violence. These specialized legal services for domestic and sexual violence survivors ensure better outcomes in legal proceedings. These include assistance with restraining order hearings, custody and parenting time determinations, housing retention, immigration matters, and related victims' rights and other civil legal matters.

This offer funds legal advocacy and civil legal services for survivors through local nonprofit agencies including Legal Aid Services of Oregon. This funding also supports advocacy in the restraining order services room at the Multnomah County Courthouse and the Court Care program which provides culturally specific, trauma informed childcare in the Courthouse for children whose parents are engaged in legal proceedings.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of domestic violence survivors assisted with courthouse-based restraining order advocacy.	1529	800	800	800
Outcome	% of retained cases with a court action filed or contested by an attorney.	90%	75%	75%	75%

**Performance Measures Descriptions**

The number engaged exceeds target; program will monitor and adjust with the contractor for next year.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$207,214	\$31,000	\$210,503	\$35,000
<b>Total GF/non-GF</b>	<b>\$207,214</b>	<b>\$31,000</b>	<b>\$210,503</b>	<b>\$35,000</b>
<b>Program Total:</b>	<b>\$238,214</b>		<b>\$245,503</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$31,000	\$0	\$35,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$31,000</b>	<b>\$0</b>	<b>\$35,000</b>

Explanation of Revenues

\$35,000 - Oregon Judicial Department Court Care Center

Significant Program Changes

Last Year this program was: FY 2019: 25046-19 YFS - Domestic Violence Legal Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 60076  
**Program Characteristics:**

### Executive Summary

Multnomah County's Domestic Violence Enhanced Response Team (DVERT) provides intervention for domestic violence cases that have a high risk of ongoing, severe violence or lethality. DVERT works closely with law enforcement to provide after-hours victim services and crisis response, including a focus on older adults experiencing violence.

### Program Summary

**ISSUE:** Complex domestic violence cases with a high risk of ongoing, severe abuse require an immediate, multidisciplinary, collaborative response in order to de-escalate violence and prevent domestic violence-related deaths in our community.

**PROGRAM GOAL:** The goal of the DVERT program is to increase victim safety and offender accountability where there is high risk of lethality.

**PROGRAM ACTIVITIES:** DVERT provides after-hours victim advocates to provide immediate on-scene crisis response, safety planning and victim support following police response to domestic violence crimes. The team has one FTE focused on older adults who are victims of violence from family members or caregivers to reduce the risk of injury and death from abuse. All DVERT advocates are co-located with police, including the Elder Crimes Unit.

DVERT includes three program components: DVERT case staffing, Domestic Violence Response Advocates (DVRA) and Domestic Violence Reduction Unit (DVRU). DVRA provides after-hours on-scene crisis response, safety planning, and victim support services following police response to violent crimes. Advocates are available seven days a week, including late nights and holidays. DVRUs work with officers five days a week as part of the investigation unit and includes victim support services, court accompaniment, and coordination with community agencies. The case staffing team provides crisis response, ongoing victim support, client financial assistance, criminal justice intervention, and service coordination across multiple agencies.

The team also participates in multi-jurisdictional efforts to improve responses to high-risk domestic violence cases. They provide training and technical assistance locally and throughout the country on improved response and coordination between advocates and law enforcement. The team also conducts outreach and awareness about domestic violence to the community, and partners with a variety of organizations in addition to law enforcement including the District Attorney's Office, Oregon Department of Human Services, County Adult Protective Services, Department of Community Justice, domestic violence and sex trafficking service systems.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of victims receiving multi-disciplinary, intensive intervention.	265	300	300	300
Outcome	% of police officers who agree that DV survivors benefit from having DVRA on the scene.	82%	90%	90%	90%
Output	Number of domestic violence victims referred by police to afterhours victim advocates.	816	650	650	650

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$600,900	\$265,794	\$674,918	\$310,518
Contractual Services	\$50,000	\$222,732	\$50,000	\$222,702
Materials & Supplies	\$5,169	\$11,869	\$22,048	\$3,201
Internal Services	\$101,101	\$0	\$108,890	\$4,105
<b>Total GF/non-GF</b>	<b>\$757,170</b>	<b>\$500,395</b>	<b>\$855,856</b>	<b>\$540,526</b>
<b>Program Total:</b>	<b>\$1,257,565</b>		<b>\$1,396,382</b>	
<b>Program FTE</b>	6.00	3.00	6.00	3.00

Program Revenues				
Intergovernmental	\$0	\$500,395	\$0	\$540,526
<b>Total Revenue</b>	<b>\$0</b>	<b>\$500,395</b>	<b>\$0</b>	<b>\$540,526</b>

Explanation of Revenues

\$311,569 - City of Portland General Fund  
 \$228,957 - US Department of Justice Office on Violence Against Women

Significant Program Changes

Last Year this program was: FY 2019: 25047A-19 YFS - Domestic Violence Enhanced Response Team



**Department:** County Human Services **Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Domestic Violence Crisis Services improve the quality of life for victims who are currently fleeing or attempting to flee domestic violence. Individuals attempting to flee domestic violence should have access to the type and level of service they desire when the time is right for them. This offer provides culturally-specific and targeted services to underserved populations who are experiencing domestic violence. Services include risk assessment and safety planning, advocacy, intensive and confidential support, case management, and assistance accessing broader community resources.

### Program Summary

**ISSUE:** Domestic violence manifests itself differently depending on the community. Survivors report an increased level of comfort when they are able to access services from within their own community.

**PROGRAM GOAL:** The goal of this offer is to provide access to culturally specific and population-specific services in order to increase the efficacy of domestic violence services.

**PROGRAM ACTIVITY:** This offer funds programs that provide specialized domestic violence services for the following populations: African American, Latina, Native American, Slavic/Russian immigrants, African immigrants, LGBTQ, older adults and people with disabilities.

These services are contracted through a variety of culturally-specific service providers. Services that are developed and delivered by specific communities are more accessible to and a better match for the needs and values of the survivors they are intended to serve. This program provides specialized, population-specific domestic and sexual violence services, including trauma informed care, ongoing risk assessment, safety planning, intensive support, advocacy, case management, and help accessing other community resources. Services include assistance with legal issues, access to government benefits, housing, financial education, assistance accessing benefits, access to mental and physical healthcare services, employment, immigration, and disability services.

This offer also includes the LGBTQ Economic Empowerment program located at the Gateway Center for Domestic Violence. This program helps survivors who identify as LGBTQ to clear up and separate credit reports, develop a plan to seek employment, access job coaching and training, and apply for and obtain employment.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of individuals receiving culturally/population-specific domestic violence services.	744	500	500	500
Outcome	Percentage of adult survivors who engage in safety planning with an advocate by exit.	64%	85%	85%	85%

### Performance Measures Descriptions

Numbers engage exceed targets; program will monitor in the coming year and adjust with contractor.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$665,224	\$0	\$696,833	\$0
<b>Total GF/non-GF</b>	<b>\$665,224</b>	<b>\$0</b>	<b>\$696,833</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$665,224</b>		<b>\$696,833</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25048-19 YFS - Culturally Specific and Underserved Domestic & Sexual Violence

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Community-Based Sexual Assault services improve the immediate safety and quality of life for victims of sexual assault. Individuals who have experienced sexual assault should have access to the type and level of service they desire when the time is right for them regardless of whether or not they choose to work with the criminal justice system to prosecute the attacker. This offer provides services to victims of sexual assault and includes specialized services for medical and legal advocacy, case management, support groups, and counseling.

### Program Summary

**ISSUE:** Oregon has the second highest lifetime prevalence of sexual assault in the country according to research completed by the Centers for Disease Control and Prevention. Crisis lines report more than 2,000 calls each year seeking sexual assault services. The majority of sexual assault survivors -- at least 75% -- choose to avoid working with the criminal justice system for various reasons and thus are not eligible for traditional sexual assault victim services. Victims often are unaware of their rights or fear approaching law enforcement to report crimes, and subsequently, never receive specialized trauma or medical services that can help them with their recovery.

**PROGRAM GOAL:** Community-based sexual assault and trauma services are available regardless of victim willingness to engage with the police.

**PROGRAM ACTIVITY:** This program funds two staff to provide comprehensive community-based services to victims of rape or sexual assault. Services are offered in a variety of non-traditional settings including community health clinics, urgent care centers, homeless shelters, and schools.

Services are provided through community-based service providers and include medical and legal advocacy, case management, support groups, counseling, and flexible client funds for emergency needs. Limited relocation funds are also available. Contracted partners work with Multnomah County, the Sexual Assault Task Force, local criminal justice systems, medical and mental health providers, and victim services providers to coordinate response and increase capacity in the community for these services through documentation of need and technical assistance and training for new providers.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of sexual assault survivors who receive comprehensive, specialized advocacy services.	73	65	65	65
Outcome	Percent of sexual assault survivors who report feeling supported by working with an advocate.	73%	75%	75%	75%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$211,657	\$0	\$291,698	\$0
<b>Total GF/non-GF</b>	<b>\$211,657</b>	<b>\$0</b>	<b>\$291,698</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$211,657</b>		<b>\$291,698</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25049-19 YFS - Sexual Assault Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 60415E, 15401, 25050B  
**Program Characteristics:**

**Executive Summary**

The Gateway Center is a drop-in service center providing a wide range of critical services to survivors of domestic and sexual violence and their children. The Gateway Center ensures that survivors in our community can learn about and access available resources, access safety services such as restraining orders, and mitigate the impact of domestic violence exposure on children. The Gateway Center is a unique access point to domestic and sexual violence services in a continuum that includes shelters, crisis lines and culturally specific services among others.

**Program Summary**

**ISSUE:** Domestic violence is a complex issue that requires an accessible and varied array of services. Domestic violence is also a leading cause of violent victimization, accounting for more than 40% of all reported violent crime and 25% of all homicides in Multnomah County. Multnomah County spends an estimated \$10 million addressing domestic violence-related criminal costs and \$2.5 million in victim services annually.

**PROGRAM GOAL:** The goal of the Gateway Center is to prevent and mitigate the impact of trauma caused by domestic and sexual violence by providing access to meaningful services and safety planning in a trauma informed, culturally responsive and welcoming environment.

**PROGRAM ACTIVITY:** The program manages a front desk/reception service that welcomes upward of 50 survivors, children and their support-people each day. The program also manages the contracted front line advocates to ensure consistently high-quality service delivery and safety planning for each individual survivor. It coordinates a complex service delivery system across 16 agency on-site partners including police, prosecutors, DHS, and 12 nonprofits. It ensures that partners providing services to survivors are present, consistent, survivor led and trauma informed. Services include advocacy, safety planning, restraining order facilitation, civil legal assistance, crime victim advocacy, prosecution services, housing assistance, motel stays, therapeutic services for adults and children, and DHS services. Services also include economic empowerment services and mental health services for adults. It provides space and support for an on-site childcare so children are safe while a parent accesses services. It manages a busy satellite courtroom and partnership with the Multnomah County Circuit Court so survivors can access protection order petitions from start to finish without having to travel and navigate the complexities of downtown. The Gateway Center wraps individual survivors with services designed to interrupt power dynamics and ensure community members have autonomy over their well being.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of community members who are able to access protection orders at the Gateway Center	1430	NA	1450	1450
Outcome	Percent responding new knowledge of resources and improved access to same	93%	NA	90%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$0	\$459,262
Contractual Services	\$0	\$0	\$67,600	\$392,000
Materials & Supplies	\$0	\$0	\$0	\$21,700
Internal Services	\$0	\$0	\$217,027	\$70,453
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$284,627</b>	<b>\$943,415</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,228,042</b>	
<b>Program FTE</b>	0.00	0.00	0.00	4.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$943,415
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$943,415</b>

Explanation of Revenues

\$943,415 - City of Portland Intergovernmental Agreement

Significant Program Changes

Last Year this program was:

As a result of the IGA approved by the Board of County Commissioners on 12/13/2018 between City of Portland and Multnomah County all of the City of Portland funds now reside in the County Budget. The County General Fund was also moved from Multnomah County Health Department (\$65,000 for Contracted Services resided in PO 40079 in FY19) and the Department of County Assets.

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25050A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Domestic Violence Specific Immigration Legal Services provides legal consultation to survivors of domestic and sexual violence who seek services at the Gateway Center for Domestic Violence Services. Immigration Legal Services provides on-site intake services one day each week to consult with survivors. Subsequently, 25 survivors are chosen for ongoing representation to access visas or other immigration relief.

**Program Summary**

**ISSUE:** Survivors of domestic and sexual violence who are immigrants often qualify for immigration legal relief based on their status as survivors of crime or domestic violence. However, gaining access to these protections can be complex and many survivors struggle with the process. Access to immigration lawyers helps ensure survivors are able to leave abusive relationships without fear of deportation being used in retaliation for leaving the abuse.

**PROGRAM GOAL:** Provide Immigration legal Advice and representation to survivors of domestic and sexual violence seeking services at the Gateway Center for Domestic Violence Services.

**PROGRAM ACTIVITIES:** Engage legal services partner to provide legal consultation and intake services one day a week at the Gateway Center for Domestic Violence Services. An attorney with expertise in immigration law will work at the Gateway Center once a week. Front line advocates (“navigators”) will recommend legal consultations for survivors who are concerned about their immigration status. Legal services partner will consider each survivor for ongoing representation. When a survivor qualifies for immigration legal relief based on their status as a domestic violence survivor, a crime victim, or a victim of human trafficking, legal services partner will advocate for relief for these survivors.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of domestic violence and/or sexual assault survivors seen at intake for legal consultation	N/A	N/A	N/A	40
Outcome	% of retained cases with immigration relief actions filed by legal service attorneys	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

Performance measures reflect six months of services funded by Multnomah County, with the remaining six months contingent upon match funds requested from the City of Portland

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$30,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$30,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$30,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was:

In December 2018, the City of Portland and Multnomah County entered into an Intergovernmental Agreement to centralize the Gateway Center's administration under Multnomah County's Department of County Human Services. Under this agreement, the County will operate and maintain the facility and employ all staff, while the City will continue to support the center's funding. Prior to the 2018 Intergovernmental Agreement, the City of Portland funded DV specific immigration legal services at the Gateway Center. The City funding was one-time-only and was not continued under the 2018 agreement. Accordingly, this program offer provides one-time-only funding to continue supporting current service levels for six months while other funding sources are explored. If sustainable funding is not sourced within this time frame, the program will be discontinued.



**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Violence against women is an issue that impacts our entire community. According to the National Crime Information Center, there were 5,712 instances where American Indian Alaskan Native (AI/NA) women went missing in 2016. Only 116 of those cases were logged into the US Department of Justice's federal missing persons database. Native American women and girls face the highest rates of violence per capita out of any other race and are often unprotected by the American legal system as tribes hold a unique, sovereign status.

### Program Summary

**ISSUE:** Missing and Murdered Indigenous Women (MMIW) is a national movement that launched in response to the growing concern around American Indian and Alaskan Native (AI/AN) women and girls going missing or being murdered. AI/AN women and girls are often misidentified when coming into contact with law enforcement or other programs and services overseen by governmental entities. There are many contributing factors around why these individuals are unaccounted for in our current data - AI/AN women are often not captured in either Tribal data nor law enforcement data systems.

**PROGRAM GOAL:** This one-time offer raises awareness and provides training to County staff working in public safety, law enforcement, community justice, mental health and human services on the issue of missing and murdered indigenous women. Training will include basic understanding of Tribal sovereignty, understanding the impact of data inequity and identification, and an overview of current national and local statistics. The effort will build awareness of this issue and how data inequity and County services intersect with this topic through culturally specific training for County staff who work with women and girls who have experienced domestic violence, sexual assault, been sex trafficked, and/or come into contact with the justice system.

**PROGRAM ACTIVITIES:** The Department of County Human Services in partnership with the Chair's office will coordinate events that bring experts together to educate county staff on this topic and discuss implications for practice. The effort will be centered on the voices and perspectives of the Native Community, who will shape the content and approaches. We anticipate there will be a keynote speaker on the national concern over Missing and Murdered Indigenous Women; a panel of experts on domestic violence, sexual violence and sex trafficking among Indigenous women and girls; a discussion on gaps in identification and service delivery

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# events held to build awareness & increase skills	N/A	N/A	N/A	2
Outcome	% participants to report an increase in knowledge of the MMIW issue and its relevance to their work	N/A	N/A	N/A	95%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$50,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Through the Youth & Family Services Division (YFS), individuals and families have the opportunity to engage in the level and depth of culturally relevant services they want, in order to thrive. YFS Administration provides division-wide leadership, coordination of daily functions, budget development, performance management, and overall strategic direction toward this goal.

### Program Summary

**ISSUE:** Leading with racial equity towards accountability, leadership, and data-driven strategic direction are key activities toward reaching the Division's overall goals. All activities and projects in the Youth & Family Services Division align with and lead toward two primary outcomes: youth experience educational success and family stability.

**PROGRAM GOAL:** The goal of the YFS Division Administration is to ensure efficient use of resources through maximizing budget funding, driving policy, developing effective programs, supervising staff, ensuring staff professional development, developing partnerships and leading the division with racial equity.

**PROGRAM ACTIVITY:** The Division is responsible for providing, contracting for, and/or coordinating the County's investments in five core service/policy areas: Energy Services, Anti-Poverty/Prosperity, Education Supports, Early Childhood, and Domestic and Sexual Violence. The Division functions as the County's legislatively mandated Community Action Program Office.

Activities in the area of budget development include 1) development of the annual budget documents, review expenses quarterly, and ensure expenditures are in line with both revenue and funding guidelines; 2) activities to coordinate daily functions such as direct supervision of staff, coordinate like activities across the division, establish procedures and practices and convene staff toward cohesion and teamwork; 3) performance management duties such as creating professional development opportunities for staff, setting the overall framework for contractor data collection, reporting, and engaging in program/system evaluation.

YFS leadership provides direction toward creating a work culture that restores safety, trust and belonging within the workforce. Staff build and sustain effective relationships and partnerships with other Divisions, organizations and jurisdictions (such as the Joint Office of Homeless Services, the City of Portland, Home Forward, School Districts, District Attorney's office, Health Department, Department of Human Services and Oregon Housing and Community Services), to increase the delivery of effective and culturally responsive services in the community.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Percentage of staff attending at least 10 hours of skill building/professional development per year.	64%	100%	100%	100%
Outcome	Percentage of stakeholders expressing satisfaction with Division administrative services. <sup>1</sup>	71%	80%	80%	80%

### Performance Measures Descriptions

<sup>1</sup> Stakeholder satisfaction is measured through an anonymous survey administered to contract agencies annually.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,354,676	\$0	\$1,361,029	\$0
Contractual Services	\$76,020	\$0	\$76,020	\$0
Materials & Supplies	\$65,315	\$0	\$49,781	\$0
Internal Services	\$213,299	\$0	\$147,580	\$0
<b>Total GF/non-GF</b>	<b>\$1,709,310</b>	<b>\$0</b>	<b>\$1,634,410</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,709,310</b>		<b>\$1,634,410</b>	
<b>Program FTE</b>	11.00	0.00	10.00	0.00

Program Revenues				
Intergovernmental	\$0	\$50,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25118-19 YFS - Youth & Family Services Administration

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Ensuring that there is sufficient heat in a home, the lights are on and water is hot is critical for people to have quality of life. Functional utilities help ensure that a young person can study at home, an older adult is living safely and families remain stable. The Energy Assistance Program supports housing stability by providing people who live on a fixed or low income with financial assistance to help meet their energy costs.

**Program Summary**

**ISSUE:** A study from the Department of Energy, Office of Energy Efficiency and Renewable Energy makes it clear that low-income households suffer a disproportionate energy burden. Many low-income households use expensive heating fuels in old, inefficient homes and face barriers to accessing technologies that could help make their energy costs more affordable. Thus, the average energy burden for low-income households is 8.2%. This is 3 times higher than higher-income households.

**PROGRAM GOAL:** The goal of the energy assistance program is to provide one-time annual energy bill payments to pay utilities for households who live on a fixed or low income and who are struggling with energy costs, so they can remain stably housed.

**PROGRAM ACTIVITY:** The Energy Assistance Program helps people keep their homes warm in the winter. Direct utility payments to income-eligible households, along with energy education, case management, and other services help households manage and pay for their energy costs while providing education about other services. Energy bill payment assistance is delivered through seven community nonprofit agencies to make these utility payments for fixed and low-income households. On average, program participants receive \$445 in utility assistance each year.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households served	17,473	15,000	15,000	15,000
Outcome	Percentage of households served after receiving shutoff notice who avoid disconnection.	100%	100%	100%	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$569,859	\$0	\$816,830
Contractual Services	\$0	\$11,810,545	\$0	\$11,271,287
Materials & Supplies	\$0	\$98,220	\$0	\$19,769
Internal Services	\$0	\$202,852	\$0	\$230,641
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,681,476</b>	<b>\$0</b>	<b>\$12,338,527</b>
<b>Program Total:</b>	<b>\$12,681,476</b>		<b>\$12,338,527</b>	
<b>Program FTE</b>	0.00	5.70	0.00	7.90

Program Revenues				
Intergovernmental	\$0	\$12,756,721	\$0	\$12,338,527
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,756,721</b>	<b>\$0</b>	<b>\$12,338,527</b>

Explanation of Revenues

\$6,752.600 - OHCSO Oregon Energy Assistance Program  
 \$5,505,927 - OHCSO Low Income Energy Assistance Program - Energy  
 \$80,000 - PDX Water/Sewer D/A

Significant Program Changes

Last Year this program was: FY 2019: 25119-19 YFS - Energy Assistance

A net decrease in contracted services due to an increase of \$0.7M in LIEAP funds and a decrease of \$1.2M in OEAP Funds.

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Homes that are safe and adequately weatherized contribute to the well-being and overall economic stability of people living on fixed and low incomes. The Weatherization Program provides energy use audits, weatherization services, furnace repair and replacement, and appliance replacement to fixed and low-income households. County staff and vendors provide these services.

### Program Summary

**ISSUE:** A study from the Department of Energy, Office of Energy Efficiency and Renewable Energy makes it clear that low-income households and communities of color suffer a disproportionate energy burden. Many low-income households use expensive heating fuels in old, inefficient homes and face barriers to accessing technologies that could help make their energy costs more affordable. The census data shows that on a national average, low-income households have an energy burden three times higher than non-low-income households. This results in less money for these low-income households to spend on other essential needs, such as food, transportation and healthcare.

**PROGRAM GOAL:** The goal of the Weatherization Program is to improve the livability and affordability of housing for people living on fixed and low incomes. Weatherized homes have improved livability and reduced energy consumption through updated appliances, furnaces, insulation, windows, mechanical venting, and other related items in the home. Energy efficiency can significantly reduce the energy burden, and result in improved health of the occupants, habitability of their home and significant greenhouse gas savings.

**PROGRAM ACTIVITY:** The Weatherization Program provides comprehensive home energy audits to low-income households including older adults, people with disabilities, and families with children. These energy audits indicate the scope of repairs and/or improvements necessary in the home in order to reduce energy use, lower utility bills and provide a safe and comfortable environment. Weatherization services resulting from this audit include the following services delivered by local contractors: insulating attics, floors and walls; air and duct sealing; repairing/replacing heating systems; replacing windows and patio doors; safety checking combustion appliances; and repairing/replacing old plumbing. Every household also receives energy education, as well as information and resources for other community services. Weatherization services are available to single-family homes and multifamily units. Multi-Family projects are weatherized with the direct benefit of the tenants in mind, as well as maintaining affordable housing units for a ten-year period.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households served <sup>1</sup>	327	300	300	300
Outcome	Number of affordable multi family housing units maintained for 10 years	3,989	100	3,337	100

### Performance Measures Descriptions

<sup>1</sup>This number includes a combined total for single family and multifamily units, which is a single family house or a multifamily unit. Outcome: Weatherization of multifamily buildings requires a commitment to a minimum 10 years of affordability. While numbers of units weatherized fluctuate based on funding availability and specific project costs, it's one of the best ways to preserve and improve the quality of current affordable housing stock.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$151,960	\$952,065	\$0	\$1,045,451
Contractual Services	\$0	\$4,666,698	\$0	\$4,298,718
Materials & Supplies	\$0	\$378,545	\$0	\$241,485
Internal Services	\$0	\$291,694	\$0	\$693,494
<b>Total GF/non-GF</b>	<b>\$151,960</b>	<b>\$6,289,002</b>	<b>\$0</b>	<b>\$6,279,148</b>
<b>Program Total:</b>	<b>\$6,440,962</b>		<b>\$6,279,148</b>	
<b>Program FTE</b>	1.00	9.30	0.00	10.10

Program Revenues				
Intergovernmental	\$0	\$4,562,757	\$0	\$4,634,148
Other / Miscellaneous	\$0	\$806,000	\$0	\$800,000
Beginning Working Capital	\$0	\$845,000	\$0	\$845,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,213,757</b>	<b>\$0</b>	<b>\$6,279,148</b>

Explanation of Revenues

- \$3,000,695- OHCS D ECHO (SB1149)
- \$1,075,952- OHCS D Low Income Energy Assistance Program - Weatherization
- \$845,000 - Beginning Working Capital
- \$800,000 - County Weatherization Rebates
- \$388,347 - OHCS D DOE Weatherization
- \$90,000 - PDX Water and Sewer FR
- \$59,154 - Low Income Energy Assistance Program - Client Education
- \$20,000 - Energy Conservation show rebates

Significant Program Changes

Last Year this program was: FY 2019: 25121-19 YFS - Weatherization



**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Multnomah County is in a severe housing crisis and many low-income residents lack housing and/or economic stability. Legal barriers and debt are roadblocks to overall stability and prevent access to housing, employment, education and community involvement. People of color and people with disabilities are disproportionately impacted by debt and legal barriers because of disparate treatment in the justice system, discrimination, and systemic racism. Legal Services Days remove barriers to opportunity and address systemic racism and allowing for greater access to housing and opportunity.

### Program Summary

**ISSUE:** Residents experiencing poverty, especially people of color and people who experience discrimination and disproportionate contact with the criminal justice system, have legal and financial barriers that prevent them from accessing housing, employment, education and other opportunities.

**PROGRAM GOAL:** Legal Services Days work to eliminate or reduce fees, fines and legal barriers to stability and opportunity through access to a legal clinic focused on these issues.

**PROGRAM ACTIVITY:** District Attorneys, Judges, Public Defenders and Social Services agencies collaborate to host six afternoon legal clinics dedicated to reducing or eliminating fees, fines and legal barriers. Clinics are located in East County and North Portland, close to low-income residents and communities of color.

The County will convene an Advisory Group to review policy and systems issues and potential upstream policy solutions to reduce fees, fines, and legal barriers for low income County residents. The Advisory Group will consist of elected staff, the Court system, District Attorneys, Public Defenders, County Human Services, and other stakeholders. The Advisory Group will review and address pre-screening of cases and other programmatic efficiencies that may increase effectiveness and numbers served through a trauma-informed lens.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants engaged in service	N/A	840	840	870
Outcome	% of participants receiving legal advice or services resulting in barrier reduction	N/A	N/A	100%	100%
Output	# of participants appearing before judge	N/A	540	720	730
Output	Amount of fees and fines waived or reduced	N/A	\$2.7 Million	\$3 Million	\$3.2 Million

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$125,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$125,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$125,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25133A  
**Program Characteristics:**

**Executive Summary**

Multnomah County is experiencing an unprecedented housing crisis and thousands of low income families are living with severe rent burdens. Over the course of any given year, a percentage of these households will face a crisis that puts them at imminent risk of homelessness. Currently, short term rent assistance coupled with services and flexible client assistance funds is the main intervention to prevent homelessness. This offer creates a local long term rent assistance pilot for families at risk of homelessness.

**Program Summary**

**ISSUE:** Tens of thousands of very low-income families in Multnomah County are living with severe rent burdens, spending more than 50% of their already limited incomes on rent. Over the course of any given year, a percentage of these households will face a crisis that puts them at imminent risk of homelessness. For some of these families, this is a one-time occurrence, and for others it is part of a recurring cycle of extreme housing instability, followed by homelessness, followed by extreme housing instability and then homelessness again.

**PROGRAM GOAL:** The goal is to determine how well long term rent assistance improves outcomes for families at risk of homelessness to an extent that they may transition off of a rent subsidy and/or helps families transition to a permanent federal subsidy.

**PROGRAM ACTIVITY:** The program will serve a small number of severely rent burdened families at risk of homelessness through our existing Multnomah Stability Initiative (MSI) anti-poverty program, with a local long term voucher instead of short term rent assistance. Long term rent assistance will be coupled with culturally specific or culturally responsive case management using principles of Assertive Engagement. The program will be evaluated to determine which families are most likely to benefit from long term intervention and whether a long term voucher results in improved outcomes in a variety of domains including housing stability and positive child development. Rent assistance will be processed and distributed through existing County partnerships with Home Forward and MSI providers. Partnership with the Joint Office of Homeless Services will also create opportunities for replication.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# MSI participants receiving long term rent assistance	N/A	N/A	N/A	8
Outcome	% of families experiencing improvements in MSI outcomes	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$150,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$150,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

Reallocates \$150,000 ongoing CGF from Short Term Rental Assistance; \$75,000 from JOHS Offer 10053C - Housing Placement & Retention - Homeless Families and \$75,000 from DCHS Program Offer 25133A - YFS Housing Stabilization for Vulnerable Populations (HSVP).

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25133B, 25132  
**Program Characteristics:**

**Executive Summary**

Everyone deserves safe and stable housing. Housing Stabilization for Vulnerable Populations provides rent assistance and housing placement to vulnerable households including for people whose housing is vulnerable and are at high risk for homelessness. This offer provides a package of services to help people avoid becoming homeless by providing housing stabilization services, eviction prevention, and ongoing assistance for people with low incomes, including families with children, older adults, and people with disabilities.

**Program Summary**

**ISSUE:** People often need help to maintain stable housing, particularly those who have low or fixed incomes. In 2015, the overall rent growth in Portland was an average of 8-9% - one of the highest in the nation. In 2017, after years of significant rent increases, it has decreased to 2%. In addition, communities of color comprise the majority of renter households and are over-represented within the homeless population.

**PROGRAM GOAL:** Housing Stabilization programs strive to prevent homelessness by keeping people stably housed or helping those who are evicted from stable housing to locate and secure new housing. Housing Stabilization programs help people avoid homelessness.

**PROGRAM ACTIVITY:** This offer includes two primary initiatives:

- 1) The Short-Term Rent Assistance program (STRA) - The program is a joint effort between Multnomah County, the City of Portland, and Home Forward, each of which contributes funds to the coordinated pool. STRA funds are distributed by local social service agencies and are geared towards households that are currently experiencing homelessness or are at risk of homelessness. Funds can be used for rent assistance, mortgage payment, and emergency hotel vouchers. Assistance is available for up to 24 months. These services help vulnerable county residents find homes, maintain housing, avoid homelessness, and work on creating a path to economic stability.
- 2) The Housing Stability Team - This program is an innovative approach to stabilizing housing for people engaged in County programs. A multi-department and multi-division team works across traditional program silos to provide joint case staffing and coordinated access to holistic wrap-around services. Services include eviction prevention, housing stabilization, Assertive Engagement, landlord retention services, utility payments, short-term rent assistance, and move-in flexible funds.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households served in STRA	852	800	800	784
Outcome	Percentage of households served who remain in permanent housing six months after exit	86%	90%	90%	90%

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$0	\$138,251	\$127,492
Contractual Services	\$0	\$0	\$1,858,119	\$1,868,387
Materials & Supplies	\$0	\$0	\$7,531	\$11
Internal Services	\$0	\$0	\$21,653	\$21,885
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,025,554</b>	<b>\$2,017,775</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$4,043,329</b>	
<b>Program FTE</b>	0.00	0.00	0.74	1.09

<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$2,017,775
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,017,775</b>

**Explanation of Revenues**

- \$1,748,881 - OHCS D Emergency Housing Assistance
- \$121,653 - State of Oregon Elderly Rent Assistance
- \$96,267 - OHCS D Housing Stabilization Program
- \$50,974 - OHCS D Low Income Rental Housing Fund

**Significant Program Changes**

**Last Year this program was:** FY 2019: 25133-19 YFS - Housing Stabilization for Vulnerable Populations (HSVP)

OHCS D Emergency Housing Assistance decreased by \$0.3M.

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25133A, 25132  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Everyone deserves safe and stable housing. Housing Stabilization for Vulnerable Populations provides rent assistance vulnerable households including for people whose housing is vulnerable and are at high risk for homelessness. This offer provides backfill one-time-only funding for this program. This funding will restore short term rent assistance to current service level.

**Program Summary**

**ISSUE:** People often need help to maintain stable housing, particularly those who have low or fixed incomes. In 2015, the overall rent growth in Portland was an average of 8-9% - one of the highest in the nation. In 2017, after years of significant rent increases, it has decreased to 2%. In addition, communities of color comprise the majority of renter households and are over-represented within the homeless population.

**PROGRAM GOAL:** Housing Stabilization programs strive to prevent homelessness by keeping people stably housed or helping those who are evicted from stable housing to locate and secure new housing. Housing Stabilization programs help people avoid homelessness

**PROGRAM ACTIVITIES:** The Short-Term Rent Assistance program (STRA) - The program is a joint effort between Multnomah County, the City of Portland, and Home Forward, each of which contributes funds to the coordinated pool. STRA funds are distributed by local social service agencies and are geared towards households that are currently experiencing homelessness or are at risk of homelessness. Funds can be used for rent assistance, mortgage payment, and emergency hotel vouchers. Assistance is available for up to 24 months. These services help vulnerable county residents find homes, maintain housing, avoid homelessness, and work on creating a path to economic stability.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of households served in STRA	N/A	N/A	N/A	16
Outcome	% of households served who remain in permanent housing six months after exit	N/A	N/A	N/A	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$75,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$75,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$75,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:



**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Everyone should be able to grow up in an environment free of danger and abuse. Youth who become victims of sex trafficking need a system of care that helps them move into safe and stable adulthood. The Youth Trafficking program is part of a multi-department, multi-agency collaborative that provides survivors with safety services, shelter, case management, and other services to escape forced prostitution. These highly intensive and population-specific shelter and Assertive Engagement services are designed to intervene with this significantly traumatized group of youth.

### Program Summary

**ISSUE:** The Pacific Northwest has gained the unenviable reputation as a hub for sex trafficking of minors. An estimated 400-600 youth are trafficked each year in Multnomah County. Youth are typically trafficked commercially, through gang involvement, or as a result of domestic violence and exploitative romantic relationships, and are unable to leave "the life" due to exploitation and abuse.

**PROGRAM GOAL:** The goal of the Sex Trafficked Youth services system is to ensure that youth who have been trafficked can move past trauma, create hope, address economic instability, and obtain stable housing through a collaborative approach to services and recovery.

**PROGRAM ACTIVITY:** This offer funds services including trafficking prevention, drop-in services, mobile crisis services, confidential advocacy, and short-term housing, Assertive Engagement services, outreach to survivors, education, system support and coordination, ongoing program development through the Youth Sex Trafficking Collaborative, and administrative program support for the collaborative.

Services are provided in a holistic manner and include collaboration with the Department of Community Justice, law enforcement, courts, Oregon Department of Human Services Child Welfare, Juvenile Justice, the Homeless Youth System, the Domestic & Sexual Violence System, and community advocates including those specializing in mental health, trauma and crime victims services.

Services are available when youth are ready to engage and tailored to youth based on their specific needs, including culturally specific services for youth of color and those who identify as LGBTQ.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth engaged in case management supports	NA*	80	80	80
Outcome	Percentage of youth who remained enrolled in services for at least six months	55%	50%	50%	70%

### Performance Measures Descriptions

<sup>1</sup> Numbers served in FY18 were extremely low due to contractor under performance. The program model has been redesigned and therefore numbers served in FY18 do not compare to those proposed for FY19 and in the future.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$95,517	\$0	\$101,324	\$0
Contractual Services	\$513,463	\$0	\$534,002	\$0
Materials & Supplies	\$33	\$0	\$87	\$0
Internal Services	\$15,398	\$0	\$13,686	\$0
<b>Total GF/non-GF</b>	<b>\$624,411</b>	<b>\$0</b>	<b>\$649,099</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$624,411</b>		<b>\$649,099</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25135-19 YFS - Sex Trafficked Youth - Victims System of Care

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Changes to the federal immigration landscape have created an environment of hardship and fear for our immigrant and refugee communities, creating increased barriers to housing, health, education and employment. Multnomah County has allocated one-time-only funds to increase the capacity of culturally specific providers in helping community members access immigration legal services and information as well as navigate related systems, thereby reducing barriers.

**Program Summary**

**ISSUE:** Multnomah County strives to promote and create a welcoming community that is safe, stable and thriving. Limited access to accurate immigration information and support has increased fear and hindered access to health and social services in immigrant and refugee communities that already face substantial barriers. When fewer families get health care, education or the assistance necessary to become safely housed or employed, it impacts the wellness of our entire community.

**PROGRAM GOAL:** The goal of the program is to ensure that immigrant and refugee families are able to access services by providing culturally specific assistance, addressing barriers to access and providing opportunities for legal information.

**PROGRAM ACTIVITY:** Three primary activities will happen in this program. First, provide increased capacity for navigation services and family support for immigrant and refugee families identified as being at risk by culturally specific agencies. Second, increase access to culturally specific and responsive information and education. And third, offer training and education opportunities for impacted communities on legal rights and legal services available in the community.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants engaged in individualized navigation services	N/A	300	370	370
Outcome	% of individuals and families reporting a reduction in barriers	N/A	N/A	40%	40%
Output	# of community trainings or workshops	N/A	18	20	20
Output	# of individuals and families receiving timely and accurate information, referral, education, services	N/A	530	570	570

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$250,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$250,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

When youth feel safe, have a sense of belonging, and their culture and choices are honored, they have positive academic and life outcomes. Promise Neighborhoods Initiative (PNI) agencies provide culturally specific, community-based services and supports for children of color age 12-17 and their families.

### Program Summary

**ISSUE:** Educational barriers for children and youth of color in Multnomah County are pervasive and persistent. Youth of color in our community experience disparate outcomes due to racism, systemic oppression, inter-generational trauma, and poverty. Investing in proven culturally responsive and culturally specific practices, in partnership with school districts and school personnel, works to eliminate these barriers.

**PROGRAM GOAL:** PNI brings together community experts to help school districts and community agencies build more culturally specific services for communities of color. PNI improves culturally responsive, specific, and relevant service strategies in our school districts so that children of color succeed academically. The Initiative is led by the United Way of the Columbia-Willamette, which serves as the Backbone Agency. Youth & Family Services funds both of these areas, and provides broad oversight with the initiative.

**PROGRAM ACTIVITY:** This initiative has two primary areas: 1) Backbone Agency services by the United Way; and 2) Culturally responsive, specific and relevant services using a collective impact model to increase school readiness and academic achievement for a successful adult transition. This is a coordinated approach which includes culturally specific and responsive organizations, school districts, County investments, and a strong Backbone Agency that provides project leadership, accountability, partnership development, and data and evaluation.

Additionally, there are one-on-one activities which include youth engagement, leadership development, homework support, college and career readiness. Group activities focus on cultural identity, financial literacy, after-school engagement, sports, recreation, and theater arts. Parent engagement ensures understanding the English Language Learner classes, financial literacy, and the public school environment so they can support their children. Individual youth supports and family engagement increases a sense of belonging and identity for youth, leading to stronger academic outcomes. The services of PNI are primarily provided in two school districts: Reynolds and David Douglas.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth served*	2203*	1000	1000	1000
Outcome	Percent students served who attend school regularly (are not chronically absent)	70%	80%	80%	80%
Output	Number of parents/legal guardians/regular caregivers served*	1156	700	700	700
Outcome	%parents/legal guardians/regular caregivers who are engaged w/ schools and monitoring progress	98%	75%	75%	75%

### Performance Measures Descriptions

\*Numbers served have exceeded targets for second year; in 2020 three this will be monitored and adjusted with contractors.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$2,150,440	\$0	\$2,150,440	\$0
<b>Total GF/non-GF</b>	<b>\$2,150,440</b>	<b>\$0</b>	<b>\$2,150,440</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,150,440</b>		<b>\$2,150,440</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25137-19 YFS - Promise Neighborhoods Initiative

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25138B  
**Program Characteristics:**

### Executive Summary

Youth who believe their home situation is unsafe and seek emergency shelter & supports need a system of care that helps them get off the streets and into stable housing with appropriate services. Runaway Youth Services provide a crisis line, emergency shelter, support services, family counseling and gender-specific transitional housing services for youth ages 12-17 who have run away or are at risk of running away. This current array of services does not include funding for the reception center. The Runaway Youth Services model is in a redesign process FY19 and FY 20.

### Program Summary

**ISSUE:** More than 500 youth run away in our community each year, due to a variety of factors including unsafe home environments, LGBTQ status, and mental health or addictions issues. Youth from communities of color are not accessing the current service system. Unaccompanied youth living on the streets are at high risk of rape, assault, and other trauma.

**PROGRAM GOAL:** The goal of the runaway youth system is to provide a safe place for runaway youth until they can reunite with family members, if possible, and to find appropriate foster care placement for those who cannot return home.

**PROGRAM ACTIVITY:** This current program is a collaboration among County Human Services, Community Justice, law enforcement, and Oregon Department of Human Services Child Welfare. Services include 1) A 24/7 youth and family crisis line that serves as a central access point for services. 2) Specialized shelter and emergency assistance provided in an 11-bed, co-ed group home with services focused on family reunification. Youth receive food, safety from the street, medical care, transportation, and case management. Shelter services operate within a 72-hour family reunification timeline. 3) Support Services/Case Management provide intake, assessment, individual service plans targeting family reunification, addiction treatment referrals, mental health counseling, and family mediation. 4) Gender Specific Transitional Housing provides two beds for girls in a group home setting. This FY20 program offer reduces funding by removing the reception center as a service due to not being utilized as designed.

During the latter half of FY19 and FY20, the Runaway Youth Service model will be under review and redesign with a community planning process, led by Youth & Family Services staff, en route to a competitive procurement process. The early phases of this process have included community input sessions, interviews with key stakeholders and partners, review of program performance data and research into best practice models in other communities. This review suggests gaps in current services, low shelter utilization, and lack of community awareness about how to access emergency shelter - in particular in communities of color. The Division's planning will result in a redesigned service model informed by the community and partners.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth and families served	132	125	125	125
Outcome	Percentage of youth served who return home or exit to other stable housing	70%	85%	85	85%

### Performance Measures Descriptions

\* Program model changing and number for FY20 is an estimate; will change with system redesign.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$841,214	\$100,000	\$571,181	\$100,000
<b>Total GF/non-GF</b>	<b>\$841,214</b>	<b>\$100,000</b>	<b>\$571,181</b>	<b>\$100,000</b>
<b>Program Total:</b>	<b>\$941,214</b>		<b>\$671,181</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$100,000	\$0	\$100,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>	<b>\$100,000</b>

Explanation of Revenues

\$100,000 - OCCF Youth Investment

Significant Program Changes

Last Year this program was: FY 2019: 25138-19 YFS - Runaway Youth Services (RYS)

The reception center component of this program has been removed and is submitted as a separate Program Offer 25138B.



**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25138A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This one- time-only program offer restores an on-site reception/access function into emergency shelter for youth ages 12-17 who have run away, or who are at risk of running away. This request retains continuity with the current services provided while DCHS continues to work with community and partner organizations in completing a redesign process of the reception center program and the other system of runaway youth services for FY20.

**Program Summary**

**ISSUE:** More than 500 youth run away in our community each year, due to factors including unsafe home environments, LGBTQ status, and mental health or addictions issues. Unaccompanied youth living on the streets are at high risk of rape, assault, and other trauma. Youth from communities of color are not accessing the current service system and overall the current system is underutilized.

**PROGRAM GOAL:** Provide a specific location for 24/7 on-site access to emergency shelter for youth who are seeking emergency shelter. This approach allows youth, their families, community agencies, schools and law enforcement to assist youth to be in a safe location temporarily.

**PROGRAM ACTIVITY:** The Juvenile Reception Center (JRC) is a location where law enforcement officials may drop off youth (under the age of 18) who have committed status offenses, such as curfew violation and truancy, and other non-violent misdemeanors, as an alternative to detention. The center is a safe location where youth can await reunification with a trusted familial adult or other legal guardian. The JRC has a two-pronged goal of decreasing the harm that comes from a youth's exposure to detention for those who committed non-detainable offenses, and connecting youth and families with services to prevent further penetration into the juvenile justice system.

During the latter half of FY19 and FY20, the entire runaway youth service model is under review with a community planning process, led by Youth & Family Services staff, en route to a competitive procurement process. The early phases of this process have included community input sessions, interviews with key stakeholders and partners, review of program performance data, and research into similar models in other communities. This review suggests gaps in current services, low shelter utilization, and lack of community awareness about how to access emergency shelter - in particular for communities of color. The Division's planning will result in a redesigned service model informed by the community and partners.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth and families served	121	200	200	200
Outcome	Percentage of youth served who return home or exit to other stable housing	70	85	85	85

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$303,682	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$303,682</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$303,682</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

All families can meet their full potential to become economically stable through access to the supports and benefits they need. Recognizing that families are the experts in their own lives, the Multnomah Stability Initiative (MSI) offers a menu of services focused on meeting family goals around stability and income creation. MSI is part of the County's anti-poverty/prosperity initiative designed to assist low-income households in gaining the skills necessary to achieve increased income and future prosperity, as well as to address the root causes of societal poverty.

### Program Summary

**ISSUE:** Families experiencing poverty often struggle to find the services and support they need to achieve economic stability.

**PROGRAM GOAL:** MSI addresses the need for flexible service interventions so that families facing economic challenges can achieve stability. The goals of MSI are aligned with six domains: income, housing, social capital, health and wellness, thriving children, and education.

**PROGRAM ACTIVITY:** Services are delivered by contracted partner staff using an Assertive Engagement approach, which recognizes the individual as the expert in their own life and instills hope. MSI offers families a selection of services and interventions to choose from. Families identify their interests, strengths, choices, and goals and are matched with resources and services that meet their expressed goals.

The activities of the MSI program include assisting families in stabilizing and securing housing; providing access to short-term rent assistance; making connections to legal clinic services; providing Assertive Engagement case management; connecting families to natural supports in the community like support groups and school programs; connecting people to job training, income and asset creation, and flex funds.

This offer includes MSI case management, the legal clinic, and related economic stability programs.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households served in MSI case management	897	950	950	950
Outcome	Percentage of households served that remain in permanent housing six months after exit	91%	80%	80%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$23,460	\$100,000	\$65,556	\$87,288
Contractual Services	\$2,660,516	\$764,478	\$2,758,350	\$726,496
Materials & Supplies	\$40,135	\$0	\$45,549	\$4,272
Internal Services	\$19,016	\$13,000	\$4,953	\$22,742
<b>Total GF/non-GF</b>	<b>\$2,743,127</b>	<b>\$877,478</b>	<b>\$2,874,408</b>	<b>\$840,798</b>
<b>Program Total:</b>	<b>\$3,620,605</b>		<b>\$3,715,206</b>	
<b>Program FTE</b>	0.20	0.83	0.50	0.68

Program Revenues				
Intergovernmental	\$0	\$877,478	\$0	\$840,798
<b>Total Revenue</b>	<b>\$0</b>	<b>\$877,478</b>	<b>\$0</b>	<b>\$840,798</b>

Explanation of Revenues

\$840,798 - OHCS D Community Development Block Grant

Significant Program Changes

Last Year this program was: FY 2019: 25139A-19 YFS - Multnomah Stability Initiative (MSI)

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25139A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Families can become economically stable and meet their goals by accessing housing and economic opportunity. Legal barriers often serve as roadblocks to stability by preventing access to housing, employment, education, volunteerism and other opportunities. The Community Legal Clinic removes legal barriers to stability and opportunity through direct representation of County program participants.

**Program Summary**

**ISSUE:** Families experiencing poverty, especially families of color and people who experience discrimination and disproportionate contact with the criminal justice system, have legal barriers that prevent them from accessing housing, employment, education and other opportunities.

**PROGRAM GOAL:** The Community Legal Clinic works with participants to remove legal barriers to stability and opportunity through direct legal representation of County program participants.

**PROGRAM ACTIVITY:** Contracted legal services staff represent participants of Multnomah Stability Initiative (MSI), the Family Reunification Program (FUP) and other County programs in expungement, eviction, housing voucher hearings, reduction of fees and fines, drivers' license restoration, felony reduction, appeal of exclusions, gang designations and other legal barrier removal cases.

Attorneys work collaboratively with culturally specific case managers and County program staff to establish trust and receive referrals to no cost barrier screening. Screening can result in legal advice or representation as well as referral to expungement clinics or legal services days.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of participants engaged in service	NA	NA	NA	250
Outcome	Percentage of participants who experience barrier reduction	NA	NA	NA	80%
Output	Number of legal serviced provided to participants	NA	NA	NA	400

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$100,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Communities with safe, quality and affordable homes increase opportunities for residents to achieve economic stability. Community Development administers public resources to expand affordable housing and infrastructure in low and moderate income communities through the Federal Community Development Block Grant program.

**Program Summary**

**ISSUE:** Affordable housing and infrastructure in low and moderate income communities are insufficiently funded due to federal funding formulas. East Multnomah County, in particular, has limited resources to ensure access to affordable housing and sufficient infrastructure for public works projects.

**PROGRAM GOAL:** The goal of the Community Development program is to create opportunities for neighborhood revitalization, public services, and housing rehabilitation in East Multnomah County.

**PROGRAM ACTIVITY:** The Community Development Block Grant (CDBG) program includes the administration of the Community Development Block Grant. An advisory board, comprised of representatives of East Multnomah County cities and unincorporated areas outside of Portland and Gresham, makes policy and funding recommendations for Community Development Block Grant projects. The program is a collaboration between DCHS, the cities of Wood Village, Fairview, Troutdale, Maywood Park, and the community. The program also collaborates with Portland and Gresham on CDBG planning activities. The CDBG program also provides funding for public services and housing rehabilitation services for low- and moderate-income (LMI) households. Housing rehabilitation is offered to both LMI renters and homeowners to adapt housing for improved disabled access. Critical home repair services are also offered to LMI homeowners through CDBG funds.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of public works projects completed	2	1	1	1
Outcome	# housing units rehabilitated	33	30	30	30

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$96,658	\$41,366	\$123,671	\$19,403
Contractual Services	\$0	\$344,500	\$0	\$348,944
Materials & Supplies	\$3,465	\$0	\$7,987	\$0
Internal Services	\$15,398	\$5,918	\$13,909	\$2,833
<b>Total GF/non-GF</b>	<b>\$115,521</b>	<b>\$391,784</b>	<b>\$145,567</b>	<b>\$371,180</b>
<b>Program Total:</b>	<b>\$507,305</b>		<b>\$516,747</b>	
<b>Program FTE</b>	0.70	0.30	0.86	0.14

<b>Program Revenues</b>				
Intergovernmental	\$0	\$345,784	\$0	\$311,180
Other / Miscellaneous	\$0	\$10,000	\$0	\$10,000
Beginning Working Capital	\$0	\$36,000	\$0	\$50,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$391,784</b>	<b>\$0</b>	<b>\$371,180</b>

Explanation of Revenues

\$311,180 - HUD CDBG  
 \$50,000 - Beginning Working Capital  
 \$10,000 - Loan Repays

Significant Program Changes

Last Year this program was: FY 2019: 25140-19 YFS - Community Development



**Outreach**

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 25147  
**Program Characteristics:**

**Executive Summary**

As a community, we will be more successful when all of our residents are healthy and well-fed. The Supplemental Nutrition Assistance Program (SNAP) is one of the best resources to make this a reality. Participation in SNAP provides a better quality diet and nutritional intake for children and adults across their lifespan compared to people with low incomes who do not participate. The SNAP outreach program provides information, referral, and application assistance to households seeking SNAP benefits.

**Program Summary**

**ISSUE:** Oregon consistently ranks among the states with the highest percentage of people experiencing hunger and food insecurity. In March 2015, the Oregon Center for Public Policy (OCPP), reported that Oregon has one of the highest rates of SNAP usage as a percent of households in the country. The combination of high rent and low wages make it difficult for many families to afford food, having to choose between using their limited income on food or other essentials, including rent, medicine, clothing, and utilities.

**PROGRAM GOAL:** The goal of the SNAP Outreach program is to increase the number of eligible households participating in SNAP benefits so that individuals and families have food and nutrition for healthy living.

**PROGRAM ACTIVITY:** This program has two primary activity areas. First, outreach - the SNAP outreach program focuses its efforts on populations lower than average participation in the program. This includes the Latino, immigrant and refugee communities, and college-age students. The SNAP outreach program offers assistance to low-income households across other County departments and in many settings, including schools, colleges, local workforce offices, community events, and social service agencies. Program staff use community data to engage in tailored SNAP outreach at community sites to reach the targeted populations. They offer information about SNAP and other local, State and Federal benefit programs. Staff also engage online and in social media to provide information about SNAP benefits. The second activity area is assisting people to sign up for SNAP benefits. Staff walk through the online application process, respond to questions and address any barriers so that participants gain immediate access to SNAP benefits and are able to provide food for themselves and their families.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of consumers engaged through Outreach activities <sup>1</sup>	4360	3500	3000	3000
Outcome	Number of SNAP applications completed <sup>2</sup>	313	150	150	150

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$52,453	\$120,566	\$93,097	\$94,490
Materials & Supplies	\$982	\$6,500	\$6,875	\$0
Internal Services	\$21,710	\$27,633	\$14,059	\$13,795
<b>Total GF/non-GF</b>	<b>\$75,145</b>	<b>\$154,699</b>	<b>\$114,031</b>	<b>\$108,285</b>
<b>Program Total:</b>	<b>\$229,844</b>		<b>\$222,316</b>	
<b>Program FTE</b>	0.00	1.00	0.20	0.80

<b>Program Revenues</b>				
Intergovernmental	\$0	\$154,699	\$0	\$108,285
<b>Total Revenue</b>	<b>\$0</b>	<b>\$154,699</b>	<b>\$0</b>	<b>\$108,285</b>

**Explanation of Revenues**

\$108,285 - Oregon Supplemental Nutrition Asst Prog (SNAP)

**Significant Program Changes**

**Last Year this program was:** FY 2019: 25141-19 YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The County's current rental climate continues to be difficult for many residents. A combination of high rents, rent increases and low vacancies make finding and keeping units challenging for many renters. This offer seeks to identify ways to increase housing stability for renters by aligning renter services and evaluating options for increasing renter protections, particularly in unincorporated parts of Multnomah County.

**Program Summary**

**ISSUE:** Multnomah County is increasingly unaffordable to renters. Oregon's landlord-tenant law, in combination with a patchwork of local ordinances affecting rental properties, make it difficult for renters to understand and exercise their rights, and many renters fear reprisals from landlords if they voice concerns. This issue is particularly impactful in communities of color.

**PROGRAM GOAL:** The goal of the Renters Relations project in year one (FY19) was to identify opportunities that Multnomah County can consider in order to create a better environment for renters in Multnomah County, particularly in unincorporated areas of the County. Activities through aligning services, creating renter protections and ensuring that tenants are educated about programs and their renter's rights in the areas they live.

**PROGRAM ACTIVITY:** In the first year of this program, the project was staffed by 1.0 FTE limited duration Program Specialist. This staff person conducted an analysis of how the County can best support renters, through an array of information gathering and analysis activities. These included:

- cataloging current renter relations and renter protection efforts throughout the County;
- identifying ways to leverage resources and ways to better coordinate existing services;
- intentionally gathering input and experiences from those experiencing the rental crisis focusing on communities of color; and
- developing policy options for the Board of County Commissioners to consider.

In year two this project will be partially funded through October 2019 in order to finalize the policy recommendations for the Board's consideration.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of community based focus groups held*	N/A	6	8	2
Outcome	% of respondents who report they have been displaced due to rent increases or evictions (cause or no-cause)	N/A	90%	90%	90%

**Performance Measures Descriptions**

\*Both measures changed to better capture the work of the project: output - tenant education was not an activity of this position; and outcome - to capture survey respondents who report they have been displaced to to increased rent or evictions.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$110,694	\$0	\$52,763	\$0
Contractual Services	\$14,306	\$0	\$0	\$0
Materials & Supplies	\$0	\$0	\$87	\$0
Internal Services	\$0	\$0	\$13,020	\$0
<b>Total GF/non-GF</b>	<b>\$125,000</b>	<b>\$0</b>	<b>\$65,870</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$125,000</b>		<b>\$65,870</b>	
<b>Program FTE</b>	1.00	0.00	0.50	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25143-19 YFS - Renter Relations

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** Measure 5 Education

### Executive Summary

Schools Uniting Neighborhoods Community Schools (SUN CS) improve educational outcomes for all children and support family stability. SUN CS is focused on local decision-making, responding to the unique needs of each community and honoring their cultures and preferences. SUN CS are neighborhood hubs where the school and community partners come together to mobilize and strategically organize resources to support children and families.

### Program Summary

**ISSUE:** Low educational attainment rates, high unemployment, hunger and poor health outcomes continue in Multnomah County. Oregon has the third-lowest graduation rate in the country, with significant disparities for students of color. This data is mirrored in Multnomah County. The barriers facing students are complex and reach far beyond the capacity and mission of schools. Addressing these barriers to learning and family stability requires support from across the community – including the County, the City of Portland and the Oregon Department of Human Services.

**PROGRAM GOAL:** The SUN Community Schools' goal is for school and community partners to align efforts to collectively increase educational success. Key results include consistent school attendance, credit attainment, and high school graduation. A 2014 Child Trends study showed that integrated student supports, such as SUN community schools, contribute to student academic progress and are grounded in research on youth development as well as empirical research on factors that promote educational success (such as opportunities for extended learning and academic support, homelessness and family engagement).

**PROGRAM ACTIVITY:** Funding supports 84 of the 90 SUN schools in Multnomah County, with the remaining schools funded by Portland Children's Levy and 21st Century Learning Center grants. These sites range from Kindergarten to 12th grade and provide programming in three main areas 1) Educational support and skill development for children and families (examples: academic classes such as Science Club, homework assistance, tutoring, mentoring, service learning, post-secondary planning, English as a Second Language, parenting, financial literacy) 2) Cultural and academic enrichment (examples: recreation, art, music, technology education) 3) Student and Family Support services, including links to basic needs, and health and mental health services; community building; and family leadership development. SUN CS each have an on-site site manager who manages programs, coordinates and aligns partners, develops systems and engages youth, family, and community members.

Multnomah County DCHS manages the SUN CS nationally recognized model, which is a collaboration with the City of Portland, six school districts, nonprofits, and the Oregon Department of Human Services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of children (ages 5-18) served <sup>1</sup>	22,393	16,000	16,000	16,000
Outcome	Percent of 9th graders who earn 6 credits and are on target to graduate <sup>2</sup>	76%	75%	75%	75%
Outcome	Percent who attend school consistently (more than 90% of days) <sup>2</sup>	87%	90%	90%	90%

### Performance Measures Descriptions

<sup>1</sup> Outputs reflect the annual number served. Over-performance by contractors is not projected.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold; 9,711 children participated at this level last year.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$329,502	\$0	\$350,109	\$0
Contractual Services	\$6,211,472	\$2,000,508	\$6,375,761	\$2,151,636
Materials & Supplies	\$17,695	\$0	\$27,281	\$0
Internal Services	\$49,307	\$0	\$43,938	\$0
<b>Total GF/non-GF</b>	<b>\$6,607,976</b>	<b>\$2,000,508</b>	<b>\$6,797,089</b>	<b>\$2,151,636</b>
<b>Program Total:</b>	<b>\$8,608,484</b>		<b>\$8,948,725</b>	
<b>Program FTE</b>	3.00	0.00	3.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,000,508	\$0	\$2,151,636
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,000,508</b>	<b>\$0</b>	<b>\$2,151,636</b>

Explanation of Revenues

- \$674,534 - City of Portland Parks & Recreation
- \$667,583 - Portland Public Schools SUN Community School Support
- \$301,364 - Reynolds School District
- \$245,725 - David Douglas School District
- \$158,352 - Gresham Barlow School District
- \$104,078 - Parkrose School District

Significant Program Changes

Last Year this program was: FY 2019: 25145A-19 YFS - SUN Community Schools

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Child & Family Hunger Relief program supports all children to reach their full potential by increasing food security and improving access to fresh and healthy foods. Children must have their basic needs met to be ready and able to learn. The program works with SUN Community Schools, school districts, and community partners to increase the number of meals served to hungry children and families and to assist in meeting families' food needs.

### Program Summary

**ISSUE:** Food insecurity and lack of access to fresh and healthy foods are significant barriers to children's health and learning in our community. Despite the improving economy, our state and county continue to struggle with unemployment and a high cost of living. Comparing the most recent period (2013-15) to the early years of the recovery (2010-12), food insecurity in Oregon spiked 18.4% - the highest among all states. Despite Oregon's high hunger rate, millions of dollars in available federal food funding for children goes untapped, and this partnership aims to increase the use of Federal funds.

**PROGRAM GOAL:** The program's goals are to reduce child and family food insecurity and hunger through hunger relief programs and strengthening County partnerships in hunger relief policy and programs. Healthy nutrition is vital to brain development and learning. SUN Community Schools are designed to act as vehicles for delivering services to children and families in an easily accessible and non-stigmatizing environment. This offer capitalizes on SUN's community-based capacity by 1) providing food, including fresh and healthy choices, through school-based food pantries and Free Food Markets monthly fresh produce distributions and 2) increasing the number of meals served to hungry children and their families during summer. This program provided more than 1.4 million meals to vulnerable communities last year.

**PROGRAM ACTIVITY:** The program includes summer meals, emergency food programs, and the Multnomah Child Hunger Coalition. Summer meal support consists of staffing at 16 SUN CS and three County libraries during the summer to serve meals for 8-12 weeks in underserved communities in Mid and East County. Food assistance programs include school-based food pantries at 12 SUN CS sites and Free Food Markets produce distributions at five sites, in partnership with the Oregon Food Bank. The Coalition leverages community partnerships to increase food security and access to healthy and fresh foods, with a focus on culturally specific populations. Program work addresses related policies and increases participation in federal nutrition programs. The program is a partnership with Oregon Food Bank, six school districts, Portland Parks and Recreation, Multnomah County Library, Portland Children's Levy and Partners for a Hunger-Free Oregon. The partnership leverages nearly \$2.6 million in federal and local resources including USDA meal reimbursement, private and corporate donations, and gleaned food.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of meals provided to children and families <sup>1</sup>	1,408,603	780,000	780,000	780,000
Outcome	Retail \$ equivalent for every \$1 County General Fund invested in pantries	\$13.40	\$8	\$8	\$8

### Performance Measures Descriptions

<sup>1</sup> # of meals includes meals served through extended weeks of summer meals program, emergency food pantries, and Free Food Markets fresh produce to families.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$130,398	\$0	\$124,213	\$0
Contractual Services	\$270,967	\$0	\$281,806	\$0
Materials & Supplies	\$7,865	\$0	\$1,737	\$0
Internal Services	\$15,934	\$0	\$13,993	\$0
<b>Total GF/non-GF</b>	<b>\$425,164</b>	<b>\$0</b>	<b>\$421,749</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$425,164</b>		<b>\$421,749</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25147-19 YFS - Child & Family Hunger Relief



**Department:** County Human Services      **Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

The SUN Youth Advocacy (SYA) Program increases opportunity and educational success through youth development, socio-emotional and academic supports. When youth feel safe, have a sense of belonging and their culture and choices are honored, they achieve better outcomes. SYA provides year-round, school-linked, and culturally-specific supports to youth and their families, with a focus on students experiencing the greatest educational barriers – those living in poverty, students of color, immigrants, and refugees.

### Program Summary

**ISSUE:** For too many children and their families, income levels and the color of their skin impact the educational opportunities they have. Low educational attainment rates, high unemployment, hunger and poor health outcomes continue in Multnomah County and threaten our future as a thriving community. Oregon has the third-lowest graduation rate in the country, with significant disparities for students of color. In Multnomah County, whites have the highest rate of high school completion (70%) compared to communities of color (30%).

**PROGRAM GOAL:** SYA goals include increasing the sense of safety, belonging and positive cultural identity, which contributes to the key results of consistent school attendance, credit attainment and graduation for all students, and closing achievement gaps. Research on dropout prevention and improving educational outcomes for students of color shows that the presence of a positive relationship with a supportive adult (mentoring) and out of school opportunities are effective strategies for promoting graduation. Youth Advocacy services that meet basic needs allow youth to focus on school and provide their caregivers with the resources to support educational success. Increased access to social services and additional learning opportunities outside of, but connected to the classroom, are promising practices for reducing the achievement gap. The Youth Advocacy Program provides this link in schools and in the community.

**PROGRAM ACTIVITY:** Advocates support and mentor youth, building a strong supportive relationship with them through intensive individual support. Key services include case management with a focus on academic and life goals; advocacy in disciplinary and educational meetings; skill-building groups; academic support activities such as tutoring, mentoring, reading club, gender-specific groups, and conflict resolution classes; and parent outreach/engagement. Youth advocates work in collaboration with SUN Community Schools and other school personnel towards youth and family success. Participants in the Youth Advocacy Program are at risk for academic failure due to poor attendance, failing grades, language barriers, family instability, and school disproportionate discipline. Ninety-five percent of youth served are youth of color or from a culturally specific community. Youth Advocacy targets six specific populations of youth and families of color: African American, African Immigrant, Asian Pacific Islander, Latino, Native American, and Slavic.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of students (ages 6-18) served	1641	1420	1420	1420
Outcome	% who consistently attend school (90% or more) <sup>1</sup>	73%	77%	77%	77%
Outcome	% of 9th graders who earn 6 credits and are on target to graduate <sup>1</sup>	84%	65%	65%	65%

### Performance Measures Descriptions

<sup>1</sup>Outcomes are analyzed for students who participate at a level at which outcomes can be correlated to participation (case management for 45 days or more with at least 15 hours of service). 619 youth participated at this level last year.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$118,351	\$0	\$113,302	\$0
Contractual Services	\$2,352,763	\$200,000	\$2,431,874	\$200,000
Materials & Supplies	\$16,265	\$0	\$6,172	\$0
Internal Services	\$15,384	\$0	\$13,680	\$0
<b>Total GF/non-GF</b>	<b>\$2,502,763</b>	<b>\$200,000</b>	<b>\$2,565,028</b>	<b>\$200,000</b>
<b>Program Total:</b>	<b>\$2,702,763</b>		<b>\$2,765,028</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$200,000	\$0	\$200,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$200,000</b>	<b>\$0</b>	<b>\$200,000</b>

Explanation of Revenues

\$200,000 - OCCF-Youth Investment

Significant Program Changes

Last Year this program was: FY 2019: 25149-19 YFS - SUN Youth Advocacy Program

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Parent Child Development Services (PCDS) removes barriers for families so that children are ready for kindergarten and get a strong start to their education. PCDS recognizes that parents are a child's first teachers and services are reflective of and responsive to cultural values and norms. Core services include home visiting and parent child playgroups. PCDS is one of the early childhood programs within the SUN Service System.

### Program Summary

**ISSUE:** Families with low incomes, families of color, and immigrants and refugees face barriers and have fewer opportunities to participate in services that support parenting knowledge and healthy child development. This contributes significantly to disparities in kindergarten readiness levels and, ultimately, in school success. Multnomah County has 34,000 children under the age of six in families with low incomes.

**PROGRAM GOAL:** PCDS's goals are to improve positive parenting skills, ensure the healthy development of young children, and increase kindergarten readiness for families with children under the age of six. The program utilizes the evidence-based Parents As Teachers (PAT) curriculum which has been proven to produce the results that PCDS seeks.

**PROGRAM ACTIVITY:** PCDS creates opportunities for parents to interact with their children in mentored settings with child development specialists. Specific services include home visits that focus on parenting education, age-appropriate parent-child playgroups, support services, developmental screening, immunization status checks and follow up and access to other social and health services. The Ages and Stages child development screening tool is used to determine the developmental stage. Children who do not meet the appropriate stage for their age are referred for intervention services. PCDS services are delivered in families' homes, communities and schools.

In recent years, the program has made several changes to improve outcomes, including engaging families when their children are younger, increasing the duration of service and the number of home visits families receive in the first year, developing a new parent survey to understand impact; and intentionally connecting families to appropriate preschool or Head Start programs to strengthen children's readiness for kindergarten.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of children served	586	641	641	641
Outcome	% of children up to date on immunizations at exit	98%	95%	95%	95%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$106,708	\$0	\$101,324	\$0
Contractual Services	\$1,415,052	\$349,822	\$1,456,654	\$334,632
Materials & Supplies	\$765	\$0	\$7,572	\$0
Internal Services	\$15,417	\$0	\$14,075	\$0
<b>Total GF/non-GF</b>	<b>\$1,537,942</b>	<b>\$349,822</b>	<b>\$1,579,625</b>	<b>\$334,632</b>
<b>Program Total:</b>	<b>\$1,887,764</b>		<b>\$1,914,257</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$228,298	\$0	\$228,298
Other / Miscellaneous	\$0	\$121,524	\$0	\$106,334
<b>Total Revenue</b>	<b>\$0</b>	<b>\$349,822</b>	<b>\$0</b>	<b>\$334,632</b>

Explanation of Revenues

\$228,298 - OCCF Federal Family Preservation  
 \$106,334 - United Way Ready for School

Significant Program Changes

Last Year this program was: FY 2019: 25151-19 YFS - SUN Parent & Child Development Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Early Kindergarten Transition (EKT) program prepares entering kindergarteners and their parents so that they successfully transition into school and attend regularly, improving their educational success by ensuring a strong start. EKT recognizes that parents are a child's first teachers and services are reflective of and responsive to cultural values and norms. EKT is a three-week summer program to engage entering kindergartners, who have had little to no preschool experience, and their parents/caregivers.

**Program Summary**

**ISSUE:** In Multnomah County, 54% of kindergartners enter elementary school unprepared to be successful as defined by familiarity with classroom and school routines and behaviors, socio-emotional skills, and family engagement in school.

**PROGRAM GOAL:**

The program goals are to increase parental involvement in their children's learning, attendance in kindergarten, and success in school. EKT increases familiarity with school routines and staff develops socio-emotional skills in children and promotes family-school relationships. Research shows a strong correlation between successful kindergarten transition and overall success in elementary school for the child, their parent/caregiver, the kindergarten teacher, and other students in the class. Children who had no early childhood education experience were one and a half times more likely to be chronically absent during kindergarten compared to those enrolled in EKT.

**PROGRAM ACTIVITY:**

EKT is a school-based summer program with two core components: 1) Kindergarten class time for children led by a kindergarten teacher and 2) Family engagement activities that include a facilitated parent/caregiver group and other activities intended to promote positive family-school relationships, including following up with participating families after the start of the school year. The program specifically focuses on recruiting children of color and English Language Learners who have not had prior preschool experience so that they will be more successful in school.

EKT is a partnership with Early Learning Multnomah across six school districts, SUN Community School Lead Agencies, Portland State University (PSU), the SUN Service System and Multnomah County Library to support the successful transition into kindergarten. Research by PSU has fostered a continuous improvement approach to study the program elements during implementation and make adjustments to the program model in the subsequent year to be more effective.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of children who participate in summer Early Kindergarten Transition.	736 <sup>1</sup>	810	743	810
Outcome	Percent of parents who report comfort with activities they can engage in at home to support their child in school.	99%	90%	90%	90%

**Performance Measures Descriptions**

<sup>1</sup> FY19 estimate and FY20 offer target numbers reflect the consistent participation of 18 children per classroom, with 45 in FY19.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$109,585	\$0	\$119,144	\$0
Contractual Services	\$243,564	\$73,951	\$252,888	\$75,535
Materials & Supplies	\$3,005	\$0	\$7,053	\$0
Internal Services	\$15,635	\$0	\$13,784	\$0
<b>Total GF/non-GF</b>	<b>\$371,789</b>	<b>\$73,951</b>	<b>\$392,869</b>	<b>\$75,535</b>
<b>Program Total:</b>	<b>\$445,740</b>		<b>\$468,404</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$73,951	\$0	\$75,535
<b>Total Revenue</b>	<b>\$0</b>	<b>\$73,951</b>	<b>\$0</b>	<b>\$75,535</b>

Explanation of Revenues

\$75,535 - Portland Public Schools SUN Community School Support

Significant Program Changes

Last Year this program was: FY 2019: 25152-19 YFS - Early Kindergarten Transition Program

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** One-Time-Only Request

### Executive Summary

The Preschool for All Task Force began meeting in September of 2018 to examine ways to expand preschool access for 3 and 4 year olds in Multnomah County. This work has brought together over 50 organizations, representing experts from early education, K-12, business, philanthropy and parents. The Task Force will conclude its work and produce a report in July 2019. Renewed funding will support the next phase of this work, including further analyses of cost modeling, infrastructure needs, and staff time to support community outreach and coalition building.

### Program Summary

**ISSUE:** Healthy child development is foundational to our community's overall health, well-being, and vibrancy. Research shows that over 80 percent of a child's brain is developed by the time they've reached age 5, and that investing early in a child's development can significantly reduce the opportunity gap in education, chance of entering the criminal justice system, need for remedial education, and other types of costly interventions. In Multnomah County, there are approximately 64,000 children under the age of 6, and about 19,000 3 and 4 year olds (preschool aged children). One of the most effective returns on investments a community can make is in early learning programs. These investments decrease systemic inequities and disparities between children and allow for needed interventions to begin as early as possible. Research shows that access to high quality preschool can ensure that children are ready to learn when they enter kindergarten, and then stay on track throughout their education.

**PROGRAM GOAL:** Building on the work completed by the Preschool for All Task Force in 2018-2019, the next phase includes conducting further analysis on cost, revenue generation, and implementation needs. This funding will also support DCHS staff time to engage in community outreach and education about the work of the Task Force to build a coalition around expanding preschool access in Multnomah County.

**PROGRAM ACTIVITIES:** The Preschool for All Task Force has significant momentum and strong collaboration with over 50 organizations in the community. The report completed by the Task Force will outline recommendations on a preschool program model, curriculum, evaluation standards, teacher credentials and compensation, infrastructure planning, finance and administrative oversight. Ongoing funding allows for the continued engagement of high level leaders, further analyses that are needed for the next phase of this project as implementation becomes more feasible, and further engagement and outreach to the broader community on the key recommendations.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of outreach and education activities to share information about the recommendation	N/A	N/A	N/A	12
Outcome	Detailed outline of implementation plan informed by extensive community input.	N/A	N/A	N/A	1

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$50,000	\$0
Contractual Services	\$100,000	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$100,000</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$100,000</b>		<b>\$100,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was:



**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Sexual & Gender Minority Youth Services (SGMYS) program improves safety, educational success, and quality of life for sexual and gender minority youth. The program offers counseling, skill building, and support services to sexual and gender minority youth as well as technical assistance and training to the SUN Service System, school and other direct service staff so that they may work more effectively with sexual and gender minority youth.

**Program Summary**

**ISSUE:** Sexual and gender minority youth (SGMY) experience discrimination and their safety is often at risk due to violence and harassment. SGMY are more likely to experience homelessness and poverty, are disproportionately represented in the juvenile justice system, and are three times more likely to attempt suicide compared to their non-SGM peers. Forty-five percent of transgender people ages 18 to 24 have attempted suicide.

**PROGRAM GOAL:** The program increases school retention and success for students who experience significant discrimination, hostility, bullying and other violence in the community, in schools, and often in their homes. Research in a recent report from the Center for American Progress demonstrates the negative outcomes experienced by sexual and gender minority youth and the importance of culturally appropriate services to this population. In many schools, hostile environments push SGM students out of the classroom.

**PROGRAM ACTIVITY:** The SGMYS program utilizes two primary strategies: 1) providing direct services and a safe and supportive space at the Sexual Minority Youth Resource Center (SMYRC), where sexual and gender minority youth feel comfortable and participate in supportive services that reflect their unique needs (70% of the program) and 2) enhancing the understanding and skill levels of community providers through training and consultation so that they may provide competent and relevant services to sexual and gender minority youth (30% of the program).

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth who participate in case management	113	75	75	75
Outcome	Percent of youth who remain in or re-enroll in school	67%	75%	75%	75%
Output	# of community provider and school staff trained	440	300	300	300
Outcome	% of training participants who report an increase in knowledge of SMGY issues/cultural competency	83%	85%	85%	85%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$292,430	\$0	\$304,127	\$0
<b>Total GF/non-GF</b>	<b>\$292,430</b>	<b>\$0</b>	<b>\$304,127</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$292,430</b>		<b>\$304,127</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25155-19 YFS - Sexual & Gender Minority Youth Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Bienestar de la Familia is a social service program that promotes the well-being and advancement of Latino and Somali children and families as well as other under-served groups in the Cully neighborhood and across Multnomah County. Bienestar provides access to services and opportunities that are culturally specific and responsive to the needs of this community.

### Program Summary

**ISSUE:** The Latino and Somali communities, many of whom are immigrants and refugees, experience significant social and economic barriers to family stability and success. Bienestar de la Familia, a culturally responsive social service program, addresses these barriers.

**PROGRAM GOAL:** The goal of Bienestar de la Familia is to ensure effective access to social services for the Latino and Somali communities. Services are aimed at reducing poverty; promoting family prosperity, educational success, and housing stability; reducing substance abuse or achieving a substance-free life; and assisting people with mental illness in leading more productive lives.

**PROGRAM ACTIVITY:** Bienestar provides access to a range of services. Staff provide case management, mental health assessment and counseling, alcohol and drug counseling and prevention, service linkage and coordination, nutrition resources, energy assistance, information and referral, employment assistance, school support, and advocacy to help address families' needs ranging from basic to crisis. Other activities include parent education and support groups; a weekly Women's and Men's support group; Incredible Years, an evidenced-based parenting education program; and energy and weatherization workshops. The "Mercado" Harvest Share, in partnership with the Oregon Food Bank, Franz Bakery, and the Northeast Emergency Food Program make fresh food available to households living on a fixed or low income, on a monthly basis.

On-site partnerships at Bienestar deepen service connections. SNAP outreach staff enable families to immediately sign up for SNAP benefits. Adult Protective Services staff from the Aging, Disability and Veteran's Services Division work directly with the growing population of older adults that seek support from Bienestar. Finally, Metropolitan Public Defenders and Immigration Counseling Services provide legal services to a large community of immigrant and refugees in the area. Bienestar has a Community Advisory Council that engages community members in strategic planning for the Program and is focused on guiding Bienestar to meet the needs of the diverse community.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households served <sup>1</sup>	1508	1,500	1,500	1,500
Outcome	% of clients who reported that services they received improved their situation	100%	85%	85%	85%
Output	Number of families who receive food to meet basic needs	1632	1600	1,600	1,600

### Performance Measures Descriptions

<sup>1</sup> This number includes direct services at Bienestar: basic needs, anti-poverty, parenting, youth services, rental and housing stability, mental health & drug and alcohol services.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$858,082	\$0	\$910,176	\$98,863
Contractual Services	\$16,500	\$0	\$16,500	\$0
Materials & Supplies	\$32,872	\$0	\$29,810	\$0
Internal Services	\$162,797	\$0	\$198,570	\$14,434
<b>Total GF/non-GF</b>	<b>\$1,070,251</b>	<b>\$0</b>	<b>\$1,155,056</b>	<b>\$113,297</b>
<b>Program Total:</b>	<b>\$1,070,251</b>		<b>\$1,268,353</b>	
<b>Program FTE</b>	7.60	0.00	7.60	1.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$113,297
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$113,297</b>

Explanation of Revenues

\$113,297 - OHCSO Emergency Housing Assistance

Significant Program Changes

Last Year this program was: FY 2019: 25156-19 YFS - Bienestar Social Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

In Multnomah County we want every child to be prepared to succeed in school and life, regardless of race, ethnicity or income. Youth & Family Services develop services and activities that support the kindergarten to school transition in SUN Community Schools.

### Program Summary

**ISSUE:** In Multnomah County, 54% of children are at risk of arriving at kindergarten not prepared to succeed in school. Early childhood service and education systems, funding and services are not aligned and coordinated in such a way that families have the culturally appropriate supports they need to support their children as they transition into kindergarten.

**PROGRAM GOAL:** The goal of the Early Learning Family and School Transition supports is to create opportunities for children to more successfully transition to kindergarten - and to meaningfully involve their parent/caregiver in that transition. These supports are built into the SUN Community School where staff have trusted relationships and deep connections to the community.

**PROGRAM ACTIVITY:** This program area has two primary components: kindergarten teacher home visits and parent engagement prior to and during the early elementary school years (also known as Prenatal to third grade, or P-3).

The Kindergarten Teacher Family Visit project creates opportunities for kindergarten teachers to visit homes before children enter school. This builds parent and teacher connection early on so that parents feel more comfortable in the school environment and teachers understand the parent/caregiver's hopes for their child. The Kindergarten Partnership & Innovation grant from Early Learning Multnomah supports P-3 Schools, which provides parent engagement at 8 SUN Community Schools, connecting families to school before kindergarten and fostering parent leadership. This builds on research showing that when schools actively engage and connect parents in culturally appropriate ways, their children do better in school. These strategies link partners from the early learning and K-12 systems so that all partners are building a smooth transition from early learning to early grades.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	#parents/caregivers who participate in kindergarten readiness or parent leadership programming <sup>1</sup>	547	600	600	600
Outcome	% of participating parents that report that they feel comfortable or welcome at the school <sup>1</sup>	98%	80%	80%	80%

### Performance Measures Descriptions

<sup>1</sup> Data collected via survey with parent/caregivers.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$16,606	\$43,745	\$15,921	\$47,762
Contractual Services	\$16,261	\$740,124	\$16,911	\$730,031
Materials & Supplies	\$17	\$21,078	\$860	\$226
Internal Services	\$8,023	\$6,937	\$7,258	\$6,973
<b>Total GF/non-GF</b>	<b>\$40,907</b>	<b>\$811,884</b>	<b>\$40,950</b>	<b>\$784,992</b>
<b>Program Total:</b>	<b>\$852,791</b>		<b>\$825,942</b>	
<b>Program FTE</b>	0.14	0.36	0.13	0.38

<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$811,884	\$0	\$784,992
<b>Total Revenue</b>	<b>\$0</b>	<b>\$811,884</b>	<b>\$0</b>	<b>\$784,992</b>

**Explanation of Revenues**

\$681,722 - Kindergarten Innovation Grant  
 \$103,270 - United Way Early Learning Grant

**Significant Program Changes**

**Last Year this program was:** FY 2019: 25158-19 YFS - Early Learning Family and School Transition

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Administration      **Program Offer Stage:** As Adopted  
**Related Programs:** 25118  
**Program Characteristics:**

### Executive Summary

Understanding the impact of public and partner investments is an important aspect of public stewardship. The data and evaluation team performs tasks so that we understand the impacts of programs from Youth and Family Services and the Joint Office of Homeless Services. Activities include analyzing data, conducting evaluations, training for data entry end users, creating tools, writing queries to develop systems and program reports, and writing reports, and completing funder required reports.

### Program Summary

**ISSUE:** The Data and Evaluation team is responsible for managing and overseeing complex data collection, data analysis and evaluation efforts for over 26 unique programs funded by Youth and Family Services, the Joint Office of Homeless Services and over forty additional funding sources.

**PROGRAM GOALS:** The goals of the data and evaluation team are twofold. One, to use adult learning best practices to train end users to both enter data accurately into ServicePoint and to run reports to review and analyze this data. Second, to develop and conduct evaluation activities to demonstrate programmatic results and to identify areas for improvement in service delivery.

**PROGRAM ACTIVITY:** The Data and Evaluation team staff provide a variety of critical supports for data collection, analysis and reporting on the 26 distinct program areas and services funded through the Youth & Family Service Division and the Joint Office of Homeless Services. This allows the Divisions to understand the impact of program services and consider areas for improvement and program development.

This team provides an array of critical tasks in pursuit of our stated goals, including training and technical assistance for the 300 end-users who enter data into ServicePoint; writing queries for ad hoc and standard reports that pull data from ServicePoint; developing workflow and training materials (for entry and report writing); submitting all funder-required reports; and data analysis and evaluation activities that provide comprehensive reports about participation. Staff from this team also participate in committees both inside and outside of the Division and Department to support stronger, more accurate data quality, research and evaluation activities, and partnership across jurisdictions through data and evaluation. Evaluation staff participates in the DCHS Performance Management Council that focuses, in part, on performance management efforts that are consistent across the Department, and that tie required activities to population-level results.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of new end users trained to use ServicePoint & ART that support accurate data entry and report usage. <sup>1</sup>	156	150	150	150
Outcome	Percent of users who report satisfaction with YFS staff to resolve their issues using ServicePoint or ART? <sup>2</sup>	N/A	70%	70%	70%
Output	Number of performance management tools developed for YFS programs.	2	4	4	2

### Performance Measures Descriptions

<sup>1</sup>New measure for FY19, replacing previous measure (Number of contacts with ServicePoint & ART end users that support accurate data entry and report usage).

<sup>2</sup>Survey not administered in FY18.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,156,407	\$108,943	\$1,264,184	\$0
Contractual Services	\$0	\$0	\$119,367	\$0
Materials & Supplies	\$7,189	\$0	\$9,750	\$0
Internal Services	\$161,246	\$0	\$133,750	\$0
<b>Total GF/non-GF</b>	<b>\$1,324,842</b>	<b>\$108,943</b>	<b>\$1,527,051</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,433,785</b>		<b>\$1,527,051</b>	
<b>Program FTE</b>	10.03	0.77	10.80	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25160-19 YFS - Data and Evaluation Services



**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Family of Friends Mentoring matches low-income and at-risk youth with trained adult volunteers for long-term mentoring relationships. Through fun and safe activities in the community, mentors help youth build the social and emotional skills that are linked to academic success and a variety of other positive youth outcomes. Family of Friends Mentoring prioritizes its mentoring services for the growing youth population in East Multnomah County.

### Program Summary

**ISSUE:** Multnomah County and Oregon have unacceptably low graduation rates. Non-graduating students face poor job prospects. Evidence on cost-effective ways to improve graduation rates is still evolving but generally points to the need to increase adult-student interactions. Mentoring relationships between adults and youth is a proven way to support educational success.

**PROGRAM GOAL:** The program's goal is to improve educational success for students at risk of dropping out. Research shows that children with mentors are less likely to exhibit depressive symptoms, have higher self-esteem and have better attitudes towards school and learning.

**PROGRAM ACTIVITY:** The activities for this program include a partnership with the City of Gresham to support the full implementation of the Family of Friends program in Gresham, focusing on youth in East Multnomah County. This evidence-based program has families, couples and individuals serving as volunteer mentors for vulnerable young people. This program matches mentors with kids from low-income families that want extra support. Mentors commit to weekly visits for at least one year, and staff provide in-depth screening, training and coaching.

Youth are recruited from a variety of organizations, including SUN Community Schools in East County and school resource officers. The program has expanded this outreach to include youth living in the family shelter and with children whose parents are incarcerated. The partnership will create the opportunity for Family of Friends Mentors to engage in training opportunities provided through the Youth and Family Services Division, including: Assertive Engagement, Trauma Informed Practices and Domestic Violence trainings. These activities will strengthen the skill sets of the mentors and the youth-mentor relationship.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of students with mentors	19	12	12	12
Outcome	Percent of adult-youth matches that are successful at one year	75%	80%	80%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$25,000	\$0	\$25,000	\$0
<b>Total GF/non-GF</b>	<b>\$25,000</b>	<b>\$0</b>	<b>\$25,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$25,000</b>		<b>\$25,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 25162-19 YFS - Family of Friends Mentoring Project

### Department Overview

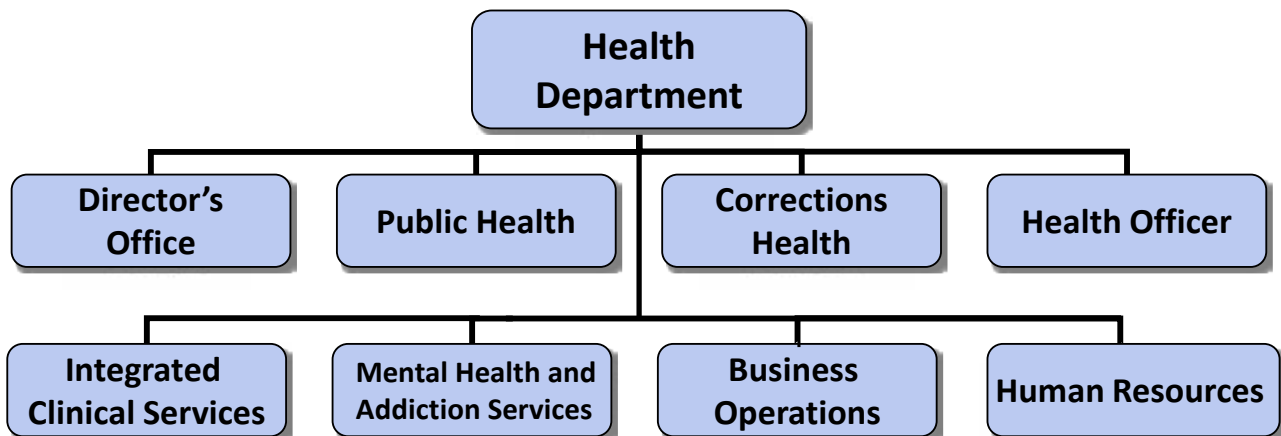
The Health Department’s vision ‘Healthy People in Healthy Communities’ guides our work.

The Department has six broad goals:

- 1) Effectively position Multnomah County Health Department as a trusted partner to state/local officials for assessment, policy development and long-range planning.
- 2) Develop a finance strategy to preserve critical services and support infrastructure for improved health outcomes.
- 3) Fundamentally change the way we do our work to challenge embedded internal and external structures that contribute to inequity.
- 4) Genuinely engage with communities and staff to drive positive changes.
- 5) Recruit, retain and promote a diverse, inclusive and high performing workforce.
- 6) Increase our effectiveness and reduce duplication across service areas.

To achieve these six goals, the Department uses these key strategies:

- Influence federal, state, and local officials to address community health priorities in planning, policy development, financing and legislation;
- Prioritize investments in programs and infrastructure that improve health outcomes and health equity;
- Integrate the preliminary steps of trauma-and equity-informed practices across our organization;
- Partner with our diverse communities to identify, evaluate, and communicate the health equity impacts of public policies;
- Include employee voice in strategy, policy, and decision-making;
- Develop a diversity-focused succession plan that recognizes and invests in the talent and potential of employees at all levels of our organization;
- Strengthen the skill of managers and supervisors to lead with intention, transparency and inclusion;
- Evaluate current processes and services to identify and address duplication;
- Leverage technology to drive innovation, efficiency and cost savings.



### Budget Overview

The FY 2020 Health Department Adopted budget is \$340.5 million, a 1.6% increase from the FY 2019 Adopted budget. General Fund expenditures, which make up \$151.1 million (44.4%) of the total, decreased by approximately \$1.2 million (1%). Medicaid and Federally Qualified Health Center (FQHC) Alternative Payment Method, Patient Centered Primary Care Home Program (PCPM) and other Medicaid specific revenues are recorded in the General Fund and account for \$50.7 million. The remainder of the Health budget (\$189.4 million) comes from Federal and State revenue, including grants, Medicaid, Medicare and other medical fees.

Facing declining resources and increasing personnel costs, the Adopted budget for the Health Department provides additional support to certain critical and mandated programs but reduces others. The Adopted budget for Corrections Health Division, which is funded exclusively by the General Fund, increased by just over \$4.1 million (21%) to address increasing costs for outside (hospital) medical care and accreditation requirements. In contrast, the Adopted budget for the Public Health Division decreased by \$2.8 million, reflecting reductions in Nurse Family Partnership program capacity, communicable disease services, and administrative support. In addition, the Adopted budget for Integrated Clinical Services, significantly reduced General Fund employees in response to flat or declining revenues.

The FY 2020 Health General Fund allocation includes \$1.7 million in new, ongoing funding in the following program offers:

Ambulance Services – Medical First Response (40004C)	\$95,000
Corrections Health MCDC Outsourced Medical (40050D)	\$750,000
Corrections Health MCIJ Outsourced Medical (40051D)	\$750,000
Office of Consumer Engagement (OCE) (40065B)	\$105,839

A list of programs funded one-time-only can be found on page 33 in the Budget Director’s Message.

Budget Trends	FY 2018	FY 2019	FY 2019	FY 2020	Difference
	Actual	Current	Adopted	Adopted	
		Estimate	Budget	Budget	
Staffing FTE	1,403.21	1,427.10	1,427.10	1,404.64	(22.46)
Personnel Services	\$163,780,011	\$174,669,120	\$178,833,310	\$188,104,697	\$9,271,387
Contractual Services	73,096,882	80,712,425	89,074,323	80,519,475	(8,554,848)
Materials & Supplies	22,531,001	21,733,239	22,162,072	24,914,768	2,752,696
Internal Services	40,583,139	43,492,893	44,397,607	46,201,226	1,803,619
Capital Outlay	<u>115,144</u>	<u>315,982</u>	<u>570,000</u>	<u>780,000</u>	<u>210,000</u>
<b>Total Costs</b>	<b>\$300,106,177</b>	<b>\$320,923,659</b>	<b>\$335,037,312</b>	<b>\$340,520,166</b>	<b>\$5,482,854</b>

\*Does not include cash transfers, contingencies or unappropriated balances. Due to the transition to a new ERP system, some services that were budgeted in Contractual Services or Materials & Supplies before FY 2020 are now in Internal Services.

## Successes and Challenges

The Department delivers critical services to a diverse population across our County including:

- Protecting the environmental health of our community including addressing lead in our water, inspecting public facilities, and stopping the spread of disease.
- Monitoring and treating communicable and sexually transmitted diseases.
- Promoting healthy behaviors, safe and healthy environments and social norms in Multnomah County particularly for people experiencing health disparities. Implementing a comprehensive five-year Community Health Improvement Plan to address racial and ethnic health disparities in Multnomah County.
- Providing health care and behavioral health care for all individuals housed in the county's two jails and one juvenile detention facility.
- Mental health crisis services, school based mental health and suicide prevention services available to the whole community.
- Managing specialized mental health services for the seriously mentally ill, with strategies to help mentally ill individuals in the criminal justice system.
- Coordinating the broad range of mental health and addiction services available to people living in Multnomah County insured by the Oregon Health Plan.
- Providing primary care, pharmacy, and dental care services provided for an economically vulnerable, racially and ethnically diverse patient population across seven primary care clinics, one HIV specialty primary care clinic, twelve Student Health Centers, and one dental clinic co-located at Central City Concern's Old Town Clinic

The Department faces significant funding challenges for the foreseeable future. After a period of health care expansion, federal funding is in question and state resources are flat or declining. While demand for mental health services remains high, our funding falls short of that demand.

Our Community Health Center (CHC) has responded to changes in the healthcare landscape. The CHC continues to innovate in order to meet the increasing needs and the changing demands of vulnerable communities, while also negotiating uncertain funding and ever changing federal and state policies.

Services to people held in our jails are mandated and are a critical part of our community safety net. Working in the jails is demanding and Corrections Health has consistently struggled to staff all positions. This results in mandatory overtime to assure adequate staffing. The cost of emergency room visits, laboratory tests, prescription drugs and hospital services continue to soar, placing additional stress on limited resources.

Funding for public health services is declining at a time when interest in addressing community-wide population health is rising. The Department will continue to focus on core public health services and reach out to community partners to build the community capacity to address public health needs.

### Diversity, Equity, and Inclusion

Along with the external-facing work that prioritizes culturally-specific programming, services, and language access, the Health Department continues to deepen our internal diversity, equity and inclusion commitment. We do this by funding and resourcing the work including hiring an Equity Engagement Strategist who supports and reports to the Equity & Inclusion Manager. Our Equity Engagement Strategists educates, consults and supports staff to increase awareness and skills around equity practices.

The Health Department office of Equity and Inclusion (OEI) leads and coordinates a representative 20-person Workforce Equity Strategic Plan (WESP) committee that meets monthly. This diverse WESP committee works in partnership with the Departmental Leadership Team (DLT) to ensure alignment and agreement on priorities and approach. They spent the past six months learning about WESP, building trust, engaging County leadership and making recommendations on the short term WESP implementation plan.

### Budget by Division

Division Name	FY 2020 General Fund	Other Funds	Total Division Cost	Total FTE
Director's Office	\$962,352	\$0	\$962,352	3.00
Business Operations	15,104,186	250,000	15,354,186	73.00
Corrections Health	23,661,002	0	23,661,002	115.15
Health Officer	4,286,701	2,218,375	6,505,076	29.80
Human Resources	3,830,603	0	3,830,603	23.75
Integrated Clinical Services	55,244,731	74,876,391	130,121,122	615.10
Mental Health and Addiction Services	19,384,122	84,217,831	103,601,953	274.41
Public Health	<u>28,621,362</u>	<u>27,862,510</u>	<u>56,483,872</u>	<u>270.43</u>
<b>Total Health Department</b>	<b>\$151,095,059</b>	<b>\$189,425,107</b>	<b>\$340,520,166</b>	<b>1404.64</b>

### Director's Office

The Director's Office is responsible for providing dynamic, thoughtful leadership in line with the Health Department's vision of Healthy People in Healthy Communities. As the Department's mission is to ensure, promote and protect the health of Multnomah County residents, the Director's Office intentionally sets its strategic direction to fulfill this mission. The Director's Office provides leadership to more than 1,400 employees and is responsible for over \$340 million in the state, county and federally funded programs and services.

The Director's Office is the primary liaison to federal, state, and county elected officials, and the County's department leadership. The Director works in partnership with the leaders in Business Operations, Public Health, Tri-County Health Officer, Mental Health and Addiction Services and Integrated Clinical Services, a public Community Health Center/Federally Qualified Health Center, to provide quality best practice services; engage in strategic partnerships; provide leadership and direction for public health issues; manage the stewardship of public resources; ensure continuous improvement of service delivery systems; ensure public health emergency preparedness, and employ a diverse and highly qualified workforce.

### Significant Changes

Health care transformation continues to be a major focus for the Director's office, an important component of which is monitoring and responding to changes in the funding environment, continuous quality improvement, and adaptation to meet the needs of the communities we serve.

Mental Health Medicaid funding is not sufficient to cover the costs of care. The department and the two other counties in our region worked together to create a regional behavioral health system for people with Medicaid insurance. We continue to work with Health Share of Oregon to increase rates and funding.

The Health Department continues to closely monitor both revenue and expense drivers, making adjustments in areas where those elements can be controlled. Other policy changes put revenue at risk, such as the federal government's strategy to severely restrict access to enrollment and eligibility to Medicaid coverage. The Department will continue to partner with the local and state health care system to mitigate potential impacts that limit access to services.

Internal priorities for the Director's Office include implementing the Workforce Equity Plan and continuing to build the capacity of leadership and staff to create a workplace culture of safety, trust, and belonging. Focusing on improving workplace culture will, in turn, improve our service to the community.

### Health Officer

The Health Officer Division provides round-the-clock physician consultation, technical direction and leadership to support public health activities and clinical services in Multnomah County, fulfilling a requirement of Oregon statues. The Health Officer supervises the deputy health officer and EMS Medical Director for Multnomah County and, under contract, the Health Officers for Clackamas and Washington counties.

The Health Officer Division also includes Multnomah County EMS administration, the TC911 social worker case management program, the Multnomah County Medical Examiner (MCME), Multnomah County Public Health Emergency Preparedness, and the 6-county Health Preparedness Organization.

The Emergency Medical Services program is funded entirely through a franchise fee with American Medical Response. Public Health Emergency Preparedness Program is funded by the federal Centers for Disease Control and Prevention. The Regional Healthcare Preparedness Organization is funded through the federal Department of Health and Human Services and serves a 6-county region in NW Oregon.

### Significant Changes

No major changes. In FY 2021, the six county regional healthcare preparedness organization will transition to the Oregon Health Authority to be in alignment with the other five regions in the state.



### Public Health

The Public Health Division is statutorily responsible for promoting and protecting the health and preventing disease for the county's diverse communities. It is guided by public health science, best practice, and community-driven solutions, including the Public Health Advisory Board and Community Health Improvement Plan. Key capacities are health equity, policy and planning, communications, partnership development, and health monitoring and assessment. The Public Health Office of the Director supports the County Board of Health in setting policy to reduce health disparities in the leading cause of death and disability.

The division has three core functions. 1) Communicable Disease Services fulfills the mandate to limit the spread of reportable communicable diseases, including sexually transmitted diseases, through prevention; outbreak investigation; harm reduction; and clinical services for public health threats. 2) Environmental Health protects the safety of residents by inspecting licensed facilities; controlling vectors; and assuring healthy communities through addressing lead poisoning, air, and climate quality, and neighborhood and transportation design. 3) Prevention & Health Promotion works to improve population health through partnership building, providing technical assistance, addressing inequities, and implementing culturally specific strategies. Key initiatives include chronic disease and violence prevention; health equity, including support for internal workforce equity; epidemiology; substance use and overdose prevention; tobacco control and prevention; adolescent health; and maternal, child, and family health.

### Significant Changes

The Public Health Division plays a unique and required governmental role to guide policies, systems, and programs that improve community health and resiliency. To fulfill this role, the division prioritizes programming with core functions and capacities that further equity-based, population-level strategies and approaches. Significant changes for FY 2020 include:

- Mobilizing the Public Health Office of the Director to support the County Board of Health in identifying equity-focused policy and systems level changes that better ensure health for all residents. This work integrates community partnerships; epidemiology/assessment; leadership; policy; and health equity.
- Merging communicable disease and STD/HIV/hepatitis C services to combine surveillance and evaluation, prevention, disease investigations/intervention/control, including clinical services. This reorganization maximizes community and health system capacity so the division can concentrate on diseases with the highest threat to population health and equity-focused technical assistance.
- Maintaining prevention and health promotion programs through the second round of Centers for Disease Control & Prevention Racial and Ethnic Approaches to Community Health grant funding and mobilizing with partners to have the Office of Adolescent Health reinstate Teen Pregnancy Prevention grant funding.
- Redesigning maternal, child and family health to prioritize direct services and population-level strategies and approaches that reach communities with the highest burden of health disparities.

### Integrated Clinical Services

Integrated Clinical Services (ICS) provides quality health services for people who experience barriers to accessing health care. Culturally relevant clinical services provided by ICS, link physical and behavioral health and social services for the poor, uninsured and homeless populations. Services include dental and medical care, disease management for chronic illness, specialized care for HIV positive individuals, behavioral health, family planning, prenatal care, enabling services and preventive services such as well-child health care. Integrating these personal health care services provides clients with continuity of care, improves quality, operational efficiencies, and maximizes opportunities with grants and programs for special populations.

Clinical services are provided throughout the County including: 7 full-service health centers where medical, dental, and pharmacy services for children and adults are co-located; 10 Student Health Centers provide primary care services to adolescents in the schools and surrounding community; Billi Odegaard Dental Clinic with a focus on homeless services and La Clinica de Buena Salud are stand-alone sites. The School and Community Oral Health program also provided exams and sealants to over 4,100 school children. In the calendar year 2018, ICS provided services to over 66,000 of Multnomah County's most vulnerable residents.

### Significant Changes

Staff continue to address clients' social determinants of health. Community Health Workers (CHW), for example, track their activities in primary care and dental by capturing "CareSteps" in the electronic health record. Primary Care and Public Health are partnering to support Latinx families in East County to increase engagement and improve health outcomes for families and pregnant women. To better leverage resources and address the growing need for medical and behavioral health services in East Multnomah County, Student Health Centers have reallocated services previously located at K-8 and middle schools to high schools.

ICS leadership are implementing activities in support of the County's Workforce Equity Strategic plan. Early work includes management and leadership training in Motivational interviewing, Transformational Communication and Leadership training, and clinical staff continues to engage in smaller, role-specific training to support their engagement with the diverse and vulnerable populations we serve.

Our clients represent many culturally and ethnically diverse communities. In 2017, 45% of visits were best served in a language other than English with over 100 different languages tracked last year. The percentage (6.5% in 2018) of clients over the age of 65 continues to rise as the population ages.

### Business Operations

The Business Operations division provides leadership, policy and strategic direction to the Health Department. Its responsibilities include accounting, financial reporting, budget development and monitoring, medical account services, contracts and purchasing. The Budget, Accounting, Medical Accounts Receivable and Contracting services manage a budget of over \$340 million.

Business Operations is a bridge to the Department of County Assets (e.g. IT, facilities) and the Department of County Management (HR, Finance, Budget) for the provision of services and assuring compliance with County policies. Operations is responsible for the development and maintenance of the strategic plan, communications, and priority setting for IT and data resources.

### Significant Changes

Workday has changed nearly all the business practices and operations. In FY 2019, staff assigned to help design and implement Workday strained the divisions ability to support current operations. With implementation complete, the division will be evaluating all systems, work flow and staffing to optimize Workday and take advantage of the new tools it offers.

Changes to funding and how we are reimbursed for services continues to evolve in all areas. In the primary care and dental clinics alternative payment methods (APM) are now a significant percentage of overall revenue. This requires new methods to monitor, collect and maximize payments. The Mental Health and Addiction Services Division is using APMs in a variety of provider agreements which requires changes to our contract, procurements and financial forecasting.

### Human Resources

The Human Resources, Training and Workforce Development group provides guidance, consultation in administrative procedures, recruitment, employee/labor relations, class compensation, management competencies, personnel policies, labor contract interpretation, training facilitation, strategic leadership, employee development, and legal compliance.

Human Resources works in partnership with labor unions spanning four labor contracts including, three in AFSME Local 88 and the Oregon Nurses Association. The Human Resources team provides these services to over 1,400 employees and managers at over 50 locations across Multnomah County

### Significant Changes

Unemployment rates continue to impact the ability to attract, recruit, and retain talent. Unemployment in the city of Portland is lower than it's been in almost 25 years and the healthcare industry is even more challenging to recruit from, with an unemployment rate at a nearly 50 year low. With the continued increase of healthcare competitors in the Portland-metro area, national recruitment strategies are a critical avenue to increase applicant pools. Aligned with the recommendations from the Workforce Equity Strategic Plan (WESP) and the Jemmott Rollins Group (JRG) recommendations, the Health Department will continue to identify diversity-focused strategies to improve the depth and quality of applicants. These same strategies will inform how employees are onboarded to support a successful integration into the organization. Lastly, the WESP, JRG and Employee Survey all highlight the critical role managers hold in the retention and engagement of staff. Focused approaches to develop managers and identify accountability-tools will be a priority.

### Corrections Health

Corrections Health meets national standards that assure access to care and safeguard the health of those who are in detention in the Multnomah County Detention Center (MCDC), the Multnomah County Inverness Jail (MCIJ) and youth in the Donald E. Long Home. In the adult facilities, staff provides around-the-clock health evaluation, illness identification, and treatment services for over 36,000 adults each year. Over 50% have serious, unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol/drug withdrawal, and major mental/behavioral illnesses. The vast majority of detainees return to their communities, so the improvement of their health in the detention settings also improves the health of their families and the community. Stabilization of substance use and behavioral health conditions allows detainees to more fully participate in their legal cases, which protects their constitutional rights and promotes a more efficient judicial process. Corrections Health continues to promote effective evaluation and treatment of behavioral health issues, including facilitating psychiatrist, mental health nurse practitioner and mental health nursing assessments. At the juvenile facility licensed nursing staff to provide services 16 hours per day, including screening, symptom evaluation, and treatment for over 2,000 youth per year. More than one-third of youth receive mental health treatment.

### Significant Changes

Corrections Health has a serious ongoing challenge in attracting and retaining qualified staff. For every one person hired, two are lost to resignation or transfer. High staff turnover is not only costly for the County but is demoralizing for the staff remaining at work in Corrections Health. Staffing challenges require ongoing use of overtime, including mandatory overtime. Several efforts are included in the FY 2020 budget to address those concerns. The Nursing Development Manager position will enhance recruitment, hiring, on-boarding, training, and supervision of nursing staff with a focus on developing a more diverse workforce with improved retention. Recruitment will be further enhanced through a dedicated recruiter pilot program with Human Resources. In all, enhanced hiring and retention should not only be cost-effective in reducing overtime but promote the health of staff.

Another significant challenge is the rising cost of outside medical services, including specialty clinic evaluations, ambulance, laboratory and Emergency Room costs. Additional support for evaluation of eligibility for insurance should promote both the ability to ensure that outside services are reimbursed whenever possible, but also enhance the ability of released individuals to access community services. The transition of care from the jail to the community will be further enhanced with additional transition planning support. Leveraging the stability afforded through healthcare in the jail will improve the health of the community with the added goal of a reduction in recidivism.

### Mental Health and Addiction Services

Multnomah County Mental Health and Addiction Services Division (MHASD) aims to enhance and maintain high-quality, accessible, and culturally appropriate systems of care for children, youth and adults experiencing mental health challenges or substance use disorder.

As a subcontractor of Health Share of Oregon, MHASD manages the mental health benefit of more than 160,000 Oregon Health Plan members. Services cover routine, urgent and emergent needs. MHASD operates a 24/7 crisis line available to all county residents. The division also provides prevention and early intervention to youth and young adults, including school-based mental health services in more than 38 schools across the county.

MHASD is committed to addressing gaps in the system of care for the most vulnerable, including the homeless with mental health issues and victims of abuse. MHASD's prioritizes upholding a consumer-driven system and creating access to supportive housing. We will continue to work with peer groups to make policy and programming recommendations. Program offer 40065B adds a peer leadership level position in the Office of Consumer Engagement. We will continue to strengthen infrastructure to create sustainable systems to meet program needs and requirements.

### Significant Changes

In FY 2019, county leadership initiated a review of Adult Protective Services (APS) practices in MHASD. In response to the review findings, staffing was increased by 4.00 FTE along with increased supervision and oversight of the program. Infrastructure including improved data systems, analytical tools, and risk assessment staff has enable the program to quickly review, respond and address complaints, grievances, incidents and reports of alleged abuse.

MHASD's Jail Diversion program expanded STP transitional Housing program by adding second co-ed program for up to 10 individuals.

MHASD's Addictions team worked with OHA to shift FY 2020 funding, which allows for increase service provision. OHA will also be funding the Addictions program area with a new grant, \$600,000 over two years, to focus on enhancing peer-delivered services in emergency departments across the county to address the opioid crisis.

The division is actively involved in changes to Health Share of Oregon, as they respond to the next iteration of health transformation in Oregon. This will bring many opportunities to improve and expand access to care for people insured by Medicaid in our county

### Health Department

The following table shows the programs by division that make up the department's total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Director's Office</b>					
40000	Health Department Director's Office	962,352	0	962,352	3.00
<b>Business Operations</b>					
40003	Health Department Leadership Team Support	494,503	0	494,503	3.00
40040A	Budget & Finance	3,261,982	250,000	3,511,982	22.80
40040B	Budget & Finance- Restoration	430,376	0	430,376	4.00
40041	Medical Accounts Receivable	2,148,865	0	2,148,865	14.90
40042	Contracts & Procurement	1,764,474	0	1,764,474	12.50
40043	Health Department Operations	4,999,679	0	4,999,679	13.80
40044	Health Clinical Data and Reporting	2,004,307	0	2,004,307	2.00
<b>Corrections Health</b>					
40049	Corrections Health Juvenile Detention	1,298,661	0	1,298,661	5.10
40050A	Corrections Health Multnomah County Detention Center (MCDC)	3,477,277	0	3,477,277	21.10
40050B	Corrections Health MCDC Clinical Services and 4th Floor Housing	3,094,880	0	3,094,880	10.50
40050C	Corrections Health MCDC Housing Floors 5, 6, 7 & 8	3,228,667	0	3,228,667	17.45
40050D	Corrections Health MCDC Outsourced Medical	750,000	0	750,000	0.00
40051A	Corrections Health Inverness Jail (MCIJ) Clinical Services	3,481,442	0	3,481,442	20.60
40051B	Corrections Health MCIJ General Housing Dorms 4 - 11	2,066,464	0	2,066,464	7.70
40051C	Corrections Health MCIJ Dorms 12 - 18 and Infirmary	1,715,612	0	1,715,612	9.30
40051D	Corrections Health MCIJ Outsourced Medical	750,000	0	750,000	0.00
40059	Corrections Health Mental Health Services	3,797,999	0	3,797,999	23.40
<b>Health Officer</b>					
40002	Tri-County Health Officer	429,277	508,619	937,896	2.65
40004A	Ambulance Services (Emergency Medical Services)	2,104,617	1,011,920	3,116,537	12.80
40004B	Ambulance Services (EMS) - Clinical Services Specialist	17,722	0	17,722	0.00
40004C	Ambulance Services (EMS) - Medical First Response	95,000	0	95,000	0.00
40005	Public Health & Regional Health Systems Emergency Preparedness	35,918	697,836	733,754	3.35
40052	Medical Examiner	1,604,167	0	1,604,167	11.00

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Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Human Resources</b>					
40039	Human Resources and Training	3,830,603	0	3,830,603	23.75
<b>Integrated Clinical Services</b>					
40012A	Services for Persons Living with HIV-Clinical Services	1,328,713	4,399,408	5,728,121	30.03
40016	Medicaid/Medicare Eligibility	829,131	1,389,946	2,219,077	18.00
40017	Dental Services	13,520,784	9,999,318	23,520,102	132.81
40019	North Portland Health Clinic	2,395,405	2,818,666	5,214,071	26.40
40020	Northeast Health Clinic	3,081,400	3,096,117	6,177,517	29.60
40022	Mid County Health Clinic	6,326,991	5,476,486	11,803,477	56.42
40023	East County Health Clinic	4,754,993	5,422,797	10,177,790	49.10
40024A	Student Health Centers	3,504,771	2,274,831	5,779,602	28.87
40024B	Student Health Centers Transition Planning	243,627	148,962	392,589	2.64
40026	La Clinica de Buena Salud	734,995	2,044,168	2,779,163	13.60
40027	Southeast Health Clinic	970,794	2,858,785	3,829,579	17.30
40029	Rockwood Community Health Clinic	2,953,135	2,861,571	5,814,706	29.40
40030	Medical Director	1,292,645	87,588	1,380,233	2.80
40031	Pharmacy	0	26,076,195	26,076,195	54.13
40032	Lab and Medical Records	3,700,446	3,285,629	6,986,075	45.40
40033	Primary Care and Dental Access and Referral	2,749,764	919,709	3,669,473	28.60
40034	ICS Administration, Operations, and Quality Assurance	6,593,689	1,716,215	8,309,904	48.80
40036	Community Health Council and Civic Governance	263,448	0	263,448	1.20
<b>Mental Health &amp; Addiction Services</b>					
40065A	Mental Health & Addiction Services Administration	870,792	1,692,508	2,563,300	9.48
40065B	Office of Consumer Engagement (OCE)	105,839	0	105,839	1.00
40067	Medical Records for MHASD	226,328	753,686	980,014	8.30
40068	Mental Health Quality Management	603,086	5,850,564	6,453,650	31.70
40069	Behavioral Health Crisis Services	1,765,873	10,864,862	12,630,735	25.41
40070	Mental Health Crisis Assessment & Treatment Center (CATC)	691,101	3,045,806	3,736,907	0.00
40071	MHASD Adult Protective Services	838,407	272,257	1,110,664	7.60
40072	Mental Health Commitment Services	1,268,539	2,989,481	4,258,020	24.10
40073	Peer-run Supported Employment Center	102,000	0	102,000	0.00
40073B	Peer Run Supported Employment Services	100,000	0	100,000	0.00
40074	Mental Health Residential Services	854,766	12,485,115	13,339,881	11.64
40075	Adult Mental Health Initiative (AMHI)	0	3,904,126	3,904,126	11.33



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Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Mental Health &amp; Addiction Services Administration (cont.)</b>					
40076	Mental Health Services for Adults	0	11,886,611	11,886,611	0.00
40077	Mental Health Treatment & Medication for the Uninsured	1,268,689	135,726	1,404,415	0.00
40078	Early Assessment & Support Alliance	82,999	1,657,357	1,740,356	11.21
40080	Community Based MH Services for Children & Families	1,977,666	1,780,004	3,757,670	17.44
40081	Multnomah Wraparound	0	5,641,352	5,641,352	29.52
40082	School Based Mental Health Services	1,661,254	2,223,742	3,884,996	25.38
40083	Mental Health First Aid	189,131	0	189,131	1.00
40084	Culturally Specific Mental Health Services	1,741,341	0	1,741,341	0.00
40085	Adult Addictions Treatment Continuum	2,519,256	8,977,730	11,496,986	8.35
40086	Addiction Services Gambling Treatment & Prevention	0	810,250	810,250	0.15
40087	Addiction Services Alcohol & Drug Prevention	0	324,251	324,251	1.00
40088	Coordinated Diversion for Justice Involved Individuals	873,706	1,533,238	2,406,944	11.70
40089	Addictions Detoxification & Post Detoxification Housing	1,515,276	671,461	2,186,737	0.00
40090	Family & Youth Addictions Treatment Continuum	128,073	459,216	587,289	0.00
40091	Family Involvement Team	0	440,442	440,442	0.00
40094	Medicaid Insurance Plan Administration and Operations	0	5,818,046	5,818,046	38.10
<b>Public Health</b>					
40001	Public Health Administration and Quality Management	2,408,981	525,000	2,933,981	17.51
40006	Tobacco Prevention and Control	673,966	390,689	1,064,655	6.50
40007	Health Inspections and Education	5,696,802	112,715	5,809,517	37.51
40008	Vector-Borne Disease Prevention and Code Enforcement	1,122,814	0	1,122,814	8.65
40009	Vital Records	2,195	894,068	896,263	4.75
40010A	Communicable Disease Prevention and Control	2,500,000	2,031,125	4,531,125	24.63
40010B	STD/HIV/Hep C Community Prevention Program	939,059	5,152,521	6,091,580	23.90
40010C	Communicable Disease Services- Vaccine Hesitancy	80,000	0	80,000	0.00
40012B	Services for Persons Living with HIV - Regional Education and Outreach	44,686	4,574,506	4,619,192	6.67
40018	Women, Infants, and Children (WIC)	2,200,000	2,974,808	5,174,808	38.60
40025	Adolescent Sexual Health Equity Program (ASHEP)	93,026	1,249,999	1,343,025	4.40
40037A	Environmental Health Community Programs	322,853	428,000	750,853	4.68
40048	Community Epidemiology	1,308,032	1,644,469	2,952,501	12.76
40053	Racial and Ethnic Approaches to Community Health	464,103	792,000	1,256,103	5.50
40054	Nurse Family Partnership	1,000,000	1,515,914	2,515,914	10.10

# Health Department

fy2020 adopted budget

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Public Health (cont.)</b>					
40055	Home and Community Based Health Consulting	723,071	524,962	1,248,033	5.90
40055B	Baby Boosters	55,500	0	55,500	0.00
40056	Healthy Families	529,534	2,282,286	2,811,820	5.87
40058	Healthy Birth Initiative	1,552,663	1,420,740	2,973,403	15.80
40060	Chronic Disease and Violence Prevention	1,220,182	412,287	1,632,469	10.20
40061	Harm Reduction	1,477,352	661,421	2,138,773	7.67
40096	Public Health Office of the Director	2,871,269	150,000	3,021,269	10.70
40097	Maternal Child Family Health Management	1,335,274	125,000	1,460,274	8.13
	<b>Total Health Department</b>	<b>\$151,095,059</b>	<b>\$189,425,107</b>	<b>\$340,520,166</b>	<b>1,404.64</b>

**Department:** Health Department      **Program Contact:** Wendy Lear  
**Program Offer Type:** Administration      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Health Department's Director's Office provides leadership for the broad mission and vision of the department. The Director leads and guides strategic planning, legislative initiatives, integration of department activities and public health function communications, collaboration with other county departments, and is integral to innovation in preventative and population based community health.

**Program Summary**

The Director and Department Leadership Team are responsible for developing and maintaining strategic partnerships with a wide range of community organizations; integration of health services and operations to provide quality, best practice services; leadership and direction for public health issues and policies; stewardship of finances, facilities and personnel; continuous quality improvement of service delivery; public health emergency preparedness, and support for a diverse and qualified workforce with high job satisfaction.

The Director's Office is responsible for leadership committed to the Health Department's mission, vision, values and strategic objectives. The Office is a primary liaison to federal, state, county and local elected officials. The Director works with other county departments and community partners to further innovation in preventative and population based community health services that produce healthy people in healthy communities. The Director also works with a wide range of local organizations, health systems and other counties to implement public health, behavioral health and safety net health care across the region.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Invite broad employee engagement through soliciting feedback in a variety of venues. through facilitating quart	0	0	0	18
Outcome	Annual Federal and State resources \$ leveraged for services (expressed in millions).	\$223 mil	\$233 mil	\$221 mil	\$238 mil

**Performance Measures Descriptions**

\*New measure for FY2019, discontinued the measure "Increased access to Health Dept. services as measured by # of clients served."

## Legal / Contractual Obligation

ORS 431.418 Local public health administrator (1) Each district board of health shall appoint a qualified public health administrator or supervise the activities of the district in accordance with law. (2) Each county governing body in a county that has created a county board of health under ORS 431.412 shall appoint a qualified public health administrator to supervise the activities of the county health department in accordance with law.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$579,529	\$0	\$749,360	\$0
Contractual Services	\$102,000	\$0	\$65,841	\$0
Materials & Supplies	\$71,632	\$0	\$99,179	\$0
Internal Services	\$51,844	\$0	\$47,972	\$0
<b>Total GF/non-GF</b>	<b>\$805,005</b>	<b>\$0</b>	<b>\$962,352</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$805,005</b>		<b>\$962,352</b>	
<b>Program FTE</b>	3.00	0.00	3.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 40000-19 Health Department Director's Office

Retirement of Joanne Fuller in September 2017 resulted in the County's Chief Operating Officer naming Wendy Lear and Vanetta Abdellatif as Co-Interim Department Directors in October 2017. A national recruitment was launched in October 2018 and a new Health Department Director was named in February 2019.

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40096  
**Program Characteristics:**

### Executive Summary

Public Health Administration and Quality Management (PHA-QM) provides leadership for the Public Health Division (PHD) as the local public health authority. The PHD promotes and protects health, and prevents disease of all residents within Multnomah County. PHA-QM sets the strategic direction of the PHD and ensures accountability through achieving performance standards related to Public Health Accreditation, Public Health Modernization, and effective financial management.

### Program Summary

Through leading administrative, quality, and project management roles, Public Health Administration and Quality Management (PHA-QM) enables the Public Health Division (PHD) to meet the foundational roles and legal requirements to act as Multnomah County's local public health authority. The PHD is responsible for systems that promote and protect the health of, and prevent disease for, all residents and diverse communities within Multnomah County. Strategies of the PHD include direct services, policy interventions, community partnerships, planning, and assessment. The following PHA-QM program areas support these strategies.

**Administration:** This program area provides core administrative functions for the PHD. Division-wide administration ensures accountability through achieving performance standards related to Public Health Accreditation, Public Health Modernization, effective financial management, and the PHD Strategic Plan.

**Quality and Project Management:** Oversees quality assurance, quality improvement, performance measurement, and information management activities for public health assessment, service delivery, community engagement, and partnerships. Other key functions include public health workforce development; public health informatics; funding and grant development, project management for emerging public health issues with departmental and community significance (such as the prescription opioid epidemic); and academic partnerships.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of grant proposals written	35	30	25	25
Outcome	Dollar amount (in millions) of grants funded	\$21	\$24	\$20	\$20
Outcome	% of identified quality improvement, strategic projects, and strategic plan objectives successfully completed	90%	80%	90%	90%

### Performance Measures Descriptions

Although 35 grant proposals were submitted in FY18, the amount of grant funds awarded was lower than in previous years due to changes in some funding streams from grant-based to formula-based (e.g. OHA Annual Plan, CareOregon Behavioral Health); therefore, these funds were not logged. Thus far, there have been fewer grant opportunities in FY19, but estimated amount is comparable to actual for FY18 due to the reinstatement of OAH Teen Pregnancy Prevention's original project period and a second round of competitive CDC REACH funding.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,948,072	\$302,048	\$2,225,717	\$238,839
Contractual Services	\$125,362	\$28,500	\$5,000	\$35,929
Materials & Supplies	\$96,939	\$16,679	\$566	\$93,586
Internal Services	\$315,697	\$64,575	\$177,698	\$156,646
<b>Total GF/non-GF</b>	<b>\$2,486,070</b>	<b>\$411,802</b>	<b>\$2,408,981</b>	<b>\$525,000</b>
<b>Program Total:</b>	<b>\$2,897,872</b>		<b>\$2,933,981</b>	
<b>Program FTE</b>	14.24	2.11	15.55	1.96

<b>Program Revenues</b>				
Intergovernmental	\$0	\$411,802	\$0	\$325,000
Service Charges	\$0	\$0	\$0	\$200,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$411,802</b>	<b>\$0</b>	<b>\$525,000</b>

**Explanation of Revenues**

State Opiate grant for Prescription drug Overdose Prevention and Federal BJA Hal Rogers PDMP to enhance the capacity of regulatory and law enforcement agencies and public health officials to collect and analyze controlled substance prescription data and other scheduled chemical products through a centralized database administered by an authorized state agency.

ST Opiate Grant: \$ 250,000  
 Fed BJA Hal Rogers PDMP Grant: \$ 75,000  
 Public Health IT Support Agreement: \$ 200,000

**Significant Program Changes**

**Last Year this program was:** FY 2019: 40001-19 Public Health Administration and Quality Management

As part of divisional and program offer reorganizations, the Office of the Director portion of this program offer became an independent program offer in FY20 (40096 Public Health Office of the Director).

**Department:** Health Department

**Program Contact:** Paul Lewis

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

This program provides public health physician consultation, medical direction, and leadership to health department administrators, program staff and community partners. This cooperative effort of the metro-county health departments is intended to improve the consistency and quality of public health services; increase learning and collaboration across the counties; and improve the quality, efficiency and effectiveness of Health Officer services, both as a region and for individual counties. Clackamas and Washington Counties contract with Multnomah County for their health officer services.

### Program Summary

Four public health physicians serve as the Tri-County Health Officers:

In Multnomah County the Health Officer is also the Tri-County Health Officer and supervises three deputy health officers, one in each county. In Multnomah County, the deputy Health Officer serves as medical consultant to the Communicable Disease, Sexually Transmitted Infection, Tuberculosis, and Environmental Health Food Service programs. The Health Officer oversees the EMS Program, the Public Health Emergency Preparedness Program, and the regional 6 county Hospital Preparedness Program. In addition the Health Officer supervises the EMS Medical Director provides technical consultation to the Maternal Child Health program and health promotion efforts and leads the County and regional efforts to decrease fatal opioid overdoses.

The deputy Health Officers working in Clackamas and Washington Counties have broad roles in supporting their respective administrators with an emphasis on Communicable Disease Control given the limited FTE.

Broadly speaking, the Health Officers, (1) participate in enforcement of public health laws; (2) supervise select public health programs; (3) work with department staff, other county agencies, and community partners to manage critical public health problems; and (4) participate in department administration.

The program supports Multnomah County Health Department's goals by providing effective and accountable local public health practice leadership and medical direction that results in quality clinical and health promotion programs. The health officer program staff provides leadership on chronic disease prevention programs, addresses issues of communicable disease control, leads the regional opiate safety coalition, leads the regional response to Emergency Department and Emergency Medical System overload that occurs nearly every winter, provides technical support for board presentations on Emergency Medical Systems and Opioids. Dr Lewis also participates as the large county representative on the Cleaner Air Oregon advisory Committee to the OHA and DEQ and is on the Governor's Opioid Task Force.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Contract deliverables are met by the end of fiscal year.	90%	90%	90%	90%
Outcome	County stakeholders express satisfaction in program delivery and results.	100%	100%	100%	100%

### Performance Measures Descriptions

Measured by renewal of intergovernmental agreement through FY19. TCHO program staff meet regularly with county health administrators to review service delivery, program satisfaction, and progress on individual workplan items. Contract deliverables for FY19 will be negotiated and finalized by June 30, 2018. These will provide guidance for work priorities and program activities. Annual survey completed in January 2018, and both counties indicated they intend to renew the contract.

## Legal / Contractual Obligation

ORS 431.418 requires counties to employ or contract with a physician to serve as County Health Officer. Intergovernmental agreements with Clackamas and Washington counties specify Health Officer services that Multnomah County is required to provide as well as expected outcomes and evaluation measures.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$349,518	\$412,516	\$395,168	\$447,677
Materials & Supplies	\$534	\$7,837	\$7,687	\$7,837
Internal Services	\$29,296	\$53,650	\$26,422	\$53,105
<b>Total GF/non-GF</b>	<b>\$379,348</b>	<b>\$474,003</b>	<b>\$429,277</b>	<b>\$508,619</b>
<b>Program Total:</b>	<b>\$853,351</b>		<b>\$937,896</b>	
<b>Program FTE</b>	0.80	1.45	1.20	1.45

Program Revenues				
Intergovernmental	\$0	\$474,003	\$0	\$508,619
<b>Total Revenue</b>	<b>\$0</b>	<b>\$474,003</b>	<b>\$0</b>	<b>\$508,619</b>

## Explanation of Revenues

Clackamas and Washington counties meet their ORS 431.418 requirements for health officer services through intergovernmental agreements (IGA) with Multnomah County. The Tri-County Health Officer is funded by \$508,619 in revenue from Clackamas and Washington counties.

## Significant Program Changes

Last Year this program was: FY 2019: 40002-19 Tri-County Health Officer



**Department:** Health Department      **Program Contact:** Wendy Lear  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40000  
**Program Characteristics:**

**Executive Summary**

This program pools administrative support for the Department's senior leadership team under one supervisor so that staff and resources can be efficiently shared.

**Program Summary**

The Department Leadership Team (DLT) support team reduces duplication of effort, and increases effectiveness of administrative support to leaders and program staff by coordinating workloads and cross-training. A single point of supervision and leadership provides consistent performance expectations and evaluations. Team members provide staffing, scheduling, meeting/event preparation, technical support, special projects, and communication support for the Department Director and serve as a link for the Department Director and Leadership Team for communication at multiple internal organizational levels and to external stakeholders. Director Office reception team members provide general office services, such as copying, travel and training, time and attendance records (TARS) entry, supply ordering, mailings, mail distribution, telephone, computer programs, minutes, surveys, operation of the Department's main telephone lines and front office reception on the Director's floor.

This program offer supports the Health Department Leadership Team's ability to achieve accountability, to manage resources and service delivery costs effectively, to equitably evaluate and streamline delivery of services and County operations, to provide reliable information for decision-making, which improves the reporting results.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of projects completed on time with an error rate not to exceed 3%.	92%	93%	92%	93%
Outcome	Survey rating by Department Leadership Team on scale of 1 to 10.	7	9	8	8

**Performance Measures Descriptions**

Survey of Department Leadership members conducted at end of fiscal year will meet or exceed 8 (on a scale of 1-10).

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$420,043	\$0	\$350,479	\$0
Contractual Services	\$0	\$0	\$80	\$0
Materials & Supplies	\$21,325	\$0	\$34,063	\$0
Internal Services	\$65,801	\$0	\$109,881	\$0
<b>Total GF/non-GF</b>	<b>\$507,169</b>	<b>\$0</b>	<b>\$494,503</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$507,169</b>		<b>\$494,503</b>	
<b>Program FTE</b>	4.00	0.00	3.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 40003-19 Health Department Leadership Team Support

**Department:** Health Department      **Program Contact:** Paul Lewis  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Multnomah County Emergency Medical Services (MCEMS) regulates, monitors, and coordinates a local EMS system, including a franchised ambulance contractor, fire departments, and licensed non-emergency ambulance providers. Under Medical Direction, the system receives 9-1-1- calls, dispatches resources, provides care, and transports patients to the appropriate facility.

**Program Summary**

MCEMS plans, procures, contracts, regulates, monitors, and coordinates EMS system activities to comply with the Multnomah County Ambulance Service Plan, MCC 21.400, and Oregon Administrative Rules. MCEMS regulates all ambulance business in accordance with the above, including licensing and inspection of ambulances, monitoring of ambulance contractor operations, supervising medical care, and levying fines for substandard performance and/or violation of administrative rules.

MCEMS provides medical supervision, oversight and guidance to 9-1-1 dispatchers, fire and ambulance emergency medical personnel, and non-911 ambulance providers. This includes setting medical protocols and standards of emergency, pre-hospital care, as well as the provision of real time medical guidance to first responders through a subcontract with OHSU Medical Resource Hospital. MCEMS provides pre-hospital system regulation and coordination of 911 medical first response and dispatch personnel for Multnomah County. The City of Portland's Bureau of Emergency Communications, a.k.a. 911 Dispatch Center, dispatches emergency personnel. Fire departments of Portland, Gresham, Portland International Airport, and volunteer fire districts throughout the County provide medical first response to all 911 calls, accounting for more than 100,000 calls annually. American Medical Response (AMR) provides 911-ambulance service through an exclusive ambulance contract with the County. MCEMS:

- Assures that 911 medical dispatch protocols are consistent with care provided by EMS providers across multiple agencies;
- Maintains county contracts for first response services and responds to concerns from the public regarding EMS care;
- Monitors and enforces ambulance response and performance metrics;
- Coordinates and supervises joint training annually to assure fire and ambulance paramedics interpret and use medical protocols consistently across EMS agencies;
- Establishes quality standards and metrics for the provision of EMS and uses a Continuous Quality Improvement (CQI) process to monitor and improve service quality across the system; and
- Coordinates major event planning, medical equipment specifications, liaison and communication with local hospitals, as well as EMS disaster planning.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Ambulance response time for urgent, life threatening calls in the Urban zone is < or equal to 8 minutes. 90% of	90.51%	90%	90.2%	90%
Outcome	Ambulance response time for urgent, life threatening calls in rural areas is < or equal to 20 minutes, 90% of th	92.4	90%	91%	90%

**Performance Measures Descriptions**

The exclusive ambulance service contractor has response time standards, by geographic zones, for all 911 dispatched medical calls. Life threatening calls in Urban zones shall receive a response within 8 minutes, and in Rural areas, 90% within 20 minutes time.

## Legal / Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. The governing law and contractual obligations include the Multnomah County Ambulance Service Plan; ORS 682; OAR Chapter 333, County ordinances 21.400-21.433; County rules, medical policies, procedures, protocols, the franchise agreement with AMR, contracts with OHSU, and intergovernmental agreements with local fire and rescue jurisdictions.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,106,127	\$828,562	\$1,236,380	\$800,059
Contractual Services	\$679,134	\$0	\$609,146	\$92,360
Materials & Supplies	\$194,938	\$3,153	\$43,123	\$10,096
Internal Services	\$234,172	\$167,481	\$215,968	\$109,405
<b>Total GF/non-GF</b>	<b>\$2,214,371</b>	<b>\$999,196</b>	<b>\$2,104,617</b>	<b>\$1,011,920</b>
<b>Program Total:</b>	<b>\$3,213,567</b>		<b>\$3,116,537</b>	
<b>Program FTE</b>	6.55	7.05	7.00	5.80

Program Revenues				
Fees, Permits & Charges	\$1,619,316	\$0	\$1,943,680	\$0
Intergovernmental	\$280,055	\$0	\$72,194	\$0
Other / Miscellaneous	\$120,000	\$999,196	\$0	\$1,011,920
<b>Total Revenue</b>	<b>\$2,019,371</b>	<b>\$999,196</b>	<b>\$2,015,874</b>	<b>\$1,011,920</b>

## Explanation of Revenues

License fees, the ambulance franchise fee, contracts, and fines pay MCEMS administration costs. Fees are established and collected through agreements with the exclusive emergency ambulance contractor and other jurisdictions. The County's exclusive ambulance services contract and MCC 21.400 provide authority for MCEMS to levy fines for substandard performance. Any fees collected are to fund system oversight and support functions provided by MCEMS. Any fines collected pay for one-time system improvements.

TC911-Social Work Program: \$ 1,011,920 from a Health Share of Oregon grant to serve Medicaid members  
 County general funds: \$ 2,104,617 to serve non-Medicaid clients using EMS frequently.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40004-19 Ambulance Services (Emergency Medical Services)

The County's updated Ambulance Service Plan and Code changes (approved by the Board in Dec. 2016) became effective on Sept. 1, 2018. MCEMS issued a new, five-year, exclusive emergency ambulance contract to AMR on Sept. 1, 2018, after a competitive request for proposal process. The new contract has the ambulance contractor paying patient care medical supply reimbursements directly to fire agencies and includes innovative organizational and patient-centered equity metrics.

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Paul Lewis
<b>Program Offer Type:</b>	Existing Operating Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	40004 Ambulance Services (Emergency Medical Services)		
<b>Program Characteristics:</b>	One-Time-Only Request		

**Executive Summary**

Restoration request of 0.2 FTE of Licensed Clinical Social Worker as part of the Tri-County 911 Service Coordination Program (TC911) providing short term case management to uninsured and non-Medicaid enrolled people having frequent contact with Emergency Medical Services and Hospital Emergency Departments.

**Program Summary**

TC911 is a program serving individuals having frequent contact with emergency medical services and hospital emergency departments. A full time social worker assist with provision of case management and care coordination for roughly 75 people with mental health issues, unstable housing, substance dependence and physical health issues. The 0.2 FTE accounts for approximately 20% of our service capacity to assist non-Medicaid enrolled clientele.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Continuation of case management services from April 1, 2020 -June 30, 2020	12 months	12 months	12 months	12 months
Outcome	Continuation of case management services to 20 unique individuals with physical, behavioral health and social iss	75	75	75	75

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. The governing law and contractual obligations include the Multnomah County Ambulance Service Plan; ORS 682; OAR Chapter 333, County ordinances 21.400-21.433; County rules, medical policies, procedures, protocols, the franchise agreement with AMR, contracts with OHSU, and intergovernmental agreements with local fire and rescue jurisdictions. The County has an existing contract with Health Share of Oregon to serve their Medicaid members with short term case management and care coordination; service to uninsured and non-Medicaid enrolled persons using County general funds.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$0	\$17,722	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,722</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$17,722</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

TC911 has a contract with Health Share of Oregon through June 30, 2020; services for non-Health Share of Oregon members is funded solely through County general funds.

## Significant Program Changes

Last Year this program was: FY 2019: 40004-19 Ambulance Services (Emergency Medical Services)

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Paul Lewis
<b>Program Offer Type:</b>	Existing Operating Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	40004 Ambulance Services (Emergency Medical Services)		
<b>Program Characteristics:</b>			

### Executive Summary

On-going request for County funding of contracts for emergency medical first response services with rural fire protections districts to areas within the County and outside of the District boundary; no other city or Rural Fire Protection District medical first response services are available.

### Program Summary

The Multnomah County Ambulance Service Plan notes the value of emergency medical first response across the span of the entire County as part of the provision of emergency ambulance services. This program provides emergency medical first response services, including extrication and technical rescue, to areas within Multnomah County that have no other City or Fire District resource.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Respond to 100% of calls for contracted service area.	100%	100%	100%	100%
Outcome	A licensed emergency medical provider responds on all medical first response calls.	100%	100%	100%	100%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. The governing law and contractual obligations include the Multnomah County Ambulance Service Plan; ORS 682; OAR Chapter 333, County ordinances 21.400-21.433; County rules, medical policies, procedures, protocols, the franchise agreement with AMR, contracts with OHSU, and intergovernmental agreements with local fire and rescue jurisdictions. The County has existing contracts with Rural Fire Protection Districts to pay for emergency medical first response to areas outside of the districts jurisdictional boundaries.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$95,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$95,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$95,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The emergency medical first response fees for areas not covered by a City or rural fire protection district boundary are funded through County general funds.

## Significant Program Changes

Last Year this program was: FY 2019: 40004-19 Ambulance Services (Emergency Medical Services)



**Preparedness**

**Department:** Health Department      **Program Contact:** Paul Lewis

**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

Preparing for and responding to emergencies with widespread or severe health impacts require multi-agency, multi-jurisdictional, and public/private sector collaboration. Two Health Department programs contribute to this: 1) Public Health Preparedness assures that we can carry out the County's unique public health responsibilities in an emergency; 2) Regional Healthcare System Emergency Preparedness assures that hospitals and other health care providers in the 6-county NW Oregon region have a proven capacity to care for victims of large scale emergencies.

**Program Summary**

Responding to emergencies with severe health impacts (such as natural disasters, severe epidemics/pandemics, terrorist attacks) requires coordinated action to 1) focus the response on priority needs, and 2) effectively leverage resources of government, private healthcare providers, and non-profit organizations. This offer assures public and private health preparedness. Public Health preparedness includes: 1) emergency plans and protocols linked to the County's Emergency Response Plan; 2) trained and exercised Health Department leadership, managers and supervisors and incident management team members; 3) exercises to test and refine plans and capabilities, and 4) plans to increase capacity for key public health functions (e.g., epidemiology capacity to investigate and analyze an emergency's health impacts).

Regional Healthcare System Emergency Preparedness facilitates healthcare delivery system preparedness in Multnomah, Clackamas, Washington, Columbia, Tillamook and Clatsop counties and coordinates planning with SW Washington. It assures that hospitals, clinics, and other providers are prepared to respond in an effective and coordinated manner. The program 1) ensures that hospitals and other providers develop and exercise plans to increase the number of patients they can serve; 2) creates regional plans to coordinate a public/private response; 3) develops regional capacities to address communication and other critical support needs; and 4) develops regional capacities to manage specific health impacts (e.g., pandemic influenza). The programs coordinate and collaborate to develop effective governmental and private sector health response capacities in the county and region.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Trainings participated in by Incident Management Team	6	6	6	6
Outcome	CDCs Operational Readiness Review Score (scaled "Early," "Intermediate," "Established," and "Advanced").	Established	Established	Established	Established
Outcome	Improved regional healthcare system emergency response	93%	98%	98%	99%
Quality	Program satisfaction	93%	96%	96%	97%

**Performance Measures Descriptions**

- 1) Output: Training provided to Incident Management Team members (reduced in quantity; improved in depth)
- 2) Outcome: Improved response capability through achieving Centers for Disease Control's capabilities.
- 3) Outcome: Stakeholders express program has improved healthcare system emergency response abilities.
- 4) Quality: Regional stakeholders' satisfaction with program activities using a Likert scale.

## Legal / Contractual Obligation

ORS 431 and 433 empower the County and Health Department to supervise matters related to preserving the life and health of the people of the County. An intergovernmental agreement with the Oregon Health Authority (Public Health Division) specifies requirements for public health preparedness activities supported with federal CDC funds. A separate IGA with Oregon Health Authority guides regional healthcare system preparedness goals and activities supported with Federal US Dept. of Health and Human Services funds. Both sources of federal funds are dedicated to emergency preparedness, and cannot supplant other funding or be used to build general public health capacities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$51,485	\$526,735	\$0	\$546,779
Materials & Supplies	\$12,432	\$9,687	\$0	\$33,563
Internal Services	\$41,757	\$85,325	\$35,918	\$117,494
<b>Total GF/non-GF</b>	<b>\$105,674</b>	<b>\$621,747</b>	<b>\$35,918</b>	<b>\$697,836</b>
<b>Program Total:</b>	<b>\$727,421</b>		<b>\$733,754</b>	
<b>Program FTE</b>	0.00	3.15	0.00	3.35

Program Revenues				
Intergovernmental	\$0	\$621,747	\$0	\$697,836
<b>Total Revenue</b>	<b>\$0</b>	<b>\$621,747</b>	<b>\$0</b>	<b>\$697,836</b>

## Explanation of Revenues

State Public Health Emergency Preparedness is supported by Federal Centers for Disease Control (CDC) funds received through an intergovernmental agreement with Oregon Department of Human Services. Regional Health System Emergency Preparedness is funded by the US Dept. of Health and Human Services via the Oregon Health Authority (OHA), and by an Urban Area Security Initiative (UASI) grant.

State Public Health Emergency Preparedness: \$ 259,028

Cities Readiness Initiative: \$ 30,212

OHA, Health Security, Preparedness, and Response Program: \$ 338,596

Urban Area Security Initiative (UASI): \$ 70,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40005-19 Public Health & Regional Health Systems Emergency Preparedness

**Department:** Health Department      **Program Contact:** Tameka Brazile  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40037, 40053, 40060  
**Program Characteristics:**

### Executive Summary

The Tobacco Control and Prevention Program uses a variety of policy, systems, and environmental change strategies to prevent and reduce tobacco and nicotine use and exposure in Multnomah County with particular attention to reducing tobacco-related racial and ethnic disparities.

### Program Summary

Tobacco use is the single most preventable cause of disease, disability, and death in Multnomah County and across the nation. Although cigarette smoking has declined in Multnomah County, disparities in tobacco use remain across groups defined by race, ethnicity, educational level, and socioeconomic status. Nearly 1,274 residents die prematurely from tobacco use each year, and more than 23,395 suffer from a disease caused by smoking. Despite these risks, approximately 114,750 Multnomah County adults currently smoke cigarettes while the youth of Multnomah County currently report e-cigarette use at higher rates than cigarettes. And the harmful effects of smoking do not end with the smoker. Secondhand smoke exposure causes serious disease and death, and even brief exposure can be harmful to health. Coupled with this enormous health toll is the significant economic burden. Currently an estimated \$233.9 million is spent on tobacco-related medical costs and \$187.5 million is lost in productivity due to premature tobacco-related deaths.

Components of the program include: implementation of equitable strategies to reduce youth access to, and use of, tobacco and nicotine products, establishment of policy/regulation, counter-marketing, promotion of smokefree environments, providing support and resources to smokers who want to quit, surveillance and evaluation, and engaging diverse communities in tobacco prevention efforts in order to reduce tobacco-related disparities. Tobacco retail licensing components include: annual compliance inspections, minimum legal sales age inspections, enforcement inspections, surveillance and monitoring, trainings, outreach and consultation in order to increase retailer compliance with all laws related to the sale of tobacco and nicotine products in order to decrease access and availability of these products within Multnomah County.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of tobacco retail licenses issued	930	975	878	800
Outcome	Number of policies established to reduce tobacco use and exposure	2	2	1	2
Output	Number of retailer inspections	1,134	1,053	918	2,070
Output	Number of community partnerships	NA	26	40	45

### Performance Measures Descriptions

1) Number of tobacco retail licenses issued under the county ordinance. 2) Number of policies enables program to track and monitor whether partnership activities result in concrete changes to policy. 3) Retailers inspected on-site (includes annual compliance inspection, minimum legal sales age inspections, suspension inspections, education, and outreach visits as needed). 4) Tracked by the number of established and strengthened partnerships through specific project and program activities.

## Legal / Contractual Obligation

Tobacco Prevention and Education Grant, funded by the Oregon Public Health Division, OHA must comply with required work plans and assurances.

Multnomah County Ordinance 2015-1225.

ICAA OARS plus MSA, SYNAR, RICO, FDA, and Family Smoking Prevention and Tobacco Act.

Senate Bill 754 (Oregon Laws 2017, Chapter 701)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$409,996	\$330,632	\$489,515	\$319,532
Contractual Services	\$1,123	\$16,000	\$27,475	\$0
Materials & Supplies	\$25,202	\$3,484	\$26,106	\$4,543
Internal Services	\$73,755	\$131,607	\$130,870	\$66,614
<b>Total GF/non-GF</b>	<b>\$510,076</b>	<b>\$481,723</b>	<b>\$673,966</b>	<b>\$390,689</b>
<b>Program Total:</b>	<b>\$991,799</b>		<b>\$1,064,655</b>	
<b>Program FTE</b>	3.64	2.80	3.90	2.60

Program Revenues				
Fees, Permits & Charges	\$510,076	\$0	\$613,764	\$0
Intergovernmental	\$0	\$481,723	\$0	\$390,689
<b>Total Revenue</b>	<b>\$510,076</b>	<b>\$481,723</b>	<b>\$613,764</b>	<b>\$390,689</b>

## Explanation of Revenues

Program revenues include OHA, Oregon Public Health Division Tobacco Prevention and Education grant (\$390,689)

## Significant Program Changes

Last Year this program was: FY 2019: 40006-19 Tobacco Prevention and Control

**Department:** Health Department      **Program Contact:** Jae Douglas  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40008, 40010A  
**Program Characteristics:**

### Executive Summary

Health Inspections and Education is a fee-supported program that helps protect the public from disease and injury by investigating food and waterborne disease; educating about food safety practices; and performing inspections of licensed facilities. Participation in the Food and Drug Administration's Program Standards aligns Multnomah County with national standards. The inspection program received an outstanding rating in the 2018 Oregon Health Authority triennial review.

### Program Summary

Health Inspections and Education is a legally mandated program that protects the health and safety of the entire community by providing education, assuring safe food and water, controlling disease, improving safety in the work place, and reducing unintentional injuries as well as supporting other public health activities by incorporating prevention activities into the inspection process. The citizenry understands and expects the following program functions.

**Inspected Facilities:** The Health Inspections program has responsibility for assuring health and safety in 4,755 facilities including restaurants, mobile restaurants, hotel/motels, RV parks, organizational camps, warehouses, commissaries, vending machines, and jails. Most facilities receive two inspections per year. **Swimming Pools and Spas:** The program inspects and licenses 523 pools/spas to ensure pools are safe from hazards and disease. Field and classroom technical training is provided to approximately 60 pool operators each year. **Schools, Child and Adult Foster Care Facilities:** The program inspects 1,168 schools, childcare centers, and other service providers to ensure they handle food properly, are clean, and are free of health and safety hazards. **Small Drinking Water Systems:** There are 41 small water systems that are inspected every 3 to 5 years (dependent on the type of system) to ensure they are properly maintained and meet EPA water quality standards. There are also 12 additional systems that are monitored; the program responds to alerts as needed.

**Foodborne Illness Outbreaks:** Registered Environmental Health Specialists investigate local foodborne illness complaints in collaboration with the Communicable Disease Program and are key participants in emergency response. Multnomah County Environmental Health conducted 10 foodborne illness investigations and 27 vibrio investigations in restaurants in the previous calendar year. **Food Handler Training and Certification:** Multi-lingual training about safe food preparation in 7 languages is provided online and in person to food workers at all literacy levels to support health equity and entry into the workforce. Emergency contact information has been gathered for over 5,000 facilities, which can be used in a robo-calling system. A monthly newsletter/blog has over 3,000 subscribers consisting of food operators, regulators, and community members.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of licenses issued	6,568	7,271	6,880	7,445
Outcome	Number of Priority & Priority Foundation violations	15,858	12,770	14,130	13,738
Output	Number of facility inspections	14,829	16,408	14,428	14,331
Output	Number of Food Worker Cards issued	11,915	13,952	11,055	11,214

### Performance Measures Descriptions

1) Licenses issued excludes facilities inspected but not licensed (ie. schools, day cares, etc.). 2) Priority and Priority Foundation Violations are items noted during inspections that can directly affect the health of the consumer, leading to elevated food safety risk and requiring immediate correction. 3) Facilities inspected on-site (e.g. restaurants, mobile units, etc.). 4) Reflects number of people who completed certification in the given year. The certificate is a 3-year certificate and makes food workers employable in the food industry.

## Legal / Contractual Obligation

Legal mandates are 2009 FDA Food Code, 2012 OR Food Sanitation Rules; ORS Chapt. 30.890 (gleaning); ORS Chapt. 624; ORS Chapt. 448; MCC 21.612 (license fees); MCC Chapt. 5; MCC Chapt. 21 (Civil Penalty Ordinance); OR Dept. of Education Division 51 (Schools); OARS 581-051-0305; OARS Chapt. 333 (Licensed Programs); ORS 183 (Civil Penalty), ORS 164 (Food); ORS 700 (EHS License); ORS 414 (Childcare). OARS 333-018 Communicable Disease and Reporting 333-019 Communicable Disease Control.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$3,938,253	\$66,096	\$4,488,503	\$86,098
Contractual Services	\$274,040	\$15,000	\$268,844	\$15,000
Materials & Supplies	\$175,587	\$3,285	\$151,445	\$1,638
Internal Services	\$675,863	\$8,334	\$788,010	\$9,979
<b>Total GF/non-GF</b>	<b>\$5,063,743</b>	<b>\$92,715</b>	<b>\$5,696,802</b>	<b>\$112,715</b>
<b>Program Total:</b>	<b>\$5,156,458</b>		<b>\$5,809,517</b>	
<b>Program FTE</b>	34.02	0.65	36.75	0.76

Program Revenues				
Fees, Permits & Charges	\$5,063,743	\$0	\$5,696,802	\$0
Intergovernmental	\$0	\$92,715	\$0	\$112,715
<b>Total Revenue</b>	<b>\$5,063,743</b>	<b>\$92,715</b>	<b>\$5,696,802</b>	<b>\$112,715</b>

## Explanation of Revenues

Fees are set by ordinance. Refer to Chapter 21 MC Ordinance 08-140.

In FY19, the Inspections Program received a 3-year, \$90,000 per year, FDA Grant to assist culturally diverse food establishments to understand the food code, reduce violations, and improve inspection scores.

Multnomah County Environmental Health receives \$22,715 of support each year from the State of Oregon-Drinking Water Section. This level of support continues to stay consistent. Money received from the state is used to pay for staff who work in the drinking water program performing sanitary surveys and responding to alerts.

Health inspection and education licenses general fund fees: \$5,696,802

## Significant Program Changes

**Last Year this program was:** FY 2019: 40007-19 Health Inspections and Education

**Department:** Health Department      **Program Contact:** Jae Douglas  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40007, 40010A  
**Program Characteristics:**

### Executive Summary

The Vector program protects the public from emerging and imminent vector-borne (animal to human) diseases and reduces the social/economic impact of uncontained outbreaks. Major vector-borne diseases include Hantavirus, West Nile Virus and Zika virus. Climate changes in the Northwest (warming winter temperatures, increase in rainfall, and urban landscape management) will increase the risk of vector-borne diseases. Interventions include surveillance, analysis, proactive control/abatement of rodents and mosquitoes, and public education. The program includes enforcement of nuisance codes.

### Program Summary

Vector control and code enforcement are core public health services. Multnomah County's climate supports ideal mosquito and rat habitats. International airport and shipping along with migratory bird flyways provide avenues for new diseases to enter the community. Mosquito control began in the county in the 1930's, when malaria was endemic. In 2018, five counties in Oregon reported 58 mosquito-cases of West Nile Virus. There were no cases detected in Multnomah County. It is necessary to maintain current levels of surveillance and control to ensure early prevention and suppression of this and other vector-borne diseases using World Health Organization and Center for Disease Control best practices. Rodent control is critical to public health. Rodents can spread Hantavirus, plague and other diseases and can affect livability. A survey in the county rat population showed Toxoplasmosis (Cat Box Fever) in 6% of the rat population. Vector Control protects the community by serving all populations, while focusing on the vulnerable (i.e. elderly, children, homeless). The citizenry understands and expects these program functions.

The Vector program's major components include mosquito control; rodent control; and nuisance code enforcement. Mosquito control comprises the majority of the program's funds/staffing. The program is the primary provider of rodent control in the county. Nuisance code enforcement addresses public health code violations, including restaurant enforcement and dumping.

The program's main activities include collecting and identifying mosquitoes, birds, and rats; monitoring for and responding to emerging vector-borne disease such as Zika virus and now-endemic West Nile Virus; performing laboratory analysis on rats and mosquitoes to determine what species carry disease, their preferred habitats, and population size; abating/suppressing mosquitoes that carry West Nile Virus with pesticides with the least impact; reducing the mosquito breeding habitat through water control and vegetation management; and educating the average citizen and vulnerable populations about preventing vectors and their habitat through community meetings, pamphlets and the media.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of acres treated for mosquitoes	1,814	1,500	1,279	1,300
Outcome	Mosquitoes prevented (in billions)	0.91	1.00	0.64	0.65
Efficiency	Number of acres treated for mosquitoes per FTE	403	150	320	325
Output	Number of rodent inspections conducted	1,086	1,025	1,050	1,050

### Performance Measures Descriptions

1) Total acreage where mosquito suppression activities occurred is subject to variance in weather patterns, seasonal flooding, characteristics, and presence/absence of disease. 2) Based on industry standard estimate methodology: 500,000 mosquitoes per surface acre of water multiplied by number of acres treated, estimates mosquitoes prevented (to nearest whole number). 3) Total acreage treated per FTE. Five FTE were used to treat for mosquitoes in all reported years' calculations. 4) On-site inspections stemming from rodent complaints received.

## Legal / Contractual Obligation

Legal mandates are ORS 167, 452, 498, 506, and 634; OAR 635 and 603; 1968 Agreement City of Portland and Multnomah County – Title 13 and Title 8; MC 2011-129; NPDES General Aquatic Permit for Mosquito Control 2300A; 7 contractual mandates include grants, contracts, federal, regional, and local mandates.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$901,861	\$0	\$1,031,574	\$0
Contractual Services	\$26,500	\$0	\$26,500	\$0
Materials & Supplies	\$101,770	\$0	\$64,740	\$0
Internal Services	\$275,552	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$1,305,683</b>	<b>\$0</b>	<b>\$1,122,814</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,305,683</b>		<b>\$1,122,814</b>	
<b>Program FTE</b>	8.05	0.00	8.65	0.00

Program Revenues				
Fees, Permits & Charges	\$500	\$0	\$500	\$0
Other / Miscellaneous	\$1,000	\$0	\$1,000	\$0
Service Charges	\$290,935	\$0	\$302,612	\$0
<b>Total Revenue</b>	<b>\$292,435</b>	<b>\$0</b>	<b>\$304,112</b>	<b>\$0</b>

## Explanation of Revenues

Local municipalities' revenue contracts equal \$304,112. This include \$1,000 penalties, \$10,000 City of Portland - Sustainability, \$500 Special Animal Permits, \$20,000 Zika/West Nile Virus Funding, \$5,000 Oregon Zoo, \$1,500 Maywood Park and \$266,112 City of Portland - BES.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40008-19 Vector-Borne Disease Prevention and Code Enforcement



**Department:** Health Department      **Program Contact:** Jae Douglas  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Vital Records program is a legislatively mandated, fee supported program that issues birth and death certificates in accordance with Federal and State statutes to maintain the integrity and accuracy of birth and death information. The information is analyzed and used for public health prevention and intervention activities for positive health outcomes.

**Program Summary**

The Vital Records program is responsible for issuing birth and death certificates within the first six months after the birth or death, and within 24-hours of receipt of a request for certificate. Death certificates can be issued to family members, legal representatives, governmental agencies, or to the person or agency with personal or property rights. Birth records can be released to immediate family including grandparents, parents, brothers/sisters, legal representatives, or governmental agencies. Employees working in this program must be registered with the state to assure competency. An electronic birth and death data certification model was implemented requiring a significant increase in individual education with community partners.

The Vital Records program provides reliable information for decision-making in public health so that populations at risk for poor health outcomes are identified to receive proactive interventions. For example, pregnant women were identified as being at greater risk for death from H1N1 influenza by reviewing hospitalization data and death certificates. As a result, physicians and clinical services providing care to pregnant women were prioritized for receipt of vaccine, averting deaths in this high risk population. Also, the program assures accurate, timely and confidential registration of birth and death events minimizing the opportunity for identity theft and assuring accurate record of cause of death and the identification of parents of the born child.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of birth and death certificates issued	37,523	38,015	36,132	35,763
Outcome	Average number of days to issue error free certificate	1	1	1	1

**Performance Measures Descriptions**

- 1) Certificates issued: Measures program volume.
- 2) Days to issue: Measures rapidity of issuance process. The 24-hour timeframe from receipt to issuance is mandatory.

## Legal / Contractual Obligation

Legal mandates are ORS 97, 146, 432; OAR 830 and 333.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$722,783	\$0	\$465,829
Contractual Services	\$0	\$19,537	\$0	\$19,537
Materials & Supplies	\$0	\$17,221	\$2,195	\$14,495
Internal Services	\$0	\$190,839	\$0	\$394,207
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$950,380</b>	<b>\$2,195</b>	<b>\$894,068</b>
<b>Program Total:</b>	<b>\$950,380</b>		<b>\$896,263</b>	
<b>Program FTE</b>	0.00	7.12	0.00	4.75

<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$950,380	\$0	\$894,068
<b>Total Revenue</b>	<b>\$0</b>	<b>\$950,380</b>	<b>\$0</b>	<b>\$894,068</b>

## Explanation of Revenues

This is a fee driven, self-sustaining program. The fee schedule is established by the State of Oregon.  
Vital Stats Certs (Licenses): \$894,068 and Vital State Certs (Licenses) general fund fees: \$2,195

## Significant Program Changes

Last Year this program was: FY 2019: 40009-19 Vital Records

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Kim Toevs
<b>Program Offer Type:</b>	Existing Operating Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	40010B, 40007, 40008		
<b>Program Characteristics:</b>			

### Executive Summary

Communicable disease (CD) programming protects community health by responding to reportable communicable diseases with prompt disease investigation and limiting the spread of these diseases through disease control interventions. CD is a foundational public health program that upholds the State of Oregon communicable disease statutes through surveillance, disease investigations, disease intervention and control, and response evaluation. CDS responds 24/7 to events of public health importance.

### Program Summary

As part of foundational public health CD programming, CD Prevention and Control (CDPC) is a trusted community resource that protects the people of Multnomah County from preventable infectious diseases. The program limits the spread of life-threatening infectious diseases using core public health principles and tools. Staff conduct investigations that find people who have been exposed to serious diseases to make sure they get the information and care they need to stay healthy. To prevent these diseases before they start, CDPC works with communities to provide health education. For people who already have diseases, the program assures access to medicine and care. For healthcare providers, the program assures availability of appropriate diagnostic testing by providing a link to state and national laboratories that test for rare pathogens. CDPC is also the frontline of an international system that tracks communicable disease threats, collecting and sharing essential information with the State of Oregon and the Centers for Disease Control and Prevention.

CDPC employs a culturally diverse staff who include highly-trained public health nurses, epidemiologists, community health specialists, analysts, and administrative staff with knowledge of infectious disease transmission and State reporting rules. Staff work with other Health Department programs, including Environmental Health, Health Officers, and Emergency Preparedness; provide technical assistance to public health professionals; and support newly arriving refugees, who are disproportionately affected by communicable diseases common in their countries of origin.

CDPC services include limited specialty care services for communicable diseases of public health significance; epidemiologic investigation and assured preventive health measures in response to reportable disease exposures and outbreaks; response planning and implementation for emerging infectious diseases; and public health disease surveillance and analysis to track communicable disease threats. CDPC is also expanding partnerships with government and community partners to build capacity to address emerging issues, including the need for increased provider support and case investigation.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of disease report responses	5,787	5,560	5,434	5,500
Outcome	Location of contacts (pertussis, meningococcal meningitis, Hepatitis A and B) within one day	74%	70%	83%	70%
Quality	Percent of tuberculosis (TB) patients completing treatment within 12 months	94%	90%	90%	90%
Outcome	Percent of assisted facilities successful in meeting immunization law requirements	91%	90%	90%	90%

### Performance Measures Descriptions

1) Disease & laboratory reports received/reviewed/responded to. 2) Timeliness of response. Potentially exposed persons. Excludes chronic Hepatitis B cases. 3) National goal for completing TB treatment (90% per OHA & CDC).

## Legal / Contractual Obligation

ORS Chapters 433, multiple sections. OAR 333-012-0065: Epidemiology and Accident Investigation and Reporting  
 OAR 333, Division 17, 18 and 19: Disease Control, Disease Reporting, and Investigation and Control of Diseases. OAR  
 333-026-0030: Civil Penalties for Violations of OAR Chapter 333, Divisions 18 and 19. OHA ACDP Investigative Guidelines,  
 per OAR 333, Div. 19. Local Health Department Program Elements PE 01, PE 03, PE 25, PE 43. OHA and CLHO BT/CD &  
 TB Assurances  
 OAR 437: OR-OSHA: Bloodborne Pathogens 1910.1030. CDC recs: Immunization of Health-Care Workers, Vol. 46/RR-18;  
 Guidelines for Preventing the Transmission of TB in Health-Care Facilities, Vol. 43/RR-13.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,447,214	\$1,603,312	\$1,600,667	\$1,721,393
Contractual Services	\$63,449	\$50,337	\$66,829	\$33,128
Materials & Supplies	\$184,679	\$17,106	\$119,368	\$31,894
Internal Services	\$744,364	\$201,612	\$713,136	\$244,710
<b>Total GF/non-GF</b>	<b>\$3,439,706</b>	<b>\$1,872,367</b>	<b>\$2,500,000</b>	<b>\$2,031,125</b>
<b>Program Total:</b>	<b>\$5,312,073</b>		<b>\$4,531,125</b>	
<b>Program FTE</b>	17.79	12.61	10.91	13.72

Program Revenues				
Intergovernmental	\$0	\$1,557,711	\$0	\$1,725,035
Other / Miscellaneous	\$0	\$180,288	\$0	\$188,025
Service Charges	\$0	\$134,368	\$0	\$118,065
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,872,367</b>	<b>\$0</b>	<b>\$2,031,125</b>

## Explanation of Revenues

CDPC is funded by federal and state grants and client fees. Federal and state grants support best practices (e.g., TB evaluations and LTBI treatment support for newly arriving refugees) and expanded public health surveillance activities (e.g., Metropolitan Area Pertussis Surveillance and Emerging Infectious Disease program) that build upon statutory responsibilities. Internal service reimbursements are for occupational health services provided to county employees and volunteers.

State of Oregon LPHA (Direct State and Federal through State): \$ 1,124,453  
 Refugee Health Promotion (Direct Federal): \$ 98,400  
 Emerging Infections Program: \$ 523,240  
 Medical Fees: \$ 285,025

## Significant Program Changes

**Last Year this program was:** FY 2019: 40010A-19 Communicable Disease Prevention and Control

In FY20, Program Offer 40014-19 Immunization, which includes capacity for school exclusion immunization work, was consolidated into this offer as part of divisional and program offer reorganizations. In FY20, this offer has decreases in FTE, scope/level of services, and revenue for tuberculosis and immunization services. CD programming will continue to assure this scope of services is supported by local health system capacity. In FY20, this offer was scaled with 40011-19 STD/HIV/Hep C Community Prevention Program, which is now 40010B-20, as part of divisional and program offer reorganizations that merge surveillance, disease investigations, disease intervention and control, including speciality clinical operations, and response evaluation. 40010B-20 provides immunization capacity. CD programming will continue to redesign during FY20 to improve efficiency and move forward foundational public health CD services.

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40010A, 40012B, 40061  
**Program Characteristics:**

### Executive Summary

Communicable Disease (CD) programming protects community health by responding to reportable communicable diseases with prompt disease investigation and limiting the spread of these diseases through disease control interventions. CD is a foundational public health program that upholds the State of Oregon communicable disease statutes through surveillance, disease investigations, disease intervention and control, and response evaluation. The STD/HIV/Hep C Community Prevention Program prioritizes reducing STD inequities among racial and sexual minority adolescents/young adults.

### Program Summary

As part of foundational public health CD programming, the STD/HIV/Hep C Community Prevention Program uses population-focused approaches to prevent disease transmission. Locally, sexual health disparities persist by race/ethnicity, sexual orientation, and gender. For example, the syphilis rate for gay and bisexual men is as much as 200 times higher than for heterosexual men; and African Americans have higher rates of chlamydia, gonorrhea, and syphilis. A cornerstone of the program is designing services to reduce long-standing inequities among racial, ethnic, and sexual minority communities.

Program activities include: Partner Services - staff contact infected and exposed people and their sex/needle-sharing partners, link them to testing and treatment, and counsel for behavior change). STD Clinical Services - Medical staff provide low barrier, timely evaluation, treatment, and prevention counseling in a judgment-free, culturally-relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals (265 people accessed PrEP during 2018). 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. 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. The program has a strong record of meeting national benchmark performance measures, and is nationally recognized for innovation and program coordination, as well as high client satisfaction across all demographics.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of STD and HIV test clinical encounters	5,475	5,000	4,500	5,000
Outcome	Percent of all County gonorrhea/syphilis/HIV cases diagnosed through this program	15%	15%	15%	15%
Quality	Percent of syphilis/HIV cases investigated	75%	85%	85%	85%
Output	Number of patients initiated on HIV prevention medication (PrEP)	265	150	230	250

### Performance Measures Descriptions

1) The STD clinic will move to a new location in April 2019. This may have an impact on the number of clients accessing the service. 2) Shows impact of program's ability to find, diagnose, and treat reportable STDs and capacity to target services to those at highest risk. 3) Priority diseases recommended by CDC (high priority gonorrhea also investigated although not included here). 4) HIV PrEP prevents infection in HIV negative individuals.

## 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	2019	2019	2020	2020
Personnel	\$323,806	\$2,455,702	\$246,341	\$2,615,009
Contractual Services	\$134,863	\$1,674,969	\$120,387	\$1,995,679
Materials & Supplies	\$81,003	\$43,109	\$92,726	\$54,970
Internal Services	\$242,365	\$495,208	\$479,605	\$406,863
Capital Outlay	\$0	\$0	\$0	\$80,000
<b>Total GF/non-GF</b>	<b>\$782,037</b>	<b>\$4,668,988</b>	<b>\$939,059</b>	<b>\$5,152,521</b>
<b>Program Total:</b>	<b>\$5,451,025</b>		<b>\$6,091,580</b>	
<b>Program FTE</b>	2.77	22.50	1.13	22.77

Program Revenues				
Intergovernmental	\$0	\$4,318,688	\$0	\$4,802,221
Service Charges	\$0	\$350,300	\$0	\$350,300
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,668,988</b>	<b>\$0</b>	<b>\$5,152,521</b>

## 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: \$ 436,146  
 Federal STD Surveillance Network Grant (SSuN): \$ 75,000  
 HIV EIO: \$ 4,291,075  
 Medical Fees: \$ 350,300

## Significant Program Changes

**Last Year this program was:** FY 2019: 40011-19 STD/HIV/Hep C Community Prevention Program

In FY20, this offer was scaled with 40010A-20 Communicable Disease Prevention and Control as part of divisional and program offer reorganizations that merge CD surveillance, disease investigations, disease intervention and control, including speciality clinical operations, and response evaluation. CD programming will continue to redesign during FY20 to improve efficiency and move forward foundational public health CD services, including assuring an appropriate scope of services is supported by local health system capacity.

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40010A, 40010B  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Communicable disease (CD) programming protects community health by responding to reportable communicable diseases with prompt disease investigation and limiting the spread of these diseases through disease control interventions, including prevention focused interventions. CD is a foundational public health program that upholds State of Oregon statues through disease tracking, investigation, intervention, control, and response evaluation. Vaccine hesitancy remains a local issue that lowers immunization rates and increases the spread of preventable communicable diseases.

**Program Summary**

As part of foundational public health CD programming, CD Prevention and Control (CDPC) is a trusted community resource that protects the people of Multnomah County from preventable infectious diseases. The program limits the spread of life-threatening infectious diseases using core public health principles and tools. Staff conduct investigations that find people who have been exposed to serious diseases to make sure they get the information and care they need to stay healthy. To prevent these diseases before they start, CDPC's culturally and linguistically diverse staff works with communities and stakeholders to provide health education, training, and technical assistance tailored to meet their specific needs. Vaccine hesitancy within local communities has played a major role in communicable disease outbreaks such as measles.

Vaccine hesitancy programming leverages CDCP's culturally-specific, health equity focused partnership building approach, as well as existing relationships with childcare providers and schools, to address immunization rates and barriers to vaccinations. Activities include: working with regional public health partners to analyze Health Share of Oregon data; engaging culturally specific communities, health system partners, and other local stakeholders; developing and implementing a communications campaign and health education materials; supporting community health workers to disseminate communications and educational materials and provide technical assistance to ensure partners are able to provide health education and linkage to appropriate immunization services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of partners, including health care providers, engaged	NA	NA	NA	10
Outcome	Number of communication activities	NA	NA	NA	6

**Performance Measures Descriptions**

## Legal / Contractual Obligation

ORS Chapters 433, multiple sections. OAR 333-012-0065: Epidemiology and Accident Investigation and Reporting  
OAR 333, Division 17, 18 and 19: Disease Control, Disease Reporting, and Investigation and Control of Diseases. OAR  
333-026-0030: Civil Penalties for Violations of OAR Chapter 333, Divisions 18 and 19. OHA ACDP Investigative Guidelines,  
per OAR 333, Div. 19. Local Health Department Program Elements PE 01, PE 03, PE 25, PE 43. OHA and CLHO BT/CD &  
TB Assurances  
OAR 437: OR-OSHA: Bloodborne Pathogens 1910.1030. CDC recs: Immunization of Health-Care Workers, Vol. 46/RR-18;  
Guidelines for Preventing the Transmission of TB in Health-Care Facilities, Vol. 43/RR-13.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$71,571	\$0
Contractual Services	\$0	\$0	\$5,000	\$0
Materials & Supplies	\$0	\$0	\$3,429	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$80,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$80,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was:



<b>Department:</b>	Health Department	<b>Program Contact:</b>	Tasha Wheatt-Delancy
<b>Program Offer Type:</b>	Existing Operating Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	40011, 40025		
<b>Program Characteristics:</b>			

**Executive Summary**

The HIV Health Services Center (HHSC) provide community-based primary care and support services to 1485 highly vulnerable people living with HIV. Services target low income, uninsured, and people experiencing homelessness, mental illness and substance abuse, as well as other special needs populations. These services contribute to lower mortality from HIV, fewer disease complications and the associated costs, and reduced transmission of HIV in the community.

**Program Summary**

The HIV Health Services Center (HHSC), the only Ryan White clinic in Oregon, serves over 1,485 clients each year and is part of the County's Federally Qualified Health Center (FQHC). HHSC's services include culturally specific LGBTQI HIV/HCV outpatient medical care, mental health services, case management, health education, HIV prevention, art therapy, IPV universal education and screening with referral to community resources, risk reduction support, medication assisted therapy and treatment adherence counseling. Access to and use of HIV medications is optimized by clinical pharmacy services. Patient navigation services assist clients with access to housing and other needs for support. In addition, collaboration with a community partner also makes substance abuse peer support available at the clinic. HHSC integrates prevention into all services to reduce client risk of HIV transmission. The clinic is supported by an active Client Advisory Council and a well-established network of HIV social services providers, and is an AIDS Education and Training Center site, training over 40 doctors, nurses, clinic administrators, quality directors and pharmacists each year. The clinic serves as a Practice Transformation Training site to mentor providers in rural FQHCs caring for clients living with HIV. Clients continue to be severely affected by poverty, lack of stable housing, and lack of adequate services to treat mental illness and substance abuse. The clinic also provides Hepatitis C assessment and treatment to the County's non-HIV Primary Care Patients. HHSC provides intensive onsite medical case management and housing case management to ensure clients who are homeless to secure access to housing resources (short and long term), identify barriers and develop strategies to empower clients to remain engaged in medical care and adherent to medications. Implementation of rapid antiretroviral therapy for newly diagnosed persons living with HIV diagnoses and intake coordination have been implemented in the HIV clinic to enhance engagement and retention in disenfranchised populations who struggle with social and health disparities. Engagement in health insurance of this vulnerable patient population who travel the state to be seen at this clinic is a critical component of the medical case management/eligibility specialist function embedded in the care delivery model of HIV clinic.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of unduplicated HIV Clinic clients.	1488	1,425	1,450	1,425
Outcome	Percent of HIV Clinic clients whose last viral load test is below 200 copies.	89%	95%	90%	90%

**Performance Measures Descriptions**

- 1) This measure shows how many unique clients were seen at the HIV Health Services Center during the fiscal year
- 2) This test measures how much virus is in the blood. Below 200 is a strong sign of individual health and also very low chance of transmitting HIV to others.

## Legal / Contractual Obligation

Federal HIV grant and contract funds are restricted. Part A grant requires: 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill & Clark Counties; 2) 10% cap on planning & administration, requiring the County to cover some administrative costs; and 3) The County must spend local funds for HIV services at least at the level spent in the previous year.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,058,165	\$2,857,912	\$976,304	\$3,162,174
Contractual Services	\$160,724	\$16,778	\$124,092	\$16,619
Materials & Supplies	\$56,565	\$265,627	\$115,163	\$140,749
Internal Services	\$176,769	\$1,004,139	\$113,154	\$1,079,866
<b>Total GF/non-GF</b>	<b>\$1,452,223</b>	<b>\$4,144,456</b>	<b>\$1,328,713</b>	<b>\$4,399,408</b>
<b>Program Total:</b>	<b>\$5,596,679</b>		<b>\$5,728,121</b>	
<b>Program FTE</b>	7.04	24.12	4.94	25.09

Program Revenues				
Intergovernmental	\$0	\$2,997,636	\$0	\$2,827,202
Other / Miscellaneous	\$0	\$0	\$0	\$293,010
Service Charges	\$1,452,223	\$1,146,820	\$1,328,713	\$1,279,196
<b>Total Revenue</b>	<b>\$1,452,223</b>	<b>\$4,144,456</b>	<b>\$1,328,713</b>	<b>\$4,399,408</b>

## Explanation of Revenues

Ryan White Part A funds for 19-20: \$1,293,679 (Medical, Case management, Non medical case management and Housing)  
 Ryan White Part D funds for 19-20: \$368,760 (Women, Children, Youth and IPV program)  
 Ryan White Part F funds for 19-20: \$13,121 (OHSU dental referrals case management) and \$81,400. (AETC)  
 Primary Care Grant (330) for FY 20: \$45,000.  
 Primary Care HIV-Early Intervention: \$811,624  
 Oregon Health Authority HIV Care: \$98,606. (OA/Case Management support)  
 Oregon Health Authority Ryan White: \$115,000  
 Medical Fees: \$2,607,909  
 FOCUS Hepatitis C Foundation Grant 19-20: Hep C Primary Care Screening and Treatment: \$293,010

## Significant Program Changes

**Last Year this program was:** FY 2019: 40012-19 Services for Persons Living with HIV

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

HIV Health Services Staffing was reduced by 1.13 FTE.

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40010B  
**Program Characteristics:**

### Executive Summary

The HIV Care Services Program provides community-based services to 2,600 highly vulnerable people living with HIV through administering and coordinating federal and state grants. Services are focused on people who are low income, uninsured, and people experiencing homelessness, and/or mental illness/substance abuse, as well as other special needs populations. These services contribute to lower mortality from HIV, fewer disease complications and the associated costs, and reduced transmission of HIV in the community.

### Program Summary

HIV Care Services Program (HCS) coordinates a regional 6-county care system that promotes access to high quality HIV services through contracts with the health department and community organizations. In the past year HCS served over 2,600 clients. HIV infection affects different subpopulations at different rates in the US. HCS's overarching goal is to support individuals already infected to achieve successful HIV treatment. Called viral suppression, successful treatment means higher quality of life, greater health, longer life, and virtually no transmission to other people. HCS work diligently with partners to assure equitable rates of viral suppression, regardless of race, income, sexual orientation, or gender. The three groups with least viral suppression locally currently are Blacks/African Americans, injection drug users, and youth/young adults ages 13-29. People who are unstably housed/experiencing homelessness have significant barriers to treatment which also impacts viral suppression.

With these disparities in mind, HCS contracts services to meet basic needs and improve linkage to care and adherence to medication, including through culturally specific case management, with the end goal of higher viral suppression rates and improved health outcomes for people living with HIV. Data is shared regularly with service providers to appropriately focus resources for clients with highest need.

HCS funded services include: Early Intervention (Outreach ensures early identification of people living with HIV and linkage to medical care). Healthcare – (A coordinated primary care system provides medical, dental, and mental health and substance abuse treatment). Service Coordination (Case management connects clients with health insurance, housing, and other services critical to staying in care). Housing (Rental assistance and building life skills provide housing and support to clients who are among the most vulnerable in the county to ensure ability to remain engaged in medical care and adherent to medications). Health Promotion (Behavioral education provides clients with self-management skills). Food (Congregate meals, home delivered meals, and access to food pantries eliminates food insecurity and provides nutrition for managing chronic illness. Planning (A community-based council identifies service needs and allocates funding to address these gaps).

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of unduplicated HCS clients served (all service types/whole 6-county system)	2,634	2,700	2,650	2,675
Outcome	Percent of HCS clients (all 6 counties) who are virally suppressed	83%	NA	85%	90%
Outcome	Increase viral suppression rate of Black/African Americans to reduce the disparity compared with Whites	81%	NA	82%	83%

### Performance Measures Descriptions

2) This test measures how much virus is in the blood. Below 200 is a strong sign of individual health and per new scientific evidence an undetectable viral load will not transmit the HIV virus. 3) Viral suppression rates for Black/African-Americans are significantly lower compared to whites and other people of color. Numbers are too small to see statistical significance for some other demographic groups.

## Legal / Contractual Obligation

Federal HIV grant and contract funds are restricted. Part A grant requires: 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill & Clark Counties; 2) Community-based Planning Council; 3) 10% cap on planning & administration, requiring the County to cover some administrative costs; and 4) The County must spend local funds for HIV services at least at the level spent in the previous year.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$652,884	\$0	\$823,697
Contractual Services	\$3,500	\$3,446,892	\$5,500	\$3,571,199
Materials & Supplies	\$0	\$36,071	\$1,196	\$21,730
Internal Services	\$32,445	\$151,197	\$37,990	\$157,880
<b>Total GF/non-GF</b>	<b>\$35,945</b>	<b>\$4,287,044</b>	<b>\$44,686</b>	<b>\$4,574,506</b>
<b>Program Total:</b>	<b>\$4,322,989</b>		<b>\$4,619,192</b>	
<b>Program FTE</b>	0.00	5.10	0.00	6.67

Program Revenues				
Intergovernmental	\$0	\$4,287,044	\$0	\$4,574,506
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,287,044</b>	<b>\$0</b>	<b>\$4,574,506</b>

## Explanation of Revenues

Ryan White Part A funds for 19-20: \$ 2,495,899 (Medical, Case management, Non medical case management and Housing)

Oregon Health Authority Ryan White: \$ 2,078,607

## Significant Program Changes

**Last Year this program was:** FY 2019: 40012-19 Services for Persons Living with HIV

The HIV Health Services Center and HIV Care Services are now split into two separate program offers, 40012A and 40012B respectively.

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Medicaid Enrollment assists uninsured and under-insured Oregonians to gain access to health services by providing application and enrollment assistance and advocacy to families and children applying for state and federally provided Medical and Dental coverage as well as other forms of assistance. Additionally patients are screened for eligibility to sliding scale (discounted fees) for services received, if they are unable to obtain other coverage. Last year, more than 16,000 clients were screened and 11,028 enrolled in OHP.

**Program Summary**

The Medicaid Enrollment program provides outreach and education efforts which increase the number of clients who complete the Oregon Health Plan (OHP) enrollment process; access to health care services (particularly for pregnant women and children); and ensures continuity of coverage at re-certification. The program aims to provide dignified access to health care for County residents in collaboration with existing Multnomah County services, by securing insurance coverage for eligible individuals.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Annual number of clients screened	13,643	14,000	15,000	16,000
Outcome	% of Self-Pay patients in Medical	14%	15%	13.9%	14%
Outcome	% of Self-Pay patients in Dental	10%	14%	8%	11.5%

**Performance Measures Descriptions**

Output: Annual number of clients completing financial screening to determine eligibility for available programs  
Outcome: % of self-pay patients in medical and dental to ensure that patients are screened for services available.

## Legal / Contractual Obligation

The Medicaid Enrollment Program is on contract with the State Division of Medical Assistance Programs (DMAP) to provide application and enrollment assistance to all OHP/Medicaid eligibles including education regarding managed health care. Information shall include establishing a Date of Request (DOR) or effective date of coverage, managed medical, dental, and mental health care, covered services (including preventive and emergent), client rights and responsibilities, and the grievance and appeal process.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$430,228	\$1,272,492	\$546,132	\$1,245,081
Contractual Services	\$18,000	\$0	\$18,000	\$0
Materials & Supplies	\$10,599	\$2	\$13,303	\$449
Internal Services	\$230,215	\$160,461	\$251,696	\$144,416
<b>Total GF/non-GF</b>	<b>\$689,042</b>	<b>\$1,432,955</b>	<b>\$829,131</b>	<b>\$1,389,946</b>
<b>Program Total:</b>	<b>\$2,121,997</b>		<b>\$2,219,077</b>	
<b>Program FTE</b>	4.00	14.00	5.74	12.26

Program Revenues				
Intergovernmental	\$0	\$295,693	\$0	\$294,466
Service Charges	\$0	\$1,137,262	\$291,512	\$1,095,480
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,432,955</b>	<b>\$291,512</b>	<b>\$1,389,946</b>

## Explanation of Revenues

Medicaid/Medicare eligibility receives funding from the Division of Medical Assistance Programs (DMAP) which provides compensation to eligible Federally Qualified Health Centers (FQHCs) for outreach activities. DMAP provides compensation through calculating a rate that is equal to 100% of allowable, specific direct costs according to OAR 410-147-0400. The revenue for FY20 is based on actual expenses from FY2019. DMAP disallows the cost of supervision, office support and interpretation services. General fund provides funding for expenditures not covered by state funding.

Division of Medical Assistance Programs (DMAP): \$1,095,480  
 Federal Primary Care (330) Grant: \$294,467  
 FQHC Medicaid Wraparound: \$291,512

## Significant Program Changes

**Last Year this program was:** FY 2019: 40016-19 Medicaid/Medicare Eligibility

**Department:** Health Department      **Program Contact:** Len Barozzini  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Dental Services provides County residents with essential, urgent, routine, and preventive services in clinic settings and school-based programs. Program works with community partners, targeting under-served populations; providing service to nearly 27,000 people in Multnomah County. The Dental Program is the largest Safety Net provider for vital dental care in the County and provides child based services to uninsured and underinsured clients; focuses on access for clients with chronic diseases, children and pregnant women. The program uses evidence based practice guidelines.

**Program Summary**

The Dental program has four distinct service components. Six dental clinics provide comprehensive and urgent dental treatment for Medicaid (Oregon Health Plan) and self-pay patients. The clinics perform outreach to clients who have not had a visit in the past 12-24 months. The clinical program also focuses on services for pregnant women in order to reduce the risk of premature birth, and to foster a good oral health learning collaboration between the dental program, and expectant mothers. The School and Community Oral Health Program provides dental education, and dental sealant services to children in Multnomah County schools, and provides outreach, education, and dental treatment specifically to children 0-36 months in our clinic setting, known as our Baby Day program. The Dental program also delivers mandated services within two Corrections Health sites. The fourth component of the program consists of mentoring and training 3rd and 4th year OHSU Dental students who provide services to our clients in the clinics, under the preceptorship of our providers, which helps cultivate a workforce interested in providing public health today and into the future. Dental Services is an essential program that provides education, prevention, and dental treatment to the poorest and most vulnerable in Multnomah County. Services include dental sealants (protective coatings placed on children's molar teeth), which have been a mainstay at our School and Community Oral Health Program for many years, preventive measures and improving access for clients who have recently gained insurance through our outreach efforts. The focus on metrics benefits the community, quality of care, and our financial picture. The Dental program continues to search for ways to deliver the best evidence based oral healthcare services, to the most persons, in a reasonable, and cost-effective manner.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Billable patient visits (including School and Community Oral Health)	77,000	91,573	84,000	91,706
Outcome	No show rate	18%	17%	16%	15%
Quality	Opioid Prescribing by Dentists	CY 16~2,240	CY 17~1,800	CY 17~1,108	CY 18~1,000

**Performance Measures Descriptions**

RETIRED: Measure 3: percent of patients who say that provider always listens. As this figure was, and is consistently high, often over 90%, we feel it is not a useful benchmark going forward. It has been replaced: NEW: Measure 3: Opioid prescribing by dentists: As this measurement is critical, and impressive and valued by all HD employees, we have opted to add this important measurement for FY 19, in order to continue to emphasize its importance to the program, and the county as a whole. These figures are based on a CY. not FY.

## Legal / Contractual Obligation

Dental services are a requirement of the Bureau of Primary Health Care 330 Grant.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$11,946,957	\$4,345,224	\$10,792,617	\$6,559,060
Contractual Services	\$189,186	\$223,753	\$172,486	\$230,966
Materials & Supplies	\$488,472	\$743,965	\$527,734	\$739,097
Internal Services	\$1,925,564	\$2,452,611	\$2,027,947	\$2,470,195
<b>Total GF/non-GF</b>	<b>\$14,550,179</b>	<b>\$7,765,553</b>	<b>\$13,520,784</b>	<b>\$9,999,318</b>
<b>Program Total:</b>	<b>\$22,315,732</b>		<b>\$23,520,102</b>	
<b>Program FTE</b>	81.24	48.25	62.65	70.16

Program Revenues				
Intergovernmental	\$0	\$312,564	\$0	\$312,000
Other / Miscellaneous	\$500,000	\$0	\$700,000	\$142,070
Beginning Working Capital	\$263,961	\$0	\$459,000	\$0
Service Charges	\$13,786,218	\$7,452,989	\$12,361,784	\$9,545,248
<b>Total Revenue</b>	<b>\$14,550,179</b>	<b>\$7,765,553</b>	<b>\$13,520,784</b>	<b>\$9,999,318</b>

## Explanation of Revenues

The primary source of revenue is Medicaid payments and patient fees.

Dental Patient Fees: \$ 23,066,032

PC Coordination Fund: \$ 142,070

Federal Primary Care (330) Grant: \$ 312,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40017-19 Dental Services

For FY 2020 the program will continue to deliver services in a compassionate, whole body manner in order to facilitate and promote integration with primary care. The County dental program has been a State leader at reducing the number opioids prescribed by over 70% from CY 2015 compared to CY 2017.



**Department:** Health Department      **Program Contact:** Kathleen Humphries  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Women, Infants and Children Program (WIC) serves approximately 14,500 pregnant women and mothers and their infants and young children per month. WIC promotes positive health outcomes through strengthening life course nutrition with healthful foods and nutrition education, promoting and supporting breastfeeding, and providing comprehensive health and social service referrals.

### Program Summary

WIC is a public health program that improves the nutrition and nutrition-related health of pregnant women, nursing moms, infants, and young children. The program is committed to raising the level of nutrition-related health status experienced by the most vulnerable members within the county. WIC provides nutritious food, nutrition education and counseling, growth monitoring, health screening, peer breastfeeding support, and networks of support to eligible families. These services strive to have lasting effects so families enjoy better nutrition and health throughout their lives.

Early life nutrition affects every aspect of health across the life course. Evaluation of WIC has demonstrated that families on WIC are in overall better health and have less food insecurity when they are on the program. WIC mothers have a 25% reduced risk for preterm birth and 44% lower risk for low birth weight babies, resulting in better health and less chronic disease throughout their lives. For every dollar spent on a pregnant woman in WIC, up to \$4.21 is saved in Medicaid costs. Supporting families in their breastfeeding goals is another key focus area for WIC. Breastfeeding provides immunity protection to infants, health benefits to the mother, and lifelong risk reduction for important chronic diseases. Breastfeeding promotion at WIC and the Breastfeeding Peer Counseling (BFPC) program use an evidence-based support model that is effective for the County's most vulnerable families who experience significant economic and racial disparities in breastfeeding.

WIC served over 21,700 different clients last year with multiple visits and provided access to other support services including prenatal and children's healthcare, immunizations, Head Start, housing and day care assistance, social services, referrals to other County public health programs, SNAP and other food assistance. WIC acts as a core referral center for other health and social services and is key in enrolling families in Medicaid and private insurance and other early childhood programs. The 18 full time nutrition provider staff conducted 49,614 visits in 2018. WIC's emphasis on prenatal health and early childhood helps the County support health over the life course and reduce health inequities. For example, 27% of WIC clients do not speak English and, in a given month, WIC serves 3,813 clients who speak 40 languages other than English. The program responds to this need by having signage in multiple languages, hiring professional staff who speak multiple languages fluently, and contracting with outside agencies to provide interpretation services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of WIC clients in one year who receive healthful foods with E-WIC benefits	21,793	21,896	21,800	21,800
Outcome	Percent of WIC clients initiating breastfeeding	92%	93%	92.5%	92.5%
Outcome	Number of nutrition education contacts with WIC families	49,208	47,133	46,302	47,000
Quality	Average number of clients served per month in languages other than English	3,813	4,080	3,900	3,900

### Performance Measures Descriptions

1) Participants receive healthful foods and culturally specific ideas on how to use them. Infants who are breastfeeding receive food benefits via enhanced food packages for their nursing mother. 2) % of mothers who initiated breastfeeding after delivery. 3) All participant contacts that include nutrition education, counseling, or support activity or interaction. 4) Families who indicate "prefers a language other than English" and for whom interpreters were provided and family was successful in becoming certified at WIC.

## Legal / Contractual Obligation

The Special Supplemental Nutrition Program for Women, Infants, and Children are authorized by Section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786, as amended through PL105-394, and the regulations promulgated pursuant thereto, 7 CFR Ch. II, Part 246.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,115,100	\$2,639,861	\$1,333,009	\$2,665,245
Contractual Services	\$100,085	\$0	\$62,169	\$0
Materials & Supplies	\$65,562	\$2,060	\$63,951	\$590
Internal Services	\$786,153	\$332,888	\$740,871	\$308,973
<b>Total GF/non-GF</b>	<b>\$2,066,900</b>	<b>\$2,974,809</b>	<b>\$2,200,000</b>	<b>\$2,974,808</b>
<b>Program Total:</b>	<b>\$5,041,709</b>		<b>\$5,174,808</b>	
<b>Program FTE</b>	11.55	26.90	13.48	25.12

Program Revenues				
Intergovernmental	\$0	\$2,974,809	\$0	\$2,974,808
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,974,809</b>	<b>\$0</b>	<b>\$2,974,808</b>

## Explanation of Revenues

WIC's revenue includes federal funds in the intergovernmental revenue agreement between Multnomah County as the local public health authority (LPHA) and the State of Oregon Public Health Services. WIC is also funded with County general fund. County general funds assist the WIC program in meeting the Federal/State funding requirement of scheduling new pregnant women within 10 days of application to the program. Starting in FY17, Title V grant funds were also part of the WIC portfolio of funding. These funds are used to increase African American culturally specific breastfeeding support in Multnomah County through WIC.

State WIC grant: \$ 2,899,808

State Maternal & Child Health (Title V) grant: \$ 75,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40018-19 Women, Infants, and Children (WIC)

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The North Portland Health Center provides comprehensive, culturally appropriate primary care, enabling and behavioral health services to vulnerable residents who are uninsured or under-insured and otherwise may not have access to medical care and is part of the County's FQHC. The clinic provides care to approximately 3800 patients that identify North Portland Health Center as their medical home.

**Program Summary**

North Portland Health Center primary care services are designed to be a Patient Centered Primary Care Home (PCPCH). This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided and include: treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. North Portland Health Center plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a North Portland Health Center assigned PCP	3999	4900	3857	4000
Outcome	% Adolescent Well Visits Completed	57.8%	51%	57%	57%

**Performance Measures Descriptions**

**Output:** Number of patients with a NPHC assigned PCP seen within the last 12 months.  
**Outcome:** % Adolescent Well Visits Completed

## Legal / Contractual Obligation

NPHC complies with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. MCHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,128,824	\$1,814,064	\$1,915,189	\$1,756,091
Contractual Services	\$0	\$54,603	\$0	\$105,400
Materials & Supplies	\$46,583	\$157,500	\$57,278	\$157,981
Internal Services	\$587,176	\$656,484	\$422,938	\$799,194
<b>Total GF/non-GF</b>	<b>\$2,762,583</b>	<b>\$2,682,651</b>	<b>\$2,395,405</b>	<b>\$2,818,666</b>
<b>Program Total:</b>	<b>\$5,445,234</b>		<b>\$5,214,071</b>	
<b>Program FTE</b>	12.60	18.40	10.40	16.00

Program Revenues				
Intergovernmental	\$0	\$583,281	\$0	\$725,661
Service Charges	\$2,755,354	\$2,099,370	\$2,370,595	\$2,093,005
<b>Total Revenue</b>	<b>\$2,755,354</b>	<b>\$2,682,651</b>	<b>\$2,370,595</b>	<b>\$2,818,666</b>

## Explanation of Revenues

This program is supported by a federal BPHC grant, State Family Planning grant, state funds for maternal & child health services, as well as Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 4,463,600  
 Federal Primary Care grant PC 330: \$ 125,280  
 Federal Primary Care/Homeless grant: \$ 600,381

## Significant Program Changes

**Last Year this program was:** FY 2019: 40019-19 North Portland Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

North Portland Clinic Staffing was reduced by 4.60FTE.

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Northeast Health Center (NEHC), provides comprehensive, culturally appropriate primary care, enabling, and behavioral health services to the uninsured and under-insured residents of Northeast Portland and is part of the County's Federally Qualified Health Center (FQHC). The Northeast Clinic was strategically placed to provide vital services to a population that otherwise may not have access to medical care. The clinic provides care to approximately 4900 patients that identify Northeast Health Center as their primary care home.

**Program Summary**

Northeast Health Clinic primary care services are designed to be a Patient Centered Primary Care Home (PCPCH). This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided and include: treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. Northeast Health Clinic plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a Northeast Health Center assigned PCP	5200	6100	4900	5200
Outcome	% Adolescent Well Visits Completed	53.6%	51%	53%	54%

**Performance Measures Descriptions**

Outcome: Number of patients with a NEHC assigned PCP seen within the last 12 months.  
 Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

The NEHC complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. The NEHC contracts with CARES Northwest at Legacy Emanuel Hospital to provide two days per week of medical assessment services for children suspected to be victims of child abuse.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,554,827	\$2,109,215	\$2,325,896	\$1,892,594
Contractual Services	\$0	\$119,063	\$122,251	\$0
Materials & Supplies	\$20,712	\$330,258	\$33,936	\$178,776
Internal Services	\$903,829	\$755,719	\$599,317	\$1,024,747
<b>Total GF/non-GF</b>	<b>\$3,479,368</b>	<b>\$3,314,255</b>	<b>\$3,081,400</b>	<b>\$3,096,117</b>
<b>Program Total:</b>	<b>\$6,793,623</b>		<b>\$6,177,517</b>	
<b>Program FTE</b>	12.92	23.28	11.70	17.90

Program Revenues				
Intergovernmental	\$0	\$1,035,816	\$0	\$986,832
Service Charges	\$3,472,882	\$2,278,439	\$3,054,849	\$2,109,285
<b>Total Revenue</b>	<b>\$3,472,882</b>	<b>\$3,314,255</b>	<b>\$3,054,849</b>	<b>\$3,096,117</b>

## Explanation of Revenues

Northeast Health Clinic is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and County General Fund. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 5,164,134  
 Federal Primary Care (330) grant: \$ 986,832

## Significant Program Changes

**Last Year this program was:** FY 2019: 40020-19 Northeast Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

Northeast Health Clinic staffing was reduced by 6.60 FTE.

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

Mid-County Health Center (MCHC) serves clients in one of the poorest and most culturally diverse areas of Multnomah County. MCHC provides vital health services for patients who, even if insured, would remain isolated from medical care because of where they live, the language they speak and their higher level of complex healthcare needs. With its Refugee Program and culturally competent staff, MCHC is an important health care safety net for the community and is part of the County's Federally Qualified Health Center (FQHC). The clinic provides a medical home to approximately 9800 patients.

**Program Summary**

MCHC provides culturally competent, comprehensive primary care, preventive health and enabling services such as transportation, translation, case management and health education which address the needs of the whole person. Care that addresses patients' beliefs and culture is more likely to succeed in improving and maintaining their health. MCHC is tightly linked with refugee resettlement agencies (i.e., SOAR, IRCO, Catholic Charities, Lutheran Community Services), the Centers of Disease Control and the State of Oregon. About 80% of all clients are immigrants or were refugees (Ukraine, Afghanistan, DRC, Burman, Russia, Latin America, Kosovo, etc.). Staff represent approximately 25 different countries and more than 60% of the MCHC staff speak a second language. Many of the staff are immigrants and a few were refugees themselves. MCHC services are designed specifically to prevent people from needing more costly and often less appropriate care while addressing the social determinants of health. The immigrant and refugee populations often receive little preventative care at home, leading to a disproportionately high rate of serious medical conditions (ie. diabetes, hypertension, heart disease, cancer). Many client families have three or more children; often with serious health problems (ie. asthma, diabetes, poor nutrition, no dental care, post-traumatic stress, etc.) which impact their schooling and development. This program helps them with pediatric and prenatal services as well as referrals. Many children receive their first complete set of vaccines at MCHC.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a Mid County Health Center assigned PCP	10,058	11,000	9,807	10,000
Outcome	% Adolescent Well Visits Completed	51%	55.5%	54%	51%

**Performance Measures Descriptions**

Outcome: Number of patients with a MCHC assigned PCP seen within the last 12 months  
 Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

MCHC complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health program, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. MCHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$5,602,369	\$2,807,555	\$5,210,262	\$2,918,807
Contractual Services	\$529,481	\$0	\$401,700	\$110,205
Materials & Supplies	\$81,519	\$574,929	\$111,160	\$526,463
Internal Services	\$920,647	\$1,767,222	\$603,869	\$1,921,011
<b>Total GF/non-GF</b>	<b>\$7,134,016</b>	<b>\$5,149,706</b>	<b>\$6,326,991</b>	<b>\$5,476,486</b>
<b>Program Total:</b>	<b>\$12,283,722</b>		<b>\$11,803,477</b>	
<b>Program FTE</b>	38.70	26.70	28.87	27.55

Program Revenues				
Intergovernmental	\$0	\$689,061	\$0	\$729,253
Service Charges	\$7,127,012	\$4,460,645	\$6,309,198	\$4,747,233
<b>Total Revenue</b>	<b>\$7,127,012</b>	<b>\$5,149,706</b>	<b>\$6,309,198</b>	<b>\$5,476,486</b>

## Explanation of Revenues

Mid County Health Clinic is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and county general fund.

Medical Fees: \$ 10,971,431  
 Federal Primary Care (330) grant: \$ 729,253  
 State AFS Refugee Screening: \$ 85,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40022-19 Mid County Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

Mid County Health Clinic staffing was reduced by 8.98 FTE.



**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The East County Health Center (ECHC) provides comprehensive, culturally appropriate primary care, enabling, and behavioral health services to the uninsured and under-insured residents of East Multnomah County and is part of the County's Federally Qualified Health Center (FQHC). The clinic serves seasonal migrant workers, pregnant women, infants, children that reside in East Multnomah County who, even if insured, would remain isolated from comprehensive health care services because of where they live, the language they speak and their higher level of complex health care needs.

**Program Summary**

East County Health Center primary care services are designed to be a person centered medical home (PCMH). This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally appropriate primary care services are provided and include: treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. East County Health Center plays a significant role in providing safety net medical services to residents in the community. The clinic provides a medical home to over 9,900 patients.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a East County Health Center assigned PCP	10,139	11,000	10,000	10,000
Outcome	% Adolescent Well Care Visits Completed	52%	51%	51%	51%

**Performance Measures Descriptions**

Outcome: Number of patients with a ECHC assigned PCP seen within the last 12 months.  
 Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

The ECHC complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. ECHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$3,737,875	\$3,632,749	\$4,226,757	\$2,961,381
Contractual Services	\$0	\$348,126	\$0	\$379,280
Materials & Supplies	\$76,662	\$318,691	\$38,355	\$426,803
Internal Services	\$1,331,498	\$885,847	\$489,881	\$1,655,333
<b>Total GF/non-GF</b>	<b>\$5,146,035</b>	<b>\$5,185,413</b>	<b>\$4,754,993</b>	<b>\$5,422,797</b>
<b>Program Total:</b>	<b>\$10,331,448</b>		<b>\$10,177,790</b>	
<b>Program FTE</b>	19.38	35.72	23.90	25.20

Program Revenues				
Intergovernmental	\$0	\$1,311,143	\$0	\$985,315
Service Charges	\$5,132,328	\$3,874,270	\$4,730,316	\$4,437,482
<b>Total Revenue</b>	<b>\$5,132,328</b>	<b>\$5,185,413</b>	<b>\$4,730,316</b>	<b>\$5,422,797</b>

## Explanation of Revenues

East County Health Clinic is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and county general fund. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 9,167,800  
 Federal Primary Care (330) grant: \$ 985,315

## Significant Program Changes

**Last Year this program was:** FY 2019: 40023-19 East County Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

East County Health Clinic staffing was reduced by 6.00 FTE.

**Department:** Health Department      **Program Contact:** Alexandra Lowell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Student Health Center (SHC) program provides access to comprehensive preventive, primary, and mental healthcare for Multnomah County school-aged youth at 8 student health centers and is part of the County's FQHC. Without this safety net many school-aged youth would not receive necessary health care.

**Program Summary**

The SHC sites provide critical points of access to health care regardless of insurance status. SHCs contribute to learning readiness through optimizing the learning environment by linking health and education for student success in school and life. This is achieved through partnerships with schools, families, healthcare providers and community agencies.

The SHC program operates eight fully equipped medical clinics in four school districts. All clinics are located in or on school campuses. This program assures access to care by providing service beyond regular school times, with one of the sites remaining open during the summer and school breaks to ensure continuity of care. Staffing includes a nurse practitioner, a medical assistant, and an office assistant, as well as some registered nurse and behavioral health provider time. Services include chronic, acute and preventive healthcare; age appropriate reproductive health; exams, risk assessments, prescriptions, immunizations, fitness and nutrition education/counseling and referrals. This comprehensive approach enables early identification and intervention, thereby reducing risk behaviors. Program locations are geographically diverse and all Multnomah County school-aged youth are eligible to receive services (attending other schools, drop-outs, homeless, detention). The program strives to ensure that basic physical and behavioral needs of children and youth are met to help them attend, participate and remain in school. Healthcare for school aged youth is a basic need.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of patients with one or more visits with a risk assessment in the last year	74%	70%	61%	60%
Outcome	% of patients with one or more visits with a documented well visit in the last year	72%	60%	73%	70%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

SHC complies with the Bureau of Primary Health Care grant, Joint Commission accreditation requirements, CCO contractual obligations, and State School Based Health Center certification requirements. SHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,535,395	\$1,678,164	\$2,068,520	\$1,872,088
Contractual Services	\$3,264	\$68,659	\$48,701	\$69,369
Materials & Supplies	\$290,266	\$93,490	\$238,811	\$32,342
Internal Services	\$1,203,604	\$439,422	\$1,148,739	\$301,032
<b>Total GF/non-GF</b>	<b>\$4,032,529</b>	<b>\$2,279,735</b>	<b>\$3,504,771</b>	<b>\$2,274,831</b>
<b>Program Total:</b>	<b>\$6,312,264</b>		<b>\$5,779,602</b>	
<b>Program FTE</b>	17.62	15.14	12.79	16.08

Program Revenues				
Intergovernmental	\$0	\$1,015,169	\$0	\$881,382
Service Charges	\$2,075,300	\$1,264,566	\$1,601,347	\$1,393,449
<b>Total Revenue</b>	<b>\$2,075,300</b>	<b>\$2,279,735</b>	<b>\$1,601,347</b>	<b>\$2,274,831</b>

## Explanation of Revenues

SHCs are supported by federal BPHC grant, state family planning grant, State School Based Health Centers grant through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 2,994,796

State SHC grant: \$508,000 (The County serves as the pass through agency (\$56,000) for the medical sponsor, Oregon Health Sciences University, to run the Benson High School Wellness Center.)

Federal Primary Care grant: \$373,379

## Significant Program Changes

**Last Year this program was:** FY 2019: 40024A-19 School Based Health Centers

Student Health Center staffing was reduced by 3.89 FTE.

**Department:** Health Department      **Program Contact:** Alexandra Lowell  
**Program Offer Type:** Program Alternative/Reconstruction      **Program Offer Stage:** As Adopted  
**Related Programs:** 40024A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Student Health Center (SHC) program provides access to comprehensive preventive, primary, and mental healthcare for Multnomah County school-aged youth at eight health centers in four school districts and is part of the County's FQHC. Without this safety net, many school-aged youths would not receive necessary health care. After a two year planning process, the program is proposing to expand to address the large unmet need in the Reynolds School District by opening a SHC at Reynolds High School.

**Program Summary**

The SHC sites provide comprehensive preventive primary care for school-aged youth to keep them healthy and focused on learning. This is achieved through partnerships with schools, families, healthcare providers and community agencies.

This program offer creates a sustainable and operationally efficient program that maximizes health impact for children and youth in Multnomah County by opening a new SHC at Reynolds High School. The program offer supports staffing, transition activities, and community engagement with students and their families in the Reynolds School District as well as continuing to connect K-8 and middle schools to their nearest SHC. The program strives to ensure that basic physical and behavioral health needs of youth are met to help them attend, participate and remain in school.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of patients with one or more visits with a health assessment in the last year	N/A	N/A	N/A	60%
Outcome	% of patients with one or more visits with a documented well visit in the last year	N/A	N/A	N/A	70%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

SHC complies with the Bureau of Primary Health Care grant, Joint Commission accreditation requirements, CCO contractual obligations, and State School-Based Health Center certification requirements. SHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$208,689	\$133,489
Contractual Services	\$0	\$0	\$6,846	\$0
Materials & Supplies	\$0	\$0	\$22,040	\$0
Internal Services	\$0	\$0	\$6,052	\$15,473
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$243,627</b>	<b>\$148,962</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$392,589</b>	
<b>Program FTE</b>	0.00	0.00	1.57	1.07

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$55,994
Service Charges	\$0	\$0	\$58,273	\$92,968
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$58,273</b>	<b>\$148,962</b>

## Explanation of Revenues

SHCs are supported by federal BPHC grant, state family planning grant, State School Based Health Centers grant through the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services, as well as enhanced Medicaid/Medicare fee revenue. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$257,959

State SHC grant: \$56,000

## Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40060  
**Program Characteristics:** Measure 5 Education

**Executive Summary**

The Adolescent Sexual Health Equity Program (ASHEP) aims to create a culture that affirms and advocates for individual and relationship health and justice of youth, and address the root causes of health inequities including racism. Through training, ASHEP builds community capacity in schools and community partners and provides direct evidence-based health promotion with youth, parents, and caring/mentoring adults. Goals: support school districts to meet state requirements, reduce youth/teen dating violence, eliminate sexual/reproductive health disparities, and promote youth development.

**Program Summary**

The Adolescent Sexual Health Equity Program (ASHEP) promotes individual and relationship health through empowering partners to provide large-scale population-level programming in multiple school districts and community settings. ASHEP uses public health and social determinate data to identify geographic areas and specific populations at highest need for focused resources. Locally, significant sexual and reproductive health inequities exist among Latinx, Native Americans, and African Americans. LGBTQ youth populations are also disproportionately impacted by violence and sexually transmitted infection when compared to the county as a whole. Both health inequities and trauma related to violence can interrupt education and limit future opportunities impacting the long-term fertility and health of youth. In FY20, ASHEP will reach over 7,000 youth.

ASHEP partners with youth, educators, caregivers, and service providers in school and community settings. Oregon law requires comprehensive sexuality and healthy relationship skill education for youth; development and adoption of child sexual abuse prevention programs for students in grades K-12; and that all youth, regardless of income, citizenship status, gender identity or type of insurance, have access to the full range of preventive reproductive health services. ASHEP plays a key role in supporting schools to meet this goal, and to help ensure community members have the information and support systems needed to access and advocate for their own health care. ASHEP trains educators and adult mentors in evidence-based and evidence informed sexual and relationship health curricula and teen-dating violence prevention curricula. ASHEP staff evaluate programs and adapt/translate curricula to provide effective education to special populations. ASHEP Health Educators also reach high-need youth not enrolled in mainstream public schools. Together ASHEP staff and community partners work to strengthen community resilience, address inequities, and support culturally-specific and responsive efforts. The capacity of African American, Latino, and Native American communities is increased by training, collaborating, and providing technical support to partner organizations to provide culturally-specific skill building, policy advocacy, and community mobilization among both youth and their parents/caring adults.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of participants in educational sessions/training	9,775	2,500	7,000	7,500
Outcome	% of trained educators who feel confident teaching evidence-based sexuality or violence prevention curricula	90%	85%	90%	85%
Quality	Percent of classes taught to fidelity	85%	89%	90%	85%

**Performance Measures Descriptions**

1) Total number of target population participants reached through direct services (includes parents, youth, teachers, and community-based program staff) Federal funding was restored in FY19 resulting in increased participants. 2) The percentage of educators, after training, that feel confident they can implement an evidence-based sexual health or violence prevention curriculum. 3) The percentage of observed classes that include key components of evidence-based curricula.

## Legal / Contractual Obligation

OAR Rule 581-022-1440 State of Oregon's Human Sexuality Education Administrative Rule: We support school districts who are legally obligated to meet this statute.

ASHEP has contractual obligations per revenue funding source.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$230,915	\$0	\$47,434	\$472,888
Contractual Services	\$0	\$0	\$0	\$666,000
Materials & Supplies	\$959	\$0	\$960	\$23,692
Internal Services	\$98,500	\$0	\$44,632	\$87,419
<b>Total GF/non-GF</b>	<b>\$330,374</b>	<b>\$0</b>	<b>\$93,026</b>	<b>\$1,249,999</b>
<b>Program Total:</b>	<b>\$330,374</b>		<b>\$1,343,025</b>	
<b>Program FTE</b>	2.15	0.00	0.40	4.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,249,999
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,249,999</b>

## Explanation of Revenues

Federal ACT Teen Preg Prevention: \$ 1,249,999

## Significant Program Changes

**Last Year this program was:** FY 2019: 40025-19 Adolescent Sexual Health Equity Program (ASHEP)



**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

La Clinica de Buena Salud (The Good Health Clinic), provides comprehensive, culturally appropriate primary care, enabling, and behavioral health services to the under and uninsured residents of the NE Portland, Cully Neighborhood and is part of the County's FQHC. La Clinica was strategically placed, in partnership with the local community, to provide culturally competent care and vital services to a population that otherwise may not have access to medical care. The clinic provides care to approximately 2,100 patients that identify La Clinica de Buena Salud Health Center as their medical home.

**Program Summary**

La Clinica provides culturally appropriate services, and Patient Centered Primary Care Home (PCPCH) services, preventive health and enabling services such as transportation, translation, case management and health education which address the needs of the whole person. La Clinica health and social services team includes: primary, preventive and urgent health care, behavioral health services, case management and resource referral. Although La Clinica was initially intended to primarily serve the Latino community, the program has expanded and responded to the area's changing demographics which include culturally-specific services for Somali immigrants and refugees, and Russian speaking families in the Cully neighborhood and beyond. La Clinica is the County's anchor health care program for homeless children and families. The program initiates consultation and coordination efforts with other providers to build cultural competency among other service providers and lead efforts to solve community problems.

<b>Performance Measures</b>					
<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Number of patients with a La Clinica assigned PCP	2,064	2,000	2,200	2,100
Outcome	% Adolescent Well Visits Completed	60%	51%	55%	51%

**Performance Measures Descriptions**

Outcome: Number of patients with a La Clinica assigned PCP seen within the last 12 months.  
 Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

La Clinica complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. La Clinica meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$794,480	\$1,080,664	\$509,937	\$1,488,438
Contractual Services	\$0	\$39,254	\$0	\$142,844
Materials & Supplies	\$13,664	\$102,231	\$28,185	\$99,051
Internal Services	\$265,184	\$284,604	\$196,873	\$313,835
<b>Total GF/non-GF</b>	<b>\$1,073,328</b>	<b>\$1,506,753</b>	<b>\$734,995</b>	<b>\$2,044,168</b>
<b>Program Total:</b>	<b>\$2,580,081</b>		<b>\$2,779,163</b>	
<b>Program FTE</b>	3.40	10.00	3.20	10.40

Program Revenues				
Intergovernmental	\$0	\$800,776	\$0	\$779,097
Service Charges	\$1,065,180	\$705,977	\$712,373	\$1,265,071
<b>Total Revenue</b>	<b>\$1,065,180</b>	<b>\$1,506,753</b>	<b>\$712,373</b>	<b>\$2,044,168</b>

## Explanation of Revenues

La Clinica de Buena Salud is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and county general fund. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 1,977,444

Federal Primary Care/Homeless grant: \$ 779,098

## Significant Program Changes

**Last Year this program was:** FY 2019: 40026-19 La Clinica de Buena Salud

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

La Clinica de Buena Salud staffing was increased by 0.20 FTE.

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy

**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

The Southeast Health Center provides comprehensive, culturally appropriate primary care and enabling services to vulnerable citizens who might not otherwise have access to health care and is part of the County's Federally Qualified Health Center (FQHC). Poverty, limited access to primary care services, limited English proficiency, lack of health insurance and homelessness are a few of the many barriers faced by Southeast's diverse residents. Currently around 23% of the Health Department's clients live in Southeast Portland, 12% are homeless or at risk for homelessness.

**Program Summary**

The Southeast Primary Care clinic is located in the Southeast Health Center (SE 34th/Powell). The clinic provides comprehensive, culturally appropriate services which include treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations) primary care and enabling services and is intended to serve as a Patient Centered Primary Care Home (PCPCH) for residents of Southeast Portland. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. Southeast Health Clinic staff provide coordination services weekly at St. Francis Dining Hall. The clinic provides a medical home to approximately 3,000 patients.

MCHD Physical Therapy Clinic (PTC) will be housed at the Southeast Health Center and will serve existing MCHD clients with physical therapy care. The PTC will be staffed by one physical therapist and one physical therapy assistant. Physical Therapy services are the largest referral type processed by referrals coordinators, and supports the unmet need for this type of service among MCHD clients. Additionally, the PTC will serve an unmet need for physical therapy care for self-pay clients who have very limited access to this type of speciality care.

MCHD Immediate Care Clinic (ICC) will also be housed within the Southeast Health Center and will serve clients who have an immediate medical need or are looking for convenient access to medical care services. The MCHD ICC will be conveniently co-located with pharmacy and dental, who will also be expanding to offer same day dental emergency access. The MCHD ICC will serve existing MCHD clients, as well as the community at large, providing both immediate and full scope primary health care. The ICC will be staffed by two providers, a nurse, clinical support staff, lab, eligibility and enrollment services. Clients who are not existing MCHD clients will be offered OHP and other coverage enrollment assistance and also a primary care medical home within MCHD Health Centers. The clinic will serve all client ages and offer appointments outside normal business hours. The clinic will also offer urgent procedures including joint injections, contraceptive device placement, IV hydration therapy as well as other minor office procedures.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a Southeast Health Center assigned PCP	2,905	3,500	2,905	2,500
Outcome	% Adolescent Well Visits Completed	43.7%	51%	43.7%	45.0%

**Performance Measures Descriptions**

Outcome: Number of patients with a SEHC assigned PCP seen within the last 12 months.

Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

The SEHC complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. SEHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,309,684	\$2,022,528	\$571,827	\$1,975,597
Contractual Services	\$0	\$59,029	\$13,613	\$77,038
Materials & Supplies	\$37,460	\$139,799	\$84,956	\$184,769
Internal Services	\$366,170	\$735,131	\$300,398	\$621,381
<b>Total GF/non-GF</b>	<b>\$1,713,314</b>	<b>\$2,956,487</b>	<b>\$970,794</b>	<b>\$2,858,785</b>
<b>Program Total:</b>	<b>\$4,669,801</b>		<b>\$3,829,579</b>	
<b>Program FTE</b>	7.30	18.90	2.80	14.50

Program Revenues				
Intergovernmental	\$0	\$1,391,635	\$0	\$1,230,067
Service Charges	\$1,702,133	\$1,564,852	\$945,696	\$1,628,718
<b>Total Revenue</b>	<b>\$1,702,133</b>	<b>\$2,956,487</b>	<b>\$945,696</b>	<b>\$2,858,785</b>

## Explanation of Revenues

Southeast Health Clinic is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and county general fund.

Medical Fees: \$ 2,574,414  
 Federal Primary Care (330) grant: \$ 166,500  
 Federal Primary Care/Homeless grant: \$ 1,063,567

## Significant Program Changes

**Last Year this program was:** FY 2019: 40027-19 Southeast Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

Southeast Health Clinic staffing was reduced by 8.90 FTE.

Propose to add a Physical Therapy Clinic and Immediate Care Clinic to Southeast Health Center's services.

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Rockwood Community Health Center (RCHC) provides comprehensive primary care, enabling and behavioral health services to the vulnerable and under-served residents in the East County Rockwood community and is part of the County's Federally Qualified Health Center (FQHC). Rockwood clinic was strategically placed to provide culturally appropriate care to a population that may otherwise not have access to medical care. The clinic provides care to approximately 5000 patients that identify Rockwood Health Center as their medical home.

**Program Summary**

Rockwood Community Health Center primary care services are designed to be a Patient Centered Primary Care Home (PCPCH). This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education.

Rockwood Community Health Center plays a significant role in providing safety net medical services to residents in the community.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of patients with a Rockwood assigned PCP	5,182	5,800	5,000	5,400
Outcome	% Adolescent Well Visits Completed	53.6%	51%	51%	51%

**Performance Measures Descriptions**

Outcome: Number of patients with a Rockwood assigned PCP seen within the last 12 months.  
Outcome: % Adolescent Well Visits Completed

## Legal / Contractual Obligation

The Rockwood Community Health Center complies with the Bureau of Primary Health Care (BPHC) grant, the state Reproductive Health grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CCO contractual obligations. RCHC meets all Federally Qualified Health Center (FQHC) designated requirements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,534,215	\$1,813,726	\$2,335,917	\$1,795,117
Contractual Services	\$0	\$186,099	\$175,485	\$0
Materials & Supplies	\$95,546	\$134,962	\$125,970	\$81,586
Internal Services	\$643,179	\$610,364	\$315,763	\$984,868
<b>Total GF/non-GF</b>	<b>\$3,272,940</b>	<b>\$2,745,151</b>	<b>\$2,953,135</b>	<b>\$2,861,571</b>
<b>Program Total:</b>	<b>\$6,018,091</b>		<b>\$5,814,706</b>	
<b>Program FTE</b>	16.40	18.00	13.15	16.25

Program Revenues				
Intergovernmental	\$0	\$774,768	\$0	\$735,668
Service Charges	\$3,263,139	\$1,970,383	\$2,934,440	\$2,125,903
<b>Total Revenue</b>	<b>\$3,263,139</b>	<b>\$2,745,151</b>	<b>\$2,934,440</b>	<b>\$2,861,571</b>

## Explanation of Revenues

Rockwood Community Health Center is supported by the federal BPHC grant, the state Reproductive Health Program grant, state funds for Maternal & Child Health Services through the inter-governmental agreement between Multnomah County as the Local Public Health Authority (LPHA), Medicaid/Medicare and other medical fees, and county general fund. County General Fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants and to serve uninsured patients.

Medical Fees: \$ 5,060,343

Federal Primary Care (330) grant: \$ 735,668

## Significant Program Changes

**Last Year this program was:** FY 2019: 40029-19 Rockwood Community Health Clinic

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

Rockwood Community Health Clinic staffing was reduced by 5.00 FTE.

**Department:** Health Department                      **Program Contact:** Vanetta Abdellatif  
**Program Offer Type:** Support                                      **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Clinical Directors ensure that MDs, NPs, PAs, RNs, and LPNs have the necessary training, skills and knowledge to practice competently; patient care adheres to all pertaining regulations; clinical quality improvement (QI) initiatives are effective and appropriate for the communities we serve; and patient care is safe, cost effective and based on proven best practices.

### Program Summary

Medical Directors Office:

1. Oversees initiatives to improve quality, safety, cost effectiveness, and access; develops and implements patient care guidelines, policies, procedures.
2. Recruits, hires, credentials and monitors provider performance; oversees medical educational programs.
3. Sets and monitors provider and nursing productivity goals.
4. Investigates and remedies untoward clinical incidents and errors.
5. Ensures that patient care meets all rules, regulations and standards set forth by regulatory agencies, contractors, grantors and accrediting agencies.
6. Ensures that administrative practices are consistent with quality patient care.
7. Directors are accountable for legal conformance, quality and safety of patient care, need-based and scientifically justified service design, and efficient use of public funds.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	80% (or more) of providers are maintaining and serving their maximum panel size.	75%	80%	79%	80%
Outcome	Maintain compliance with regulatory and licensing standards/boards.	100%	100%	100%	100%
Quality	Maintain compliance with regulatory and licensing standards/boards.	100%	100.0%	100%	100%

### Performance Measures Descriptions

Output reflects a focus on improving value and good patient outcomes as opposed to face to face visits as a part of an APM (Alternative Payment Methodology) pilot where there is a focus on increased value in care delivery. This pilot incentivizes whole person care.

## Legal / Contractual Obligation

Oregon State Board of Nurses, Oregon State Medical Board, Medicaid and Medicare rules and regulations, Joint Commission on Accreditation of Healthcare Organizations, stipulations of multiple federal and state grants, and CCO contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$794,360	\$58,182	\$904,350	\$78,439
Contractual Services	\$91,000	\$142,040	\$87,000	\$0
Materials & Supplies	\$146,383	\$8,356	\$83,560	\$58
Internal Services	\$171,363	\$13,462	\$217,735	\$9,091
<b>Total GF/non-GF</b>	<b>\$1,203,106</b>	<b>\$222,040</b>	<b>\$1,292,645</b>	<b>\$87,588</b>
<b>Program Total:</b>	<b>\$1,425,146</b>		<b>\$1,380,233</b>	
<b>Program FTE</b>	2.50	0.50	2.48	0.32

<b>Program Revenues</b>				
Intergovernmental	\$0	\$222,040	\$0	\$87,588
Other / Miscellaneous	\$200,000	\$0	\$180,000	\$0
Beginning Working Capital	\$0	\$0	\$100,000	\$0
Service Charges	\$900,000	\$0	\$880,000	\$0
<b>Total Revenue</b>	<b>\$1,100,000</b>	<b>\$222,040</b>	<b>\$1,160,000</b>	<b>\$87,588</b>

## Explanation of Revenues

Medical Directors (Physician, Nurse Practitioner and Nursing) is funded with county general fund and BPHC/HRSA grant revenue.

State Family Planning: \$ 87,588

Patients Fees: \$ 1,160,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40030-19 Medical Directors (Physician, Nurse Practitioner and Nursing)



**Department:** Health Department      **Program Contact:** Ritchie Longoria  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Pharmacy provides essential clinical support to health delivery and emergency preparedness programs in the Health Department. The pharmacy program fills approximately 350,000 prescriptions per year. Targeted clinical pharmacy services are provided to clients referred from MCHD Primary Care.

### Program Summary

Pharmacy Services utilize various contracts to procure medications that have been prescribed for clients, including uninsured and under-served clients.

Services are provided to a significant number of clients who may lack secure housing, have mental health concerns, or addiction issues. Pharmacy Services provide prescription medication to clients of public health programs such as the HIV/STD/Adolescent Sexual Health Equity and Communicable Disease Services; as well as to youth seen in the Student Health Centers.

The program bills third-party insurance for covered clients, assists uninsured clients in obtaining low-cost/free drugs from manufacturers, and provides consultation and education regarding medications to clinic patients and staff. No client is denied service due to inability to pay the service fee or copay at the time of service.

Pharmacy Services provides essential support to the health delivery and emergency preparedness programs within the Health Department; and assists in the treatment and monitoring of clients receiving health care in Health Department facilities and programs. Prescription service for the uninsured; public health programs; and Student Health Center clients comprise a significant portion of the total work of the program.

Clinical pharmacists are engaged at primary care sites, working closely with the patient's provider and care team to improve medication adherence and management of their drug regimen. Clinical pharmacists provide improved care coordination with the reconciliation of client medications following hospital admission.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Prescription Volume	380,055	370,000	380,000	380,000
Outcome	Average prescription cost (excluding cost of medication)	24.18	27.62	24.33	25.35
Quality	Adherence Monitoring	130	130	168	175

### Performance Measures Descriptions

1. Prescription volume (prescriptions filled) reflects the number of actual prescriptions being filled.
2. Average prescription cost reflects prescription department expenses less drug cost divided by the number of prescriptions filled. (Includes non-dispensing related expenses - training, non-dispensing staff).
3. Adherence Monitoring reflects the number of clients enrolled in appointment based refill programs or who receive specialized packaging services to assist in the proper use of their medication.

## Legal / Contractual Obligation

Various grants require the provision of pharmacy services. State mandated public health services are provided.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$7,725,473	\$0	\$8,356,218
Contractual Services	\$0	\$167,990	\$0	\$228,116
Materials & Supplies	\$0	\$10,493,551	\$0	\$13,749,774
Internal Services	\$0	\$1,892,909	\$0	\$3,342,087
Capital Outlay	\$0	\$450,000	\$0	\$400,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$20,729,923</b>	<b>\$0</b>	<b>\$26,076,195</b>
<b>Program Total:</b>	<b>\$20,729,923</b>		<b>\$26,076,195</b>	
<b>Program FTE</b>	0.00	52.83	0.00	54.13

<b>Program Revenues</b>				
Service Charges	\$0	\$20,729,923	\$0	\$26,076,195
<b>Total Revenue</b>	<b>\$0</b>	<b>\$20,729,923</b>	<b>\$0</b>	<b>\$26,076,195</b>

## Explanation of Revenues

Pharmacy is funded exclusively through prescription fees (third party reimbursements) and directly paid patient fees.

Prescription Fees: \$ 25,812,643

Patient Fees: \$ 263,552

## Significant Program Changes

**Last Year this program was:** FY 2019: 40031-19 Pharmacy

Increased expense for the purchase of drugs for dispensing.

**Department:** Health Department      **Program Contact:** Ritchie Longoria  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Central Lab and the Health Information Management program provide essential clinical support to health delivery and emergency preparedness programs in the Health Department. These programs support the delivery of care to clients of Health Department services (including Primary Care, Student Health Centers, Disease Prevention Clinics, Dental, and Corrections Health). The lab handles approximately 290,000 specimens per year. Medical Records fulfills approximately 15,000 medical records requests per year.

**Program Summary**
**Laboratory:**

Tests clinical and environmental specimens, manage external laboratory contracts, prepares for emergencies (including bioterrorism), and the surveillance of emerging infections. Access to laboratory testing assists in the diagnosis, treatment, and monitoring of clients receiving health care in Health Department facilities.

**Health Information Management:**

Manages health (medical/dental) records systems to ensure comprehensive clinical documentation and compliance with all applicable licensing, regulatory and accreditation standards. The manager of Health Information fulfills the role of the Health Department's Privacy Official as required by HIPAA (Health Insurance Portability and Accountability Act). Health Information Management ensures proper documentation of health care services and provides direction, monitoring, and reporting of federally required HIPAA compliance activities.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of records requests completed (HIM)	16,975	16,000	15,000	15,000
Outcome	Number of laboratory specimens handled (Central Lab)	286,076	260,000	300,000	300,000
Quality	Lab proficiency/competency levels through internal and external testing program (Central Lab)	95	95	95	95

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Federal and state mandates require maintenance of medical/dental records. HIPAA and state confidentiality and privacy laws require adherence to standards. Various grants require provisions for laboratory services. The Electronic Health Record (EHR) and Practice Management contractual obligations will be as per the contractual agreement between Multnomah County Health Department (MCHD) and OCHIN. Multnomah County Health Department is the client receiving services from OCHIN in this agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,726,518	\$1,239,362	\$2,891,188	\$2,330,087
Contractual Services	\$1,000	\$68,000	\$6,000	\$48,200
Materials & Supplies	\$55,786	\$73,356	\$61,229	\$168,547
Internal Services	\$834,079	\$304,286	\$742,029	\$438,795
Capital Outlay	\$0	\$120,000	\$0	\$300,000
<b>Total GF/non-GF</b>	<b>\$3,617,383</b>	<b>\$1,805,004</b>	<b>\$3,700,446</b>	<b>\$3,285,629</b>
<b>Program Total:</b>	<b>\$5,422,387</b>		<b>\$6,986,075</b>	
<b>Program FTE</b>	24.21	11.99	23.75	21.65

Program Revenues				
Intergovernmental	\$0	\$270,782	\$0	\$270,130
Other / Miscellaneous	\$2,320,000	\$0	\$2,050,000	\$0
Beginning Working Capital	\$0	\$0	\$309,533	\$0
Service Charges	\$1,050,000	\$1,534,222	\$1,010,000	\$3,015,499
<b>Total Revenue</b>	<b>\$3,370,000</b>	<b>\$1,805,004</b>	<b>\$3,369,533</b>	<b>\$3,285,629</b>

## Explanation of Revenues

Revenue generated from laboratory services are included in the medical visit revenue shown in the health clinics. General fund is used to pay for services to the uninsured clients served by the Health Department, as well as to deliver mandated public health services.

Medical Fees: \$ 6,385,032

Federal Primary Care (330) Grant: \$ 270,129

## Significant Program Changes

Last Year this program was: FY 2019: 40032-19 Lab and Medical Records

**Department:** Health Department      **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Health Center Operations (HCO) Program (formerly Primary Care and Dental Access and Referral-PCARD) is the gateway for all new patients assigned and/or seeking to establish care with Multnomah County Health Department's (MCHD) Primary Care and Dental programs, and for patients already established with our Primary Care program. HCO also provides written translation, oral and sign language interpretation throughout the department's programs and services. HCO is also proposing to add a Virtual Provider Clinic to provide virtual care to patients in addition to existing on-site services.

**Program Summary**

HCO's Patient Access Center (PAC) is the point of entry for scheduling new and established clients for the Primary Care clinics. HCO also schedules new and established dental clients seeking both urgent and routine dental services. HCO provides appointments and referrals in collaboration with County and other community organizations, ensuring consistent patient information and tracking. HCO also provides information for MCHD medical, dental, social services and key community service partners.

HCO's Language Services program provides interpretation in over 70 languages including sign language for all MCHD services and programs, and for established patients who access specialty care in the community. Comprehensive coordination of written translation for clinical and non-clinical programs and services is also provided. Language Services is the central coordinator for thousands of patient/client interpretation requests and translations each year for multiple programs/services. This critical service ensures that patients and clients successfully move through the Department's Refugee and Screening Program, and facilitates those clients with limited English proficiency receive culturally competent interpretation throughout all of the MCHD programs.

The proposed Multnomah County Virtual Provider Clinic will serve clients at the immediate point of need- as patients call with a medical concern requesting an appointment. The Virtual Provider Clinic will be staffed by two nurse practitioners, located at the Primary Access Center (PAC). Provider schedules will include same-day virtual access limited to specific appointment types that are appropriate for a virtual visit. Clients contacting PAC requesting an appointment with an immediate need can be offered a virtual appointment with a Virtual Clinic provider. The goal is to reduce the number of clients who walk into clinics for their immediate needs, or seek urgent or ED care for concerns that can be appropriately addressed in the primary care setting. Language services will be available by phone for visit translation.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of calls answered	395,279	300,000	333,010	350,000
Outcome	Average telephone abandonment is at or below 10%	12%	12%	12%	11%

**Performance Measures Descriptions**

Output: Number of calls answered by PAC staff during the fiscal year

Outcome: Number of calls through the Patient Access Center phone queue where the client ended the call before being answered by a staff member

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,029,792	\$584,906	\$1,930,578	\$823,290
Contractual Services	\$105,000	\$0	\$92,000	\$0
Materials & Supplies	\$12,032	\$0	\$8,301	\$1,000
Internal Services	\$856,450	\$73,756	\$718,885	\$95,419
<b>Total GF/non-GF</b>	<b>\$3,003,274</b>	<b>\$658,662</b>	<b>\$2,749,764</b>	<b>\$919,709</b>
<b>Program Total:</b>	<b>\$3,661,936</b>		<b>\$3,669,473</b>	
<b>Program FTE</b>	21.05	7.45	20.45	8.15

Program Revenues				
Intergovernmental	\$0	\$658,662	\$0	\$611,959
Other / Miscellaneous	\$890,000	\$0	\$640,001	\$0
Beginning Working Capital	\$0	\$0	\$100,000	\$0
Service Charges	\$1,809,184	\$0	\$1,439,000	\$307,750
<b>Total Revenue</b>	<b>\$2,699,184</b>	<b>\$658,662</b>	<b>\$2,179,001</b>	<b>\$919,709</b>

Explanation of Revenues

Health Center Operations (HCO) Program is funded with Medicaid revenue, HRSA/Bureau of Primary Care grant revenue and county general fund.

Medical Fees: \$ 2,486,750  
 Federal Primary Care (330) grant: \$ 611,960

Significant Program Changes

Last Year this program was: FY 2019: 40033-19 Primary Care and Dental Access and Referral

Added a proposed Virtual Provider Clinic.

**Department:** Health Department      **Program Contact:** Dawn Shatzel  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Clinical Infrastructure (Quality and Support) Program provides pivotal oversight by managing the Bureau of Primary Health Care (BPHC) grant, developing and implementing fiscal accountability programs and access to health care, initiating and sustaining clinical and administrative quality and safety activities and improvements, and coordinating adherence to health care standards and regulations (accreditation by The Joint Commission and associated Centers for Medicaid and Medicare).

### Program Summary

This program supports services within the project scope of the BPHC grant, which supports the mission of increasing access to needed health services to the County's most vulnerable. BPHC funding requires strict adherence to federal laws mandating which services must be provided as a Federally Qualified Health Center (FQHC) which results in additional Medicaid revenue for Oregon Health Plan clients. This funding requires quality services, performance audits, and responsiveness to new methods of delivering safe and quality care. Infrastructure and support assure that these efforts are maintained at acceptable thresholds. Maintaining FQHC accreditation assures that the County's primary care, dental, and pharmacy programs are eligible to continue receiving reimbursement for services. In addition, this also allows County providers to participate in loan forgiveness, qualifies the County for additional Alternative Payment Methodology reimbursements ("wrap funding"), and 340B drug program participation.

This program measures clinical standards/outcomes, quality, safety and fiscal accountability with other similar health delivery systems. The BPHC and TJC are our primary external benchmarking organizations relative to performance indicators. The program works with the Community Health Council (consumer majority governing Board) and integrates client feedback results and collaborations with other health care delivery systems. This program supports Person Centered Primary Care Health Home programs and represents an opportunity for new healthcare funding based on performance and outcomes. These programs, implemented to meet goals CCO's Pay-for-(quality) Performance, have payments tied to achieving specific health outcomes or state metrics for quality. The Quality Assurance program is tasked with testing, data collection, and reporting, designing and implementing the wide array of system improvements needed to meet these new benchmarks.

Quality project management staff manage the Coalition of Community Health Clinics (CCHC) contract. CCHC is comprised of community-based clinics uniquely able to respond to changing demographics and offer culturally appropriate care while fulfilling their mission of improving and providing health care to the county's most vulnerable populations. Coalition clinics provide free or low-cost health care to uninsured people. The County extends Federal Tort Claims coverage, licensing and credentialing to the volunteer providers at the Coalition of Community Health Clinics' (CCHC).

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of CCHC clinics that pass annual ICS Quality Department audit.	100%	new measure	100%	100%
Outcome	Maintain compliance with BPHC and JCAHO standards.	100%	100%	100%	100%
Outcome	BPHC grant renewed annually	100%	100%	100%	100%

### Performance Measures Descriptions

1) Changed previous measure (Number of hours, includes licensed health care volunteers who work at CCHC clinic sites) New Measure, 100% of CCHC clinics pass annual ICS Quality audit; 2) Good standing as a fully accredited organization under the Joint Commission's standards for health organizations 3) Maintenance of FQHC grantee by meeting all federal rules/requirements; evaluated annually through the grant continuation application process.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$4,768,601	\$1,409,247	\$4,871,465	\$1,407,442
Contractual Services	\$81,000	\$6,000	\$242,173	\$142,040
Materials & Supplies	\$208,671	\$19,784	\$186,337	\$3,611
Internal Services	\$1,090,197	\$480,346	\$1,293,714	\$163,122
<b>Total GF/non-GF</b>	<b>\$6,148,469</b>	<b>\$1,915,377</b>	<b>\$6,593,689</b>	<b>\$1,716,215</b>
<b>Program Total:</b>	<b>\$8,063,846</b>		<b>\$8,309,904</b>	
<b>Program FTE</b>	40.37	12.93	36.60	12.20

Program Revenues				
Intergovernmental	\$0	\$1,525,377	\$0	\$1,716,215
Other / Miscellaneous	\$3,182,519	\$240,000	\$3,280,000	\$0
Beginning Working Capital	\$0	\$0	\$600,000	\$0
Service Charges	\$1,956,061	\$150,000	\$1,946,000	\$0
<b>Total Revenue</b>	<b>\$5,138,580</b>	<b>\$1,915,377</b>	<b>\$5,826,000</b>	<b>\$1,716,215</b>

Explanation of Revenues

Quality Assurance and Quality Improvement activities are funded with HRSA grant revenue, quality incentive payments and County General Fund. Program leadership are working with CCO's to develop sustainable funding for quality assurance, data reporting work.

Medical Fees: \$ 5,826,000  
 Federal Primary Care (330) grant: \$ 1,716,216

Significant Program Changes

Last Year this program was: FY 2019: 40034-19 Quality Assurance

ICS Administration, Operations, and Quality Assurance staffing was reduced by 2.50 FTE.



**Department:** Health Department      **Program Contact:** Linda Niksich  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Community Health Council (CHC) is the federally mandated consumer-majority governing board that oversees the County's Health Centers (also known as a public entity Federally Qualified Health Center-FQHC). The CHC's members' community involvement allows Multnomah County to meet HRSA's 19 mandatory program requirements, including oversight of quality assurance, health center policies, patient satisfaction, health center executive director (ICS Director) accountability for the FQHC's compliance and operations.

**Program Summary**

The Community Health Council must have a minimum of 51% MCHD health center consumer membership to meet federally mandated program requirements for FQHCs. The Community Health Council works closely with the community health centers executive director (ICS Director) and the Board of County Commissioners to provide guidance and direction on programs and policies affecting patients of Multnomah County's Community Health Center (FQHC services).

The CHC has a critical role in assuring access to health care for our most vulnerable residents; it serves as the co-applicant board required by HRSA's Bureau of Primary Health Care to provide oversight of policies and programs within the scope of the Primary Care Grant. At minimum, 51% of Council Members are county residents who use the Health Department's FQHC clinical services. The Council is currently comprised of 12 members and is a fair representation of the communities served by Health Department's Health Center services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Meet monthly, as required by Bureau of Primary Care, FQHC requirements to perform board responsibilities	12	12	12	12
Outcome	Percentage of consumers involved	71%	51%	84%	51%

**Performance Measures Descriptions**

- 1) Minimum monthly board meetings as required by BPHC/HRSA to meet board governing responsibilities.
- 2) Consumer majority of 51% or more.

## Legal / Contractual Obligation

The Community Health Council is federally mandated by the Bureau of Primary Health Care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$125,537	\$0	\$136,224	\$0
Contractual Services	\$104,670	\$0	\$104,670	\$0
Materials & Supplies	\$5,436	\$0	\$5,450	\$0
Internal Services	\$16,993	\$0	\$17,104	\$0
<b>Total GF/non-GF</b>	<b>\$252,636</b>	<b>\$0</b>	<b>\$263,448</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$252,636</b>		<b>\$263,448</b>	
<b>Program FTE</b>	1.20	0.00	1.20	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 40036-19 Community Health Council and Civic Governance

**Department:** Health Department      **Program Contact:** Jae Douglas  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40006, 40053, 40060  
**Program Characteristics:**

### Executive Summary

Environmental Health Community Programs impact a wide range of well-documented, upstream, and emerging environmental health issues. Program areas include community environments, toxics reduction, and climate change with an explicit focus on environmental justice and vulnerable populations and address health inequities in lead poisoning, respiratory illness, and cardiovascular disease. Activities include monitoring and assessing environments, policies, and health; providing technical assistance and data expertise; reporting; communication; and direct services.

### Program Summary

Environmental Health Community Programs bring together a continuum of services to ensure all county residents have access to optimal living conditions in their homes and neighborhoods. With an environmental justice framework, the programs focus first on the highest risk communities facing the least access to political and social power such as youth, elders, low-income communities, and communities of color. These communities are engaged so that their concerns, expertise, and proposed solutions can be integrated into the activities of the following program areas.

**Community Environments:** This program area works closely with the Public Health Division REACH program to ensure that all neighborhoods are safe and healthy. Focuses include housing, nutritious foods, safe parks and playgrounds, safe streets, and equitable public transportation to ensure access to jobs, schools, services, recreation, and child care. Example activities include participation in technical committees to support local and regional planning efforts such as Metro's Regional Transportation Plan; analysis of pedestrian fatalities within the City of Portland; and supporting community groups to understand environmental risks through online maps and technical assistance.

**Toxics Reduction:** This program area identifies risks of exposure to contaminated land, air, water, consumer goods, and industrial production, and makes technical information accessible to the public. Staff work with vulnerable individuals and families to identify and reduce exposure to lead through home inspections and case management; and, within communities, respond to both well-documented and emerging environmental hazards. Major focuses have been lead in water at Portland Public Schools, and heavy metals from art glass manufacturers. Activities include partnering with local, state, and federal agencies to share and analyze local exposure risk data and empowering communities to advocate on their own behalf.

**Climate Change:** This program area works to understand upstream and emerging health issues; protect the public's health from the impacts of climate change; advance climate justice; and maximize health benefits of climate mitigation and resilience actions. Staff track key indicators such as extreme heat-related illnesses, hypothermia, and harmful algal blooms.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of Community Members receiving information on environmental threats	36,942	52,000	49,000	42,000
Outcome	Number of children with reduced EBLL as a result of environmental investigations	22	35	29	29
Outcome	Number of health-based policy recommendations made that are adopted	24	30	13	15

### Performance Measures Descriptions

1) Includes all program areas (phone counseling, referral, educational materials, website & events). 2) HUD and EPA best-practice measure of effectiveness. 3) Includes review of state and local plans & legislation, participation in technical committees & responses to requests for technical & policy support from partners.

## Legal / Contractual Obligation

Legal mandates are City of Portland codes 8.20.210 (Maintenance of Health Hazard not Permitted); 8.20.200 (Notice of Unsanitary or Unhealthful Condition of Premises to be Given and Posted – Unlawful to Remove); 29.30.110 (Interior Walls, Floors, and Ceilings); 29.30.060 (Exterior Walls and Exposed Surfaces); and 21.800 (Multnomah County Housing Code) Some activities under this program offer are subject to contractual obligations under Inter-Governmental Agreement #0607105.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$61,985	\$234,186	\$282,917	\$275,113
Contractual Services	\$9,820	\$97,580	\$3,820	\$51,298
Materials & Supplies	\$26,323	\$16,765	\$8,682	\$20,523
Internal Services	\$57,406	\$62,969	\$27,434	\$81,066
<b>Total GF/non-GF</b>	<b>\$155,534</b>	<b>\$411,500</b>	<b>\$322,853</b>	<b>\$428,000</b>
<b>Program Total:</b>	<b>\$567,034</b>		<b>\$750,853</b>	
<b>Program FTE</b>	0.62	2.05	2.68	2.00

Program Revenues				
Intergovernmental	\$0	\$239,000	\$0	\$255,500
Service Charges	\$0	\$172,500	\$0	\$172,500
<b>Total Revenue</b>	<b>\$0</b>	<b>\$411,500</b>	<b>\$0</b>	<b>\$428,000</b>

## Explanation of Revenues

- \$ 213,000 - The City of Portland
- \$ 10,000 - State Lead Program
- \$ 172,500 - Fish Advisory Outreach funding
- \$ 32,500 - State Maternal Child Health Perinatal fund

## Significant Program Changes

**Last Year this program was:** FY 2019: 40037-19 Environmental Health Community Programs

MCHD Environmental Health has two partial positions that will charge to the Department of County Assets (DCA) Burnside Bridge project in FY 2020 for work on a health impact assessment. DCA has included \$99,220 in their FY20 budget for this work.

**Department:** Health Department      **Program Contact:** Holly Calhoun  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Human Resources/Training & Workforce Development Group provides guidance and consultation in administrative procedures, recruitment, employee/labor relations, Class Comp, core management competencies, personnel policies and labor contract interpretation, training facilitation, employee/leadership development and legal compliance. Objectives are achieved through (a) applying business best practices, (b) being collaborative with key stakeholders and partners, and (c) providing reliable data and information to measure results and quality of performance.

**Program Summary**

This Program consists of three primary operating components that support the Health Department's Human Resources and Workforce Development objectives:

- 1) **Organizational Effectiveness:** Creates and implement processes that are evaluated and improved for efficiency, effectiveness and flexibility. Provides custom forms, manager guides and process maps to reflect the various workflows specific to the Health Department human resources functions. Tracks and management core HR metrics including workforce hiring, promotional and separation trends, investigatory themes and key opportunities, recruitment trends, etc so that the data can be used to drive improved performance standards.
- 2) **Workforce Development:** Promotes equitable access and invests in workforce development through education, training and diversity focused succession planning. Provides staff and organization development opportunities that support high performance, leadership development, and improved collaboration and communication. This includes a customized leadership development training program called "Intentional Leadership" that focuses on developing the core skills and competencies the Health Dept finds critical for managers and supervisors. Additional support to the Health Dept includes organizational development consultation, change management, team building and succession planning. Other support includes managing and maintaining department training content, administrative guidelines dissemination, and promoting statutory compliance and related technical training for meeting regulatory and accreditation standards.
- 3) **Quality Assurance and Compliance:** Ensures federal, state, organizational and contractual compliance and integrity. Ensures Human Resources' systems, processes and personnel rules are implemented and consistently followed. Guides and directs all Human Resources' activities of the Health Department by providing internal consultation with legal counsel, and to managers and employees on a wide range of issues regarding human resources, employee and labor relations, performance management, position classification, and recruitment. Maintains record and retention compliance with County Personnel Rules, department guidelines and labor contracts, to reduce liability and costs of unlawful employment practices. Monitors HR departmental compliance as it relates to FMLA/OFLA, ADA, HIPAA, etc.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% increase in diversity of workforce	1%	6%	2%	3%
Outcome	% increase in diversity of hires through the increase focus on diversity focused recruitment strategies	5%	3%	4%	4%
Output	% completion of Performance Planning and Review (PPR) documents	67%	N/A	75%	80%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Three collective bargaining agreements; federal, state, county and department regulations covering classification and compensation, disciplinary action, Affirmative Action, Equal Opportunity, Americans with Disabilities Act, equity, recruitment and vacancies, training, process improvement, vacation and work schedules.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,925,913	\$0	\$3,222,745	\$0
Contractual Services	\$84,243	\$0	\$22,952	\$0
Materials & Supplies	\$90,930	\$0	\$57,330	\$0
Internal Services	\$419,432	\$0	\$527,576	\$0
<b>Total GF/non-GF</b>	<b>\$3,520,518</b>	<b>\$0</b>	<b>\$3,830,603</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,520,518</b>		<b>\$3,830,603</b>	
<b>Program FTE</b>	22.75	0.00	23.75	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 40039-19 Human Resources and Training

**Department:** Health Department

**Program Contact:** Robert Stoll

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:** 40041 and 40042

**Program Characteristics:**
**Executive Summary**

This program is responsible for providing all financial reporting and forecasting, grant accounting, budget development and monitoring, and accounts payable for the Health Department. They are liaisons for the department with the Department of County Management (e.g. Budget Office, Central Finance) and are responsible for adhering to County budget, financial and administrative procedures, policies and practices.

**Program Summary**

This program manages all of the financial reporting, billing and collection services for grant-funded programs. It prepares and reviews the Health Department's financial reports and forecasting, as well as develops and maintains the Department's budget. Accounts Payable and travel and training services are also provided.

Budget and Finance works closely with county staff in the CFO's office, Budget Office, and Central Finance. Compliance with a multitude of federal, state and county financial policies and procedures is a key responsibility of this division.

Staff reductions will put some of these activities at risk. Resulting in late filings, slower processing of payments and collections. Late or inaccurate financial reporting will make it difficult for the department to monitor its financial performance.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of invoices processed	14,364	10,000	12,000	12,500
Outcome	Avg # of days from receipt to recording revenue in County's accounting system.	8.5 days	8 days	8 days	8 days
Quality	Number of audit findings in County's annual financial audit.	no findings	no findings	no findings	no findings

**Performance Measures Descriptions**

The accounts payable measure, "# of invoices processed," cash management's along with "Avg # of days..." and "Number of audit findings" is a cross section of measures to test performance in many areas.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$3,132,027	\$0	\$2,956,409	\$0
Contractual Services	\$0	\$0	\$4,732	\$0
Materials & Supplies	\$47,411	\$0	\$49,888	\$86
Internal Services	\$258,423	\$0	\$250,953	\$249,914
<b>Total GF/non-GF</b>	<b>\$3,437,861</b>	<b>\$0</b>	<b>\$3,261,982</b>	<b>\$250,000</b>
<b>Program Total:</b>	<b>\$3,437,861</b>		<b>\$3,511,982</b>	
<b>Program FTE</b>	26.80	0.00	22.80	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$250,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>

Explanation of Revenues

Behavioral Health Managed Care fund: \$ 250,000

Significant Program Changes

Last Year this program was: FY 2019: 40040-19 Budget & Finance

The new Workday system is changing the way business functions are performed. The Business Operations division is still evaluating and understanding what staffing changes will be required to optimize Workday.



**Department:** Health Department      **Program Contact:** Mark Lewis  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40040  
**Program Characteristics:**

### Executive Summary

This offer restores a position in Budget, Grants Management, Accounts Payable, and Contract & Procurement, within the Business Operations division for a total of four positions.

### Program Summary

Business Operations needed to cut 6 FTE or 8 percent of the staff to meet budgetary constraints. While all of the positions are essential, these positions are critical to the Health Departments capacity to support financial reporting, grant billing, invoice processing, and contract creation.

Maintaining this capacity is critical for maximizing grant revenue, ensuring contract and audit compliance, and supporting the wide financial monitoring needs of Health Department programs. While all of the positions are essential, these supporting programs are the areas most impacted by Workday. This new system is changing the way business functions are performed. These areas (Accounting, Contracting, Finance, Purchasing, Payroll and Human Resources) are still evaluating and learning what staffing changes will be required to optimize Workday. Eliminating essential positions at this juncture will hamper our ability to use the new system to its fullest.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of additional supplier invoices processed	N/A	N/A	N/A	400
Outcome	Grant awards processed and invoiced on time	N/A	N/A	N/A	40

### Performance Measures Descriptions

This offer adds staff to add in processing accounts payable invoices as well as to manage grant awards.

## Legal / Contractual Obligation

These positions support the Health Department's efforts to stay compliant with a variety of County, State, and Federal financial and contracting regulations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$430,376	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$430,376</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$430,376</b>	
Program FTE	0.00	0.00	4.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

### Last Year this program was:

The new Workday system is changing the way business functions are performed. The Business Operations division is still evaluating and understanding what staffing changes will be required to optimize Workday.

**Department:** Health Department

**Program Contact:** Mark Lewis

**Program Offer Type:** Support

**Program Offer Stage:** As Adopted

**Related Programs:** 40044

**Program Characteristics:**
**Executive Summary**

Medical Accounts Receivable is responsible for providing medical billing, cash collection and patient account services for the Health Department's primary care, dental, specialty clinics, pharmacy, lab, home and community based health services.

**Program Summary**

The Medical Accounts Receivable Team is responsible for billing and collecting nearly \$75 million a year in medical revenue. This includes billing, collection, cash handling and patient account services for clinics (primary care, school based health clinics, specialty public health and dental) as well as ancillary (lab, pharmacy) and home and community based care (early childhood, healthy homes). The medical billing team maintains, bills and reconciles claims submitted to more than 200 different insurance carriers including Health Share of Oregon, Family Care and other Medicaid, Medicare, and commercial medical and dental insurance plans.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of encounters processed for payment	302,608	309,820	310,000	310,000
Outcome	Percent of Receivables aged (older than 90 days)	23%	21%	23%	21%
Quality	Days of Accounts Receivable	47	51	45	45

**Performance Measures Descriptions**

Number of encounters demonstrates volume of work. % of receivables older than 90 days should be a small and declining %, since the older a claim gets, the less likely it is to be paid. Finally there are many reasons why a claim might not be paid (e.g. client ineligible for service, didn't have insurance coverage on the date of service) but this should be a small and declining % of total claims.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,630,560	\$0	\$1,835,430	\$0
Contractual Services	\$10,400	\$0	\$13,504	\$0
Materials & Supplies	\$215,590	\$0	\$48,451	\$0
Internal Services	\$188,691	\$0	\$251,480	\$0
<b>Total GF/non-GF</b>	<b>\$2,045,241</b>	<b>\$0</b>	<b>\$2,148,865</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,045,241</b>		<b>\$2,148,865</b>	
<b>Program FTE</b>	15.00	0.00	14.90	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 40041-19 Medical Accounts Receivable

**Department:** Health Department      **Program Contact:** Darren Chilton  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40040  
**Program Characteristics:**

### Executive Summary

Health Department Contracts and Procurement advises, prepares and processes all contracts, intergovernmental and professional service agreements for the department. They also provide purchasing support for the procurement of a wide array of products, goods and services.

### Program Summary

Health Department Contracts and Procurement processes more than 500 contracts, intergovernmental and professional service agreements for the department. They also provide purchasing support for the procurement of a wide array of products, goods and services, totaling more than \$30 million per year. They safeguard the department from risk; ensure compliance with federal and state public procurement laws and regulations; seek out cost effective high quality goods and services for the Health Department clinics, programs and activities.

Budgetary constraints will put some of these activities at risk, resulting in delays in order placement, contract execution and timely contract amendments.

This program also manages the vaccine depot where vaccine is received, stored and distributed, in the safest manner possible, using cold-chain management strategies which follow State and Federal guidelines. In addition, responsibilities include vaccine storage, handling and distribution among 13 school-based health clinics, 12 primary care and specialty clinics and three correctional facilities. The vaccine stored at this location includes childhood and adult vaccines, influenza and tubersol. The depot processes on average, 80 orders per month. This is the primary point of contact for routine vaccine services management and in the event of an emergency public health response that requires vaccine prophylaxis.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of contracts or amendments processed	915	875	900	900
Outcome	Percent of contracts executed by start of contract	90%	90%	90%	90%

### Performance Measures Descriptions

## Legal / Contractual Obligation

ORS279A, 279B, 279C; County procedures Con-1 and Pur-1.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,496,347	\$0	\$1,464,194	\$0
Contractual Services	\$0	\$0	\$4,127	\$0
Materials & Supplies	\$33,467	\$0	\$29,414	\$0
Internal Services	\$146,622	\$0	\$266,739	\$0
<b>Total GF/non-GF</b>	<b>\$1,676,436</b>	<b>\$0</b>	<b>\$1,764,474</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,676,436</b>		<b>\$1,764,474</b>	
<b>Program FTE</b>	13.50	0.00	12.50	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 40042-19 Contracts & Procurement

The new Workday system is changing the way business functions are performed. The Business Operations division is still evaluating and understanding what staffing changes will be required to optimize Workday.

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Wendy Lear
<b>Program Offer Type:</b>	Support	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	40040-40044		

**Program Characteristics:**

### Executive Summary

Health Department Operations provides leadership and operational services in support of the Department's mission, including strategic planning, policy and technology governance, communications and marketing, facilities and general operations support.

### Program Summary

Strategic Operations oversees the department's technology and policy governance functions, provides communications and marketing support to all divisions and programs, and coordinates the department's space and facilities needs. This team is also responsible for developing the Health Department's strategic plan and delivering more detailed strategic planning assistance and facilitation to divisions as needed. Budgetary cuts will put some of this work at risk in the coming year.

Strategic Operations serves as a link between the Health Department and internal services provided by Department of County Assets and the County Communications Office. Specifically, Strategic Operations is the liaison with Facilities and Property Management to inform major renovation and construction projects, including the Health Department Headquarters. Strategic Operations also facilitates the prioritization of the Department's technology investments and works in partnership with County IT to ensure that the Health Department meets its IT Strategic Plan, updates and maintains IT infrastructure, and responds to emerging technology needs.

The Strategic Operations team reports to the Finance and Operations Director.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of communications projects completed	556	302	400	500
Outcome	Number of people reached through social media posts.	96,000	139,000	145,000	200,000
Output	Number of policies corrected and updated on Compliance 360 for quality assurance.	0	400	500	600
Output	Number of technology projects financed through the Pipeline Management Team	35	42	42	45

### Performance Measures Descriptions

Completed communications requests speak to a stronger and more robust communications infrastructure, including an active social media presence, responsive internal communications and marketing of critical services to communities with limited access to healthcare.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,823,543	\$0	\$2,273,953	\$0
Contractual Services	\$65,080	\$0	\$38,759	\$0
Materials & Supplies	\$103,040	\$0	\$109,863	\$0
Internal Services	\$3,072,458	\$0	\$2,577,104	\$0
<b>Total GF/non-GF</b>	<b>\$5,064,121</b>	<b>\$0</b>	<b>\$4,999,679</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$5,064,121</b>		<b>\$4,999,679</b>	
<b>Program FTE</b>	12.80	0.00	13.80	0.00

Program Revenues				
Other / Miscellaneous	\$10,751,502	\$0	\$10,183,269	\$0
<b>Total Revenue</b>	<b>\$10,751,502</b>	<b>\$0</b>	<b>\$10,183,269</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 40043-19 Health Department Operations



**Department:** Health Department      **Program Contact:** Mark Lewis  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40041  
**Program Characteristics:**

**Executive Summary**

Health Clinical Data and Reporting includes the annual cost of the EPIC practice management, and the Electronic Health Record (EHR) system used by the Health Department. A small number of staff, under the direction of the Medical Accounts Receivable Manager provide report development and analytical services to the department.

**Program Summary**

The majority of the costs in this program offer are the annual transactional costs, licensing fees and patient statement printing costs associated with the EPIC system hosted by OCHIN (Our Community Health Information Network). This system is used by Medical Accounts Receivable to process medical claims and record the payments for medical services (practice management). All of the medical services provided by the Health department use the practice management system including: primary care, dental, student health centers, corrections health, STD and other specialty Public Health clinics, early childhood and other community and home based services, many also use the Electronic Health Record system.

Three staff --Data Analysts and a Business Process Consultant--under the direction of the Medical Accounts Receivable Manager, provide report writing and analytical support to the staff and programs using EPIC and other large data systems (e.g. Accele, SAP).

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Number of reports created	108	125	135	125
Outcome	Data System and Reporting Tools Supported	22	22	23	23

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$417,014	\$0	\$285,566	\$0
Contractual Services	\$0	\$0	\$60	\$0
Materials & Supplies	\$1,879,158	\$0	\$1,647,642	\$0
Internal Services	\$29,865	\$0	\$71,039	\$0
<b>Total GF/non-GF</b>	<b>\$2,326,037</b>	<b>\$0</b>	<b>\$2,004,307</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,326,037</b>		<b>\$2,004,307</b>	
<b>Program FTE</b>	3.00	0.00	2.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 40044-19 Health Clinical Data and Reporting

**Department:** Health Department      **Program Contact:** Dr. Frank Franklin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40096  
**Program Characteristics:**

**Executive Summary**

Community Epidemiology Services (CES), within the Office of the Director, addresses the foundational capability of Assessment and Epidemiology. In support of data-driven planning, policy, and decision-making, CES identifies the magnitude of disease, disorder, and injury burden among community populations to guide decisions made by public health leaders, policy makers, clinicians, and community members. CES collaborates with partners to identify the determinants of health and disease, characterize the impact of public health interventions, and assess the status of health equity.

**Program Summary**

Community Epidemiology Services (CES) addresses the foundational capability of Assessment and Epidemiology, and supports other foundational capabilities. CES fulfills a unique and required governmental public health role by collecting and analyzing programmatic, population health, and environmental data to prevent disease, and promote and protect health of County residents. CES includes Program Design and Evaluation Services (PDES), a unit shared between PHD and the Oregon Health Authority. PDES provides program and policy evaluation support to PHD, State public health, and other agencies, conducts applied public health research on key emerging issues, and collaborates with partners to improve community health, shape public policy, and reduce health inequities. CES functions include:

- 1) Coordinated public health data and epidemiologic analysis: identifies appropriate analytical approaches, assures the use of high quality data for analysis, and provide technical, scientific oversight and leadership for research and assessment work in the PHD. CES provides support in quantitative and qualitative methods, guidance in the areas of traditional epidemiological analysis, social epidemiology, and equity-focused and trauma-informed methods in research and evaluation, and data management. CES works closely with the Communicable Disease Services program to provide outbreak response through data analysis support, statistical modeling, and standardized investigative guidelines.
- 2) Informing program and policy: CES provides, analyzes, and reports on population and health system data to support program development, strategic planning, resource allocation, decision-making, and community priorities (including community-based participatory research). CES provides public health practice recommendations to PHD leadership based on needs identified from local data and evidence-based and promising practices identified through literature review. CES serves a key role in evaluating whether programs and policies are effective by collaborating with PHD programs and partners. Examples include PHD chronic disease and violence prevention programs, Pacific Islander Community Coalition, Health Share, and other local health departments.
- 3) Disseminating analytic findings: CES shares findings through public health data reports, peer-reviewed scientific manuscripts, policy briefs, web-based reports, and presentations to County and State leadership, programs, and community partners. Examples include the County Maternal Child and Family Health Data Book, Report Card on Racial and Ethnic Disparities, data briefs on emerging policy issues, and leading causes of death and disability presentations to the Board of Health.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of data-related community collaborations that involve all partners and combine data with action.	14	15	14	13
Outcome	Number of reports monitoring health status through surveillance, assessment, & community engagement.	17	18	14	12

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Oregon Revised Statutes (ORS) 431.416 Local Public Health Authority duties:

- (a) Epidemiology and control of preventable diseases and disorders
- (b) Parent and child health services
- (c) Collection and reporting of health statistics
- (d) Health information and referral services
- (e) Environmental health services

Program Design and Evaluation Services (PDES) is primarily grant funded, and program continuation is required by grant.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,028,619	\$998,052	\$1,072,382	\$1,172,922
Contractual Services	\$99,195	\$285,000	\$18,350	\$301,524
Materials & Supplies	\$99,032	\$39,140	\$78,819	\$35,213
Internal Services	\$102,921	\$125,854	\$138,481	\$134,810
<b>Total GF/non-GF</b>	<b>\$1,329,767</b>	<b>\$1,448,046</b>	<b>\$1,308,032</b>	<b>\$1,644,469</b>
<b>Program Total:</b>	<b>\$2,777,813</b>		<b>\$2,952,501</b>	
<b>Program FTE</b>	6.10	6.48	5.69	7.07

Program Revenues				
Intergovernmental	\$0	\$1,448,046	\$0	\$1,644,469
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,448,046</b>	<b>\$0</b>	<b>\$1,644,469</b>

## Explanation of Revenues

State Local Public Health Authority IGA: \$ 792,945  
State Of Alaska: \$ 579,000  
State Office of Multicultural Health: \$ 155,000  
AK Chronic Retainer: \$ 61,000  
Public Health Modernization: \$ 56,524

## Significant Program Changes

Last Year this program was: FY 2019: 40048A-19 Community Epidemiology

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Providing health care to detained youth is the responsibility of Corrections Health. Corrections Health personnel care for 80 detained youth at any one time (+3,500 per year) from Multnomah, Washington and Clackamas counties who are brought in from the streets, other jurisdictions and other community holding facilities. Detainees include females and males who need their health issues addressed in a timely manner in order to prevent emergencies, pain and suffering which is the constitutional measure of quality care. Stabilizing their health allows them to participate fully in their legal processes.

### Program Summary

This offer ensures that the health program meets the standards that ensure access to care, safeguards the health of all those who are in detention, and controls the legal risk to the County. JDH health professionals work 16 hours/day, seven days a week providing care for 80 youth daily in 7 individual housing units from three counties. Care ranges from minor ailments to major chronic and emotional diseases resulting from substance abuse, trauma, lack of health care, lack of knowledge of hygiene and self care, frequent infections and a high rate of medical and mental illness.

In partnership with the Department of Community Justice custody staff, Corrections Health identifies and responds to medical emergencies and also screens for communicable diseases to keep outbreaks to a minimum, to provide care efficiently and effectively, as well as to protect the community. Coordination with other Oregon counties is facilitated so that continuity of care occurs when youths transfer to other jurisdictions.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of client visits conducted by a CH nurse per year	2,734	2,500	2,800	2,800
Outcome	% of detained youth receiving mental health medications monthly	44%	40%	45%	45%

### Performance Measures Descriptions

Measure 1: Tracking the number of visits per year helps to assess client access to care and resource utilization.  
 Measure 2: Tracking percentage of youth receiving psychotropic medications allows for monitoring of needs at the JDH facility.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$689,936	\$0	\$1,007,599	\$0
Materials & Supplies	\$51,747	\$0	\$47,763	\$0
Internal Services	\$151,505	\$0	\$243,299	\$0
<b>Total GF/non-GF</b>	<b>\$893,188</b>	<b>\$0</b>	<b>\$1,298,661</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$893,188</b>		<b>\$1,298,661</b>	
<b>Program FTE</b>	4.10	0.00	5.10	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for all services from Medicare, Medicaid and OHP. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. Youth in the Alcohol and Drug Treatment Program have Oregon Health Plan (OHP) coverage so some of their clinic appointments with a physician and medications are billed to the Oregon Health Plan.

## Significant Program Changes

Last Year this program was: FY 2019: 40049-19 Corrections Health Juvenile Detention

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Corrections Health, Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and three floors of discipline and evaluation housing. Approximately 100 US Marshall (USM) detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal, and major mental/behavioral illnesses.

### Program Summary

Providing health care to all detained individuals is the responsibility of Corrections Health. From first entering into the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and are equivalent to other correctional facilities across the country.

This offer represents Corrections Health MCDC basic administration, support, booking and mental health care delivery programs. MCDC averages 80+ newly booked individuals each day. Nurses (24 hours/7 days a week) evaluate each detainee to identify critical health issues and make plans for scheduled care for stabilization. Screening includes obtaining health history for both acute and chronic disease, including mental health care, substance abuse, communicable disease evaluation and current prescriptions. As a result of those evaluations, treatments, medications, provider appointments, mental health referrals and housing decisions are made. In addition, Corrections Health nursing staff assess individuals brought to the jail before being accepted into custody--that assessment ensures that serious medical and/or mental health issues (trauma, drug ingestion, pregnancy complications, serious wounds and infections) are appropriately addressed in a hospital setting before booking. In addition, significant resources are utilized to perform case management of the USM detainees, including coordination of specialist services, screening for communicable diseases and coordinating transfer of care to other facilities. An additional history and physical examination is performed on all individuals incarcerated for 14 days. Additionally, staff assess and treat acute and chronic medical, dental and mental health issues as appropriate during each individual's incarceration. Suicide and self harm symptom identification is an essential mental health function. The mental health team is composed of a psychiatrist, PMHNPs, mental health consultants and mental health nurses for evaluation, monitoring and treatment for the many mentally ill clients booked into jail. One third of all medications prescribed are for mental health conditions.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Average # of Reception Screening ("EPF"=Entry Progress Form") completed in a month	1,847	1,900	1,837	1,900
Outcome	% of + screenings resulting in a referral to the mental health team per year	30%	30%	32%	30%

### Performance Measures Descriptions

Measure 1: Captures monthly intake screenings for incoming detainees--the measure does not correlate with the static jail population and more accurately reflects incoming patient volume.

Measure 2: Captures initial interview information and how many clients are referred for mental health care.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,700,133	\$0	\$2,828,622	\$0
Contractual Services	\$105,000	\$0	\$110,642	\$0
Materials & Supplies	\$332,800	\$0	\$360,392	\$0
Internal Services	\$74,421	\$0	\$177,621	\$0
<b>Total GF/non-GF</b>	<b>\$3,212,354</b>	<b>\$0</b>	<b>\$3,477,277</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,212,354</b>		<b>\$3,477,277</b>	
<b>Program FTE</b>	21.00	0.00	21.10	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40050A-19 Corrections Health Multnomah County Detention Center (MCDC)



**Department:** Health Department      **Program Contact:** Michael Seale

**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

Corrections Health Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and three floors of discipline and classification housing. Approximately 100 USM detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental/behavioral illnesses.

**Program Summary**

Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide effective screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community, and are equivalent to other correctional facilities across the country.

This offer represents the MCDC 4th floor which is composed of 46 beds, two general and two mental health clinic rooms, one dental operator, X-ray and lab services as well as 10 mental health and 10 general medical skilled care beds, plus four housing areas for high level discipline inmates. The 4th floor also contains a nursing station, administrative areas and a medication/supplies room. Services such as skilled nursing, IV therapy, post surgical and terminal care are provided in the jail instead of a high cost hospital. The 4th floor is staffed 24/7 with nursing personnel to provide needed care and emergency medical response. This health care is delivered effectively through providing the right care in the right setting.

The fourth floor housing unit 4D is acute mental health. There are 10 beds in that unit. Both medical and mental health services are provided to these chronically ill clients. Mental health is managed by a team of mental health nurses, consultants and providers. A mental health supervisor and mental health consultants (including a lead) provide support for forensic diversion and other programs, testify in court when appropriate and participate in multidisciplinary team processes to ensure the most appropriate and least restrictive housing is utilized, and that efforts to divert detainees from jail are expedited.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg # inmate nursing assessments monthly	1,212	1,300	1,050	1,200
Outcome	Avg active and constant suicide watches per month to prevent inmate injury or death.	120	100	130	130

**Performance Measures Descriptions**

Measure 1: Reflects care delivered on all floors in MCDC and includes both medical and mental health requests.

Measure 2: Tracking both "ACTIVE" and "CONSTANT" suicide watches, captures management of detainees felt to be at risk, better reflecting resource needs.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,535,919	\$0	\$1,828,603	\$0
Contractual Services	\$319,321	\$0	\$323,000	\$0
Materials & Supplies	\$386,508	\$0	\$544,685	\$0
Internal Services	\$375,665	\$0	\$398,592	\$0
<b>Total GF/non-GF</b>	<b>\$2,617,413</b>	<b>\$0</b>	<b>\$3,094,880</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,617,413</b>		<b>\$3,094,880</b>	
<b>Program FTE</b>	10.30	0.00	10.50	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40050B-19 Corrections Health MCDC Clinical Services and 4th Floor Housing

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Corrections Health Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and three floors of discipline and evaluation housing. Over 36,000 individuals are cared for each year with over 50% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental/behavioral illnesses.

### Program Summary

Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide effective screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and are accredited by the National Commission on Correctional Health Care.

This offer represents the health services to all four housing floors at MCDC. Approximately 400 detainees are housed in classification (new jail housing), female, male, close custody and mental health housing modules. Ninety-six rooms are designated for those with mental health diagnosis and cared for by a team of mental health nurses, consultants and providers for diagnosis and treatment. Early identification, evaluation and treatment provide safety for clients, especially for suicide prevention. A variety of treatments, such as managing alcohol and drug withdrawal, evaluating chronic diseases, preventing the spread of communicable diseases, medication management and emergency response are provided efficiently by 24/7 staff. This health care is delivered effectively through providing the right care in the right setting.

Expansion of the use of Medication Assisted Treatment using buprenorphine has allowed for more effective, efficient and humane management of withdrawal from opiates. Per protocols, buprenorphine is provided to all opiate-involved pregnant women, detainees with documented use of buprenorphine in a community program and detainees undergoing severe opiate withdrawal.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg # inmate nursing assessments monthly	1,212	1,300	1,050	1,200
Outcome	Avg of total number of active and constant suicide watches per month to prevent inmate injury or death	120	90	130	130

### Performance Measures Descriptions

Measure 1: Reflects care delivered on all floors at MCDC and includes both medical and mental health requests.  
 Measure 2: Tracking both "ACTIVE" and "CONSTANT" suicide watches, captures management of detainees felt to be at risk, better reflecting resource needs.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,313,610	\$0	\$2,724,908	\$0
Contractual Services	\$224,321	\$0	\$235,000	\$0
Materials & Supplies	\$0	\$0	\$3,030	\$0
Internal Services	\$254,894	\$0	\$265,729	\$0
<b>Total GF/non-GF</b>	<b>\$2,792,825</b>	<b>\$0</b>	<b>\$3,228,667</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,792,825</b>		<b>\$3,228,667</b>	
<b>Program FTE</b>	17.85	0.00	17.45	0.00

Program Revenues				
Service Charges	\$40,000	\$0	\$40,000	\$0
<b>Total Revenue</b>	<b>\$40,000</b>	<b>\$0</b>	<b>\$40,000</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40050C-19 Corrections Health MCDC Housing Floors 5, 6, 7 & 8

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

This program offer will allow Corrections Health to continue to serve incarcerated individuals at the jails current capacity. The cost of outside medical services, provided by local hospitals and emergencies rooms, has exceeded the budget for those services for many years. This program offer will bring the budget for outside medical services in line with actual costs.

### Program Summary

Corrections Health has an ongoing serious challenge regarding the increasing cost of provision of outside specialty services while ensuring that constitutional and accreditation requirements as well as community standards of care are met. Professional Services costs include specialist evaluations, specialty testing (MRIs, CT Scans, etc.), laboratory tests, x-ray interpretation services, as well as ambulance and Emergency Room costs. As health care costs rise nationally, so do the costs incurred by Corrections Health to provide essential health care services.

In order to address rising Professional Services costs in Corrections Health and also ensure the provision of appropriate client care, the Health Department is employing a variety of efforts in the FY20 budget designed to minimize the impact of the rising cost of health care, including ongoing and regular discussions with Corrections Health Partners for utilization management and review, on-site physical therapy services, on-site portable radiology services, addition of on-site portable ultrasound services, additional eligibility specialist support to help to insure that all detainees have available insurance and that claims are billed elsewhere whenever possible and additional transition planner support to facilitate continuity of care and community follow-up so as to potentially reduce recidivism.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of clients enrolled in Oregon Health Plan	n/a	n/a	n/a	1,200
Outcome	Percentage of outside claim eligibility reviews performed by Corrections Health	n/a	n/a	n/a	100%

### Performance Measures Descriptions

Number of clients enrolled in Oregon Health Plan is a new measure and the estimate of 1,200 is for both MCDC and IJ combined. This will be an increase of 400 over the previous year. Oregon Health Plan enrollment and review of all medical claims is a two part strategy for lowering the cost to the County for outside medical care.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$0	\$0
Contractual Services	\$0	\$0	\$750,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$750,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$750,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Corrections Health Multnomah County Inverness Jail houses 860 men, women, inmate workers for inside and outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 100 USM detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

### Program Summary

MCIJ health personnel care for all those detainees transferred from MDCDC to continue or begin treatment until disposition of their legal process is complete. Sentenced and non-sentenced detainees have a plan of care in place to maintain treatment of their health conditions.

Trained, skilled professional staff provide effective screening, illness identification, evaluation and effective targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equivalent to other correctional facilities across the country. This offer represents MCIJ base and clinical services which includes administrative, support, diagnostic and clinical services. Three general provider rooms, one dental operator, one mental health and one triage/treatment room are available for office visits for clients. Triage nurses evaluate client care requests and refer to nurses, the mental health team, providers or dentists for care according to the medical need. Support services include X-ray and lab services. This area also supports the nursing station, medication room, central records room and administrative offices for various personnel. By providing 24/7 skilled health care on site for this vulnerable, underserved population, the high cost of outside medical care is minimized. MCIJ is also the center (HUB) for the state inmate transport system. An average of 20-100 inmates stay overnight and receive health care.

Mental health services are also provided to inmates at MCIJ. Inmates typically are more stable in this jail which allows for mental health groups to occur several times per week. In addition to groups, individual sessions and medication management occurs.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg # inmate nursing assessments monthly	1,529	1,600	1,850	1,800
Outcome	# of 14-day Health Assessments completed monthly	218	230	251	250

### Performance Measures Descriptions

Measure 1: Reflects care delivered in the entire facility and includes both medical and mental health requests.

Measure 2: Based on NCCHC accreditation requirements, we are tracking 14-day history and physical assessments.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$2,165,226	\$0	\$2,296,695	\$0
Contractual Services	\$200,000	\$0	\$206,167	\$0
Materials & Supplies	\$548,744	\$0	\$581,773	\$0
Internal Services	\$441,790	\$0	\$396,807	\$0
<b>Total GF/non-GF</b>	<b>\$3,355,760</b>	<b>\$0</b>	<b>\$3,481,442</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,355,760</b>		<b>\$3,481,442</b>	
<b>Program FTE</b>	20.40	0.00	20.60	0.00

Program Revenues				
Service Charges	\$45,000	\$0	\$45,000	\$0
<b>Total Revenue</b>	<b>\$45,000</b>	<b>\$0</b>	<b>\$45,000</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40051A-19 Corrections Health Inverness Jail (MCIJ) Clinical Services



**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Corrections Health Multnomah County Inverness Jail houses 860 men, women, inmate workers for inside and outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 100 USM detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

### Program Summary

Trained, skilled professional staff working 24/7 provide effective screening, illness identification, evaluation and effective targeted treatment through a system of policies and procedures that reflect the standard of care in the community and is equivalent to other correctional facilities across the country.

This offer represents a variety of health, mental health, and dental services to 430 men and women in the open Dorms at MCIJ. Diverse staff work 24/7 to provide evaluation, treatment, referral, medication management, emergency response, communicable disease identification and suicide prevention. Inside and outside inmate workers are monitored by Corrections Health for the ability to work, evaluation of injuries and medication management when out of the facility. Chronic disease monitoring is key to preventing hospitalizations for clients with diabetes, hypertension, seizures, heart disease and infections. Special orthopedic and OB/GYN clinics operate on-site. In partnership with custody staff, Corrections Health responds to emergencies and screens for communicable diseases. This health care is delivered effectively through providing the right care in the right settings.

Mental health services are also provided to inmates at MCIJ. Inmates are more stable in this jail which allows for mental health groups to occur several times per week. In addition to groups, individual sessions and medication management occur.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg # inmate nursing assessments monthly	1,529	1,600	1,850	1,800
Outcome	# of 14-day Health Assessments completed monthly	218	230	251	250

### Performance Measures Descriptions

Measure 1: Reflects care delivered in the entire facility and includes both medical and mental health requests.

Measure 2: Based on NCCHC accreditation requirements, we are tracking 14 day history and physical assessments.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,358,772	\$0	\$1,620,383	\$0
Contractual Services	\$224,321	\$0	\$231,238	\$0
Materials & Supplies	\$95,066	\$0	\$89,536	\$0
Internal Services	\$133,318	\$0	\$125,307	\$0
<b>Total GF/non-GF</b>	<b>\$1,811,477</b>	<b>\$0</b>	<b>\$2,066,464</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,811,477</b>		<b>\$2,066,464</b>	
<b>Program FTE</b>	6.50	0.00	7.70	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

Last Year this program was: FY 2019: 40051B-19 Corrections Health MCIJ General Housing Dorms 4 - 11

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Inverness Jail houses 860 men, women, inmate workers for inside and outside work crews, sentenced individuals and those awaiting trial who are being medically stabilized with treatment. Approximately 100 USM detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and mental illnesses.

**Program Summary**

Trained, skilled professional staff working 24/7 provide effective screening, illness identification, evaluation and effective targeted treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country.

Corrections Health provides a variety of health, mental health and dental services to 430 men and women in dorms 12-18 at MCIJ. Diverse staff work 24/7 to provide evaluation, treatment, referral, medication management, emergency response, communicable disease identification and suicide prevention. A 10 bed medical unit provides skilled nursing and protective isolation in house, and utilization of the unit prevents a stay in a hospital at a much greater cost. Chronic disease monitoring is key to prevent hospitalizations for our clients with diabetes, hypertension, seizures, heart disease and infections. Special OB/GYN and orthopedic clinics operate on-site. In partnership with custody staff, Corrections Health responds to emergencies and screens for communicable disease. This health care is delivered effectively through providing the right care in the right setting.

Mental health services are also provided to inmates at MCIJ. Inmates are more stable in this jail which allows for mental health groups to occur several times per week. In addition to groups, individual sessions and medication management occur.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg # inmate nursing assessments monthly	1,529	1,600	1,850	1,800
Outcome	# of 14-day Health Assessments completed monthly	218	230	251	250

**Performance Measures Descriptions**

Measure 1: Reflects care delivered in the entire facility and includes both medical and mental health requests.  
 Measure 2: Based on NCCHC accreditation requirements, we are tracking 14 day history and physical assessments.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,322,556	\$0	\$1,484,374	\$0
Contractual Services	\$224,321	\$0	\$231,238	\$0
<b>Total GF/non-GF</b>	<b>\$1,546,877</b>	<b>\$0</b>	<b>\$1,715,612</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,546,877</b>		<b>\$1,715,612</b>	
<b>Program FTE</b>	8.30	0.00	9.30	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40051C-19 Corrections Health MCIJ Dorms 12 - 18 and Infirmary

**Department:** Health Department                      **Program Contact:** Michael Seale

**Program Offer Type:** Existing Operating Program                      **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

This program offer will allow Corrections Health to continue to serve incarcerated individuals at the jails current capacity. The cost of outside medical services, provided by local hospitals and emergencies rooms, has exceeded the budget for those services for many years. This program offer will bring the budget for outside medical care in line with actual costs.

**Program Summary**

Corrections Health has an ongoing serious challenge regarding the increasing cost of provision of outside specialty services while ensuring that constitutional and accreditation requirements as well as community standards of care are met. Professional Services costs include specialist evaluations, specialty testing (MRIs, CT Scans, etc.), laboratory tests, x-ray interpretation services, as well as ambulance and Emergency Room costs. As health care costs rise nationally, so do the costs incurred by Corrections Health to provide essential health care services.

In order to address rising Professional Services costs in Corrections Health and also ensure the provision of appropriate client care, the Health Department is employing a variety of efforts in the FY20 budget designed to minimize the impact of the rising cost of health care, including ongoing and regular discussions with Corrections Health Partners for utilization management and review, on-site physical therapy services, on-site portable radiology services, addition of on-site portable ultrasound services, additional eligibility specialist support to help to insure that all detainees have available insurance and that claims are billed elsewhere whenever possible and additional transition planner support to facilitate continuity of care and community follow-up so as to potentially reduce recidivism.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Number of clients enrolled in Oregon Health Plan	n/a	n/a	n/a	1,200
Outcome	Percentage of outside claim eligibility reviews performed by Corrections Health	n/a	n/a	n/a	100%

**Performance Measures Descriptions**

Number of clients enrolled in Oregon Health Plan is a new measure and the estimate of 1,200 is for both MCDC and IJ combined. This will be an increase of 400 over the previous year. Oregon Health Plan enrollment and review of all medical claims is a two part strategy for lowering the cost to the County for outside medical care.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$0	\$0
Contractual Services	\$0	\$0	\$750,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$750,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$750,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Paul Lewis  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The County Medical Examiner's Office (ME) investigates and determines the cause and manner of deaths which occur under specific circumstances in Multnomah County. Approximately 2,200 of the County's 6,500 yearly deaths fall into this category. ME Office activities are highly visible to the public when a questionable death occurs in the community. ME staff are directly involved with the families, loved ones of deceased individuals, and the emergency response community, (police, fire, mortuary services, accident investigators) on a daily basis. The Office operates 24/7/365.

**Program Summary**

Under ORS Chapter 146, the County is required to have a Medical Examiner (ME) Office investigate deaths that occur under specific circumstances. These include deaths a) that are apparently homicidal, suicidal or occurring under suspicious circumstances, b) resulting from unlawful use of controlled substances or toxic agents, c) following an accident or injury, d) occurring under incarceration or police custody, and e) during or arising from employment. They also include deaths that are sudden, unexpected or that are unattended by a physician.

As most deaths investigated by the ME are sudden and unexpected, the ME's Office is in a unique position to identify unusual and emerging causes of death and injury, and to contribute to preventive public health interventions. Examples include clusters of death due to an unknown illness, prescription medication, overdose, or illicit drug use.

ORS 146 establishes a hybrid state/county approach to ME services. Counties and the state share authority and responsibility for staffing, supervision, operations, and technical direction. Multnomah County staff carry out field death investigations, authorize removal of deceased persons from the place of death, notify next-of-kin, and protect decedents' property until a personal representative takes charge. They also work in collaboration with state physician Medical Examiners who perform autopsies and certify the cause and manner of death. The Multnomah County ME's Office is physically co-located with the Clackamas County and Oregon ME Offices in an Oregon State Police facility in Clackamas County.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of deaths requiring investigation	2,313	2,500	2,425	2,500
Outcome	Deputy Medical Examiner arrives on-scene within one hour for 90% of calls	72%	80%	70%	80%

**Performance Measures Descriptions**

**Output:** Number of deaths in Multnomah County that require investigations. Because census data and occurrence deaths are tracked at the calendar year level, these data are based on calendar years.

**Outcome:** A Deputy Medical Examiner arrives on-scene in 90% of calls requiring on-scene investigation within one hour of first notification in order to support public safety, law enforcement, and affected members of the public.

## Legal / Contractual Obligation

ORS 146 specifies responsibilities and authorities for the Office (i.e. deaths requiring investigation; responsibility for investigation; notification of death; removal of body; authority to enter and secure premises; notification of next of kin; authority to order removal of body fluids; autopsies; disposition of personal property; unidentified human remains). ORS 146 also establishes a hybrid state/county program structure which limits the county's authority over operations, procedures, and technical functions.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,238,736	\$0	\$1,365,433	\$0
Contractual Services	\$17,010	\$0	\$16,727	\$0
Materials & Supplies	\$83,906	\$0	\$87,894	\$0
Internal Services	\$130,607	\$0	\$134,113	\$0
<b>Total GF/non-GF</b>	<b>\$1,470,259</b>	<b>\$0</b>	<b>\$1,604,167</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,470,259</b>		<b>\$1,604,167</b>	
<b>Program FTE</b>	11.00	0.00	11.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 40052A-19 Medical Examiner

The MC Medical Examiner's Office (MCMEO) has experienced an increase in budget costs related to collective bargaining, which increased staff salaries by 6% and increased both shift and relief shift differentials. The MCMEO currently employs a staff of 7 full-time Deputy Med. Examiners (aka, Death Investigators) and 1 Chief Deputy Med. Examiner to cover an ORS-required 24/7/365 operation. The MCMEO is physically co-located with the Clackamas County and Oregon ME Offices in an Oregon State Police facility in Clackamas County. In 2018, the MCMEO investigated 2,313 deaths. With the addition of a 7th investigator this year, the MCMEO has increased the number of scene responses to cases that were previously phone reviews (1,162 cases). Currently, the MCMEO has 2 scene vehicles for scene response. Due to the increased number of investigations, the MCMEO will purchase a 3rd vehicle to increase scene response times.



**Department:** Health Department      **Program Contact:** Tameka Brazile  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40006, 40060, 40037  
**Program Characteristics:**

**Executive Summary**

Racial and Ethnic Approaches to Community Health (REACH) aims to end racial/ethnic health disparities within the Black/African American communities by ensuring opportunities to realize optimal health potential. REACH programming values a culture first approach, relying on community wisdom to implement culturally tailored interventions that addresses root causes of health inequities to address preventable risk behaviors through communications, policy, systems, and environmental change strategies in partnership with community.

**Program Summary**

Racial and Ethnic Approaches to Community Health (REACH) uses culturally-specific and cross-cultural approaches that combines the voice of community-identified priorities and Centers for Disease Control and Prevention (CDC)-funded communication, policy, system, and environmental change strategies focused on reducing chronic disease in local African American/Black communities, including African immigrants and refugees. The Public Health Division received a new round of REACH funding in FY19 that builds upon the partnerships and strategies developed during the previous cycle of REACH funding (2014-2018). REACH will continue to be a central component to the Health Department's commitment to equity by addressing the ways that societal conditions, built environment, and systems and policies create health disparities among racial and ethnic populations. This work entails developing and maintaining authentic partnerships with culturally-specific community based organizations, clients, faith-based organizations, civic organizations, and local governments to enact approaches and policies to decrease health inequities.

REACH's culturally-tailored programming addresses preventable risk behaviors (i.e., tobacco use, poor nutrition, and physical inactivity) to improve health, prevent chronic disease, and reduce health disparities among racial and ethnic populations with the highest risk/burden of chronic disease (i.e. hypertension, heart disease, Type 2 diabetes, and obesity). In FY20, there are three main REACH program areas focused on local Black/African American communities: nutrition, physical activity, and community-clinical linkages. Nutrition programming will increase the number of places within the County offering healthy food; increase access to healthier foods; and increase continuity of care/community support for implementing breastfeeding. Physical activity programming will increase the number of places that improve community design by connecting safe and accessible places for physical activity; and increase the number people with safe and accessible places for physical activity. Community-clinical linkage programming will increase the use of appropriate and locally available health and community programs, including increasing access and referrals to these resources; expanding the use of health professionals, such as community health workers; and improve quality of service delivery and experience of care. Together, these three program areas work to improve the overall health of neighborhoods throughout Multnomah County.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of policy, systems and environment strategies implemented	NA	NA	10	15
Outcome	# of settings implementing policy, systems and environment strategies	NA	NA	7	10
Outcome	# of Black/African Americans reached through policy, systems and environment changes	NA	NA	700	1,000

**Performance Measures Descriptions**

These measures are new to reflect the new round of REACH funding.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$886,281	\$92,648	\$406,908	\$316,088
Contractual Services	\$200,000	\$67,500	\$5,000	\$381,227
Materials & Supplies	\$61,291	\$14,538	\$4,596	\$43,907
Internal Services	\$106,446	\$11,683	\$47,599	\$50,778
<b>Total GF/non-GF</b>	<b>\$1,254,018</b>	<b>\$186,369</b>	<b>\$464,103</b>	<b>\$792,000</b>
<b>Program Total:</b>	<b>\$1,440,387</b>		<b>\$1,256,103</b>	
<b>Program FTE</b>	6.80	0.75	3.10	2.40

Program Revenues				
Intergovernmental	\$0	\$186,369	\$0	\$792,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$186,369</b>	<b>\$0</b>	<b>\$792,000</b>

Explanation of Revenues

CDC REACH Grant: \$ 792,000

Significant Program Changes

**Last Year this program was:** FY 2019: 40053-19 Racial and Ethnic Approaches to Community Health

In FY19, this program offer included Community Powered Change (CPC)/Community Health Improvement Plan (CHIP) and all health equity staff. These programs remain core components of the Public Health Division and were moved to 40096: Public Health Office of the Director in FY20 as part of department and program offer reorganization. REACH saw an increase in Federal Grant revenue that will result in increased program capacity (FTE and scope/level of services).

**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40055, 40056, 40058  
**Program Characteristics:**

**Executive Summary**

Nurse Family Partnership Program (NFP) is an evidence-based community healthcare program supported by more than 30 years of extensive research. NFP supports a partnership between low-income, first time mothers with a home visiting Community Health Nurse to achieve the care and support they need to have a healthy pregnancy and provide confident and competent care for their children and families.

**Program Summary**

Research shows the conditions of early life have a profound impact on long-term health and life stability. The Nurse Family Partnership Program (NFP) is a nurse home visiting program offered to first-time, low-income pregnant women through two Multnomah County teams located in Northeast Portland and East County. Home visiting services begin in early pregnancy and follow families up to their child's second birthday.

NFP consistently demonstrates improved prenatal health, fewer childhood injuries, increased intervals between births, increased maternal employment, and improved school readiness for children. Multnomah County has developed infrastructure that ensures fidelity to the NFP model and includes extensive staff training, reflective supervision, a Community Advisory Council, and rigorous evaluation support through the NFP National Service Office. Long-term benefits to the county include healthy children ready to learn; decreased costs related to fewer families involved in child welfare and juvenile justice systems, and over the long-term families less affected by chronic disease.

Nurse Family Partnership is connected with the Healthy Birth Initiative (HBI). This partnership provides African American first-time mothers who are enrolled in NFP with all of the wraparound, culturally-specific services and leadership development of the HBI program. Additional families served through the coordinated programs are reflected in the HBI program offer.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of families served	345	350	454	350
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	65%	65%	65%	65%
Quality	Client retention in prenatal phase of NFP program	58%	70%	60%	70%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Nurse Family Partnership (NFP) complies with contractual program guidelines set forth by the NFP National Service Office to assure fidelity to the model. Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410- 147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$425,563	\$1,302,398	\$273,775	\$1,358,468
Contractual Services	\$555,743	\$0	\$661,704	\$0
Materials & Supplies	\$69,580	\$10,960	\$64,521	\$0
Internal Services	\$282,873	\$164,232	\$0	\$157,446
<b>Total GF/non-GF</b>	<b>\$1,333,759</b>	<b>\$1,477,590</b>	<b>\$1,000,000</b>	<b>\$1,515,914</b>
<b>Program Total:</b>	<b>\$2,811,349</b>		<b>\$2,515,914</b>	
<b>Program FTE</b>	2.78	8.42	1.77	8.34

Program Revenues				
Intergovernmental	\$0	\$92,120	\$0	\$88,802
Service Charges	\$0	\$1,385,470	\$0	\$1,427,112
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,477,590</b>	<b>\$0</b>	<b>\$1,515,914</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 40054-19 Nurse Family Partnership

**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40054, 40056, 40058, 40097  
**Program Characteristics:**

### Executive Summary

This program includes Healthy Homes Asthma Home Visiting and community-based early childhood health consulting. Using nurse and community health worker home visiting models, these services support vulnerable families with children who have health conditions, by providing health assessments in the home, conducting care coordination, providing technical assistance for providers who service children for special healthcare needs, building a family's capacity to work with health/social services systems, reducing environmental toxins, and building culturally congruent health care.

### Program Summary

Research shows the conditions of early life have a profound impact on long-term health and life stability. Home and community based services support families with children who have a chronic health condition and/or are identified as high-risk in community settings through three program areas.

The Healthy Homes Asthma Home Visiting Program addresses health inequities by improving the livability of the home environment. A bilingual, multi-disciplinary team provides in-home asthma nursing and environmental case management to reduce environmental triggers and improve health outcomes, quality of life, and housing conditions. Staff provide home-based environmental and nursing assessment/interventions for high-risk children with asthma; consult with medical providers/ pharmacists; partner with landlords and tenants to improve housing conditions; coordinate asthma care with school/day-care; provide supplies to reduce or eliminate asthma triggers; and advocate for safe, healthy, stable, and affordable housing.

Early childhood health consulting is provided through community health nurses and community health workers. These services are provided by both staff and community contracts to support families enrolled in the Mt Hood Head Start program, Oregon Child Development Coalition, Multnomah Early Childhood Program, and Albina Head Start.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of families receiving an environmental home inspection	16	NA	15	45
Outcome	% completion of final Asthma Home Nursing assessments	69%	100%	75%	80%
Output	# of technical assistance consults to service providers who work with children with special health care needs	NA	NA	300	300

### Performance Measures Descriptions

1) Due to reductions in Title V Maternal and Child Health Services Block Grant Program FY19 funding, the environmental health inspections portion of this program had been eliminated and was partially restored mid-year resulting in the FY19 Purchased NA. 3) New Measure

## Legal / Contractual Obligation

Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

Some activities under this program offer are subject to contractual obligations under the DMAP Healthy Homes State Health Plan Amendment, and DMAP programs funded by Oregon Public Health Division must comply with work plans and assurances.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$320,031	\$1,256,102	\$375,994	\$471,872
Contractual Services	\$137,656	\$99,984	\$107,918	\$0
Materials & Supplies	\$22,708	\$103,272	\$17,783	\$2,366
Internal Services	\$80,668	\$266,357	\$221,376	\$50,724
<b>Total GF/non-GF</b>	<b>\$561,063</b>	<b>\$1,725,715</b>	<b>\$723,071</b>	<b>\$524,962</b>
<b>Program Total:</b>	<b>\$2,286,778</b>		<b>\$1,248,033</b>	
<b>Program FTE</b>	2.09	9.01	2.16	3.74

Program Revenues				
Intergovernmental	\$0	\$1,255,466	\$0	\$34,000
Other / Miscellaneous	\$0	\$0	\$0	\$247,602
Service Charges	\$0	\$470,249	\$0	\$243,360
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,725,715</b>	<b>\$0</b>	<b>\$524,962</b>

## Explanation of Revenues

This program offer is funded by the following:

- \$ 243,360: Healthy Homes TCM
- \$ 247,598: DDSD-CHN
- \$ 17,000: OCDC EHS-CHN
- \$ 17,000: MHCC Head Start

## Significant Program Changes

**Last Year this program was:** FY 2019: 40055-19 Home and Community Based Health Consulting

In FY19 the Maternal Child Medical Home program was included in this program offer. CareOregon Maternal Child Medical Home funding ended in FY19 and program has been completed.

**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This investment builds on and continues the development of a Best Baby Zone (Baby Booster) in the 97266 zip code of southeast Portland that uses a Life Course approach to Maternal Child and Family Health outcomes. This initiative supports a Baby Booster collective impact plan built on community identified priorities. Specifically, a racial equity and health driven prioritization process is informing access to new affordable housing units for families in the 97266 zip code.

**Program Summary**

Despite years of investing in improved access and quality of health care, racial and ethnic disparities continue to exist in local, state and national maternal, child and family health outcomes. An approach to addressing underlying conditions of health at particular times in a person's life, also known as the life course perspective, suggests that the stress resulting from disproportionate exposure to risk factors at key developmental points throughout one's life, and from generation to generation, can accumulate in one's body before conception and increase the risk for negative birth outcomes for the next generation.

The Baby Booster project improves Maternal, Child and Family health outcomes in the Lents neighborhood of east Portland through a concerted focus on the first thousand days of life. The efforts of the Baby Booster work focuses on addressing community articulated priorities (mainly anti-displacement efforts in the 97266 area) to reduce stressful events that cause cumulative health impacts particularly for parenting aged adults and very young children in their first thousand days of life.

The Baby Booster anchor agency convenes multi-agency collaborations in the 97266 zip code to develop a community-driven collective impact initiative with four focus areas as identified by communities in the 97266 zip code and in the Multnomah County Community Health Improvement Plan. The focus areas address housing, food, healthcare and jobs at a systems level as a means to reduce racial and ethnic disparities in Maternal, Child and Family Health outcomes. These efforts are needed in Multnomah County to address the underlying conditions which can impact health and health outcomes.

FY20 will continue support for the partnership, expand the housing preference to other ROSE Community Development properties and to future Rose CDC development projects, and resource development to sustain the Best Baby Zone in the 97266 zip code of southeast Portland.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Increase the number of active coalition leadership and partners				10
Outcome	Provide access to new affordable housing through expanding housing preference				40 families

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$55,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$55,500</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$55,500</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:



**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40054, 40055, 40058, 40097  
**Program Characteristics:**

**Executive Summary**

Healthy Families of Multnomah County (HFMC) is a nationally accredited, evidence-based program that is part of the state-wide Healthy Families of Oregon (HFO) network. HFMC provides early childhood risk screening and home visiting for children and families at-risk of poor early childhood outcomes. The program works to reduce child abuse and neglect, improve school readiness, and promote healthy growth and development for young children up to age three. HFMC will screen approximately 1,000 families for eligibility, enrolling approximately 550 families in home visiting services.

**Program Summary**

Research shows the conditions of early life have a profound effect on long-term health and stability. HFMC serves families from the prenatal period or birth of a new child until the child turns three. Families who qualify for services are offered voluntary home visits shown to reduce child abuse and neglect, improve parent-child attachment, reduce parent stressors, and support parents' ability to ensure children meet developmental milestones, all of which are critical to improved school readiness by age five. The program supports racial equity approaches by prioritizing screening families of color and low income communities and directing these families to programs prepared to address their specific needs. Long-term benefits to the County include reduced racial inequities and increased numbers of healthy children who enter kindergarten ready to learn, a healthier workforce and decreased costs to County systems by preventing future child welfare involvement, school absenteeism, juvenile crime and chronic disease.

HFMC has two components: 1) Welcome Baby screens families for service eligibility and refers families who may be experiencing risk indicators for parent stress. 2) HFMC home visiting delivers the accredited, evidence-based Healthy Families America model, delivered by highly trained staff at community-based agencies. Home visiting teams have a culturally-specific focus, including African American, immigrant/refugee, Latino families, teen parents, and parents with significant substance abuse or trauma history.

The HFMC program also maximizes a number of partnerships and is guided by a Maternal Child and Family Health Advisory Council. Example partnerships include the Healthy Birth Initiatives to improve services for African American families; We Are Home, a collaboration with the Oregon Community Health Worker Association to support immigrant refugee families through community-driven, culturally-specific approaches to maternal child family health services; and Early Learning Multnomah (ELM), a collaboration of over 50 early learning programs; and Health Share of Oregon to develop and pilot a tri-county early childhood resource referral and service database to close service gaps for at risk families. HFMC home visitors leverage Medicaid Administrative Claiming funds to provide culturally-specific, African American Mental Health Consultation and other program supports that improve service delivery and family engagement and retention in services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of families served	539	575	635	635
Outcome	% of participating parents who report reading to/with a child at least 3x/week	93%	94%	93%	93%
Quality	% of families remaining in intensive services for 12 months or longer	84%	66%	75%	75%
Outcome	% of families served who fit Early Learning Multnomah (ELM) priority populations (People of Color/low income)	90%	90%	95%	95%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Healthy Families of Multnomah County must comply with Healthy Families of Oregon policies and procedures, which are based on Healthy Families America (HFA) credentialing standards and contract obligations. Failure to comply may result in disaffiliation with HFA and withholding of funding from the State.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$20,536	\$616,561	\$11,507	\$679,330
Contractual Services	\$214,564	\$1,574,975	\$365,317	\$1,524,222
Materials & Supplies	\$25,715	\$0	\$40,483	\$0
Internal Services	\$111,927	\$77,749	\$112,227	\$78,734
<b>Total GF/non-GF</b>	<b>\$372,742</b>	<b>\$2,269,285</b>	<b>\$529,534</b>	<b>\$2,282,286</b>
<b>Program Total:</b>	<b>\$2,642,027</b>		<b>\$2,811,820</b>	
<b>Program FTE</b>	0.21	5.65	0.11	5.76

Program Revenues				
Intergovernmental	\$0	\$2,237,285	\$0	\$2,237,286
Other / Miscellaneous	\$0	\$32,000	\$0	\$45,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,269,285</b>	<b>\$0</b>	<b>\$2,282,286</b>

## Explanation of Revenues

Healthy Families of Multnomah County is funded by the State Healthy Families grant which requires a County match of 25%, of which 5% must be cash match.

Healthy Families home visitors, through the completion of regular staff time studies, leverage Medicaid Administrative Claiming (MAC) program reimbursements, generally equal to about 5% of the State Healthy Families grant.

Healthy Families Grant: \$ 2,037,285  
 State Healthy Start MAC: \$ 200,000  
 HSO: Help Me Grow Grant: \$ 45,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 40056-19 Healthy Families

**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40054, 40055, 40056, 40097  
**Program Characteristics:**

### Executive Summary

Each year, the Healthy Birth Initiative (HBI) program improves birth outcomes and the health of new families, mothers, and fathers in the African American community, helping children get a healthy start in life. For over 15 years, HBI has improved birth outcomes in the African American community using a culturally-specific model that addresses the underlying causes of health inequities. HBI participants have demonstrated lower rates of infant mortality and low birth weight and higher rates of early prenatal care compared to African Americans not enrolled in the program.

### Program Summary

Research shows the conditions of early life have a profound impact on long-term health and stability. The African American community experiences the most severe inequities across the spectrum of perinatal health, including a rate of low birth weight at twice that of White non-Hispanics. African American babies in Multnomah County are born too soon, too small, and die too early. These are some of the worst health outcome disparities in the county and, therefore, the Health Department recognizes the work of HBI as part of its core public health mission. HBI uses a family-centered approach that engages mothers, fathers, and other caretakers in supporting a child's development. Components of HBI include case management, health education, community engagement, service coordination, and collective impact.

HBI nurses utilize the Nurse Family Partnerships model as a key component of home visiting services. Other evidence-based models, in addition to Nurse Family Partnerships, include Centering Pregnancy; Smoking Cessation and Reduction in Pregnancy Treatment (SCRIPT); Parents as Teachers (PAT); Partners in Parenting Education (PIPE); 24/7 Dads, among others. HBI care coordination is promoted between internal Health Department programs, external health and social service providers, and larger health systems.

HBI works with its Community Action Network (CAN) to achieve collective impact on topics such as breastfeeding, family planning, and male/father involvement. The CAN is led by parents and comprised of a number of healthcare, social-service, and culturally specific agencies working together to implement community-identified strategies.

Long-term benefits of the program include healthy children ready to learn; a healthier work force; decreased costs related to school failure, juvenile crime, and chronic disease; strengthened partnerships; and gains in equity for the county's African American community.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of families served	164	250	250	450
Outcome	Percent of mothers initiating breastfeeding after delivery	83%	95%	95%	95%
Quality	Percent of participants who remain in program until child is two years old	80%	80%	80%	80%
Quality	Percent of participants who express satisfaction with cultural specificity of program	82%	95%	95%	95%

### Performance Measures Descriptions

FY 20 Offer of families served has increased due to new grant cycle with increased service level requirements supported by the grant and County general fund.

## Legal / Contractual Obligation

Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$659,694	\$818,191	\$896,248	\$1,061,484
Contractual Services	\$97,000	\$75,375	\$367,642	\$179,182
Materials & Supplies	\$71,213	\$25,744	\$24,883	\$57,047
Internal Services	\$96,010	\$279,610	\$263,890	\$123,027
<b>Total GF/non-GF</b>	<b>\$923,917</b>	<b>\$1,198,920</b>	<b>\$1,552,663</b>	<b>\$1,420,740</b>
<b>Program Total:</b>	<b>\$2,122,837</b>		<b>\$2,973,403</b>	
<b>Program FTE</b>	6.00	6.80	6.00	9.80

Program Revenues				
Intergovernmental	\$0	\$750,000	\$0	\$892,500
Service Charges	\$0	\$448,920	\$0	\$528,240
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,198,920</b>	<b>\$0</b>	<b>\$1,420,740</b>

## Explanation of Revenues

Healthy Birth Initiative is funded by: Medicaid Targeted Case Management (TCM) Medicaid Maternity Case Management and a Health Resources and Services Administration grant.

Health Resources Services Administration grant: \$ 892,500

Targeted Case Management: \$ 408,960

Medicaid Fee For Services: \$ 119,280

## Significant Program Changes

**Last Year this program was:** FY 2019: 40058-19 Healthy Birth Initiative

In FY20, HBI will have increases in County General Fund and Grant revenue, resulting in increased FTE and service capacity.

**Department:** Health Department      **Program Contact:** Michael Seale  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40049, 40050-40051  
**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Detention Center, Inverness Jail and Juvenile Detention Home collectively house over 1,000 adults and 80 juveniles. Over 36,000 adult individuals are cared for each year with approximately 30% having mental health and behavioral issues. Over 3,500+ juvenile individuals are cared for each year from Multnomah, Washington and Clackamas counties-- brought in from the community, other jurisdictions and other community holding facilities. Over 40% of those juveniles have significant mental health conditions.

**Program Summary**

Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the facilities through booking until release or transfer to another jail, prison or USM service, trained and skilled Corrections Health personnel provide effective screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and are equivalent to other correctional facilities across the country.

This offer represents the mental health services to adults in the MCDC and MCIJ facilities and juveniles in the JDH facility. At MCDC, approximately 400 detainees are housed in classification (new jail housing), female, male, close custody and mental health housing modules. Ninety-six rooms are designated for those with mental health diagnosis and cared for by a team of mental health nurses, consultants and providers for diagnosis and treatment. Early identification, evaluation and treatment provide safety for clients, especially for suicide prevention. At MCIJ, approximately 600 men, women, inmate workers for inside and outside work crews, sentenced individuals and those awaiting trial are housed. A 10 bed medical unit provides skilled nursing and protective isolation in house, and utilization of the unit prevents a stay in a hospital at a much greater cost. Mental health services are also provided to inmates at MCIJ, both individually and in groups. Inmates are typically more stable in this jail which allows for mental health groups to occur several times per week. In addition to groups, individual sessions and medication management occur. JDH health professionals work 16 hours/day, seven days a week providing care for 80 youth daily in 7 individual housing units from three counties. Care ranges from minor ailments to major chronic and emotional diseases resulting from substance abuse, trauma, lack of health care, lack of knowledge of hygiene and self care, frequent infections and a high rate of medical and mental illness.

In addition to the services provided by mental health professions, mental health and behavioral issues are screened for and addressed by nursing and other staff in a variety of circumstances: intake/reception screening, 14-Day Health Assessment, response to medical request forms, management in observation units and at release. This health care is delivered effectively through providing the right care in the right setting.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Avg number of mental health evaluations for suicide watch per month.	222	200	235	240
Outcome	Avg of total number of active and constant suicide watches per month to prevent inmate injury or death	120	90	130	130
Output	Avg number of evaluations performed by Mental Health Consultants for all Corrections Health sites per month	860	900	785	825
Outcome	% of detained youth receiving mental health medications monthly	44%	40%	45%	45%

**Performance Measures Descriptions**

Measure 1: Tracking MHC evaluations help to assess client access to care and resource utilization; Measure 2: Tracking both "ACTIVE" and "CONSTANT" suicide watches, capture management of detainees felt to be at risk, better-reflecting resource needs; Outcome Measure: Tracking percentage of youth receiving psychotropic medications allows for monitoring of needs at the JDH facility.

## Legal / Contractual Obligation

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$3,192,760	\$0	\$3,431,645	\$0
Contractual Services	\$40,000	\$0	\$40,000	\$0
Materials & Supplies	\$19,724	\$0	\$22,858	\$0
Internal Services	\$307,010	\$0	\$303,496	\$0
<b>Total GF/non-GF</b>	<b>\$3,559,494</b>	<b>\$0</b>	<b>\$3,797,999</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,559,494</b>		<b>\$3,797,999</b>	
<b>Program FTE</b>	21.80	0.00	23.40	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. A co-pay system is in place that charges the inmate accounts nominal fees only for detainee-requested medical and dental provider evaluations. No fees are charged for mental health requests or mental health provider evaluations. Provider-ordered treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40059-19 Corrections Health Mental Health Services

**Department:** Health Department      **Program Contact:** Tameka Brazile  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40006, 40025, 40060, 40037  
**Program Characteristics:**

### Executive Summary

Chronic disease and violence prevention (CDVP) programming is essential to a modernized public health system as it implements population level strategies to address the leading preventable causes of early death and disability. These programs respond to documented health inequities by working in neighborhoods with the highest rates of disease and crime. Strategies include community-informed planning and decision-making; training and technical assistance; community health worker initiatives; communications; and initiatives that improve policies, systems, and environments.

### Program Summary

Research shows an individual's zip code is a main determinant of health and wellbeing. Locally, geographic areas with socioeconomic disparities (higher poverty, lower educational attainment, and neighborhoods subjected to disinvestment and/or gentrification) also have significant health disparities, including for chronic diseases and exposure to violence and trauma. In fact, researchers recognize violence (the experience with and/or fear of) as a risk factor for a range of physical health issues, including chronic diseases. CDVP programs engage and work alongside community partners to prevent and improve these health and social inequities by nurturing neighborhoods to support healthy and safe gathering spaces, worksites, schools, health care, and physical environments. Strategies support the work of other Public Health Division prevention programs by addressing the leading causes of death and disability through a health equity framework that reaches neighborhoods and communities most impacted by disparities.

Chronic diseases prevention (CDP) work compliments and augments strategies implemented in the Office of the Director, REACH, Community Powered Change/CHIP, and Tobacco Control and Prevention. CDP provides capacity and flexibility to fill critical gaps in prevention efforts that State and Federal funding are not able to support. Activities are focused on increasing access to healthy eating, active living, and smoke/nicotine-free environments by advancing community/neighborhood policy and systems changes; reaching youth/adolescents in a variety of school and recreation settings; and addressing factors that create socioeconomic disparities, particularly poverty and educational attainment.

Violence prevention work is led by STRYVE (Striving to Reduce Youth Violence Everywhere), which employs a public health approach to violence prevention grounded in equity, healing, and resilience. STRYVE prevents youth violence through community health workers who are reflective of the population and work in partnership with youth and adults to address community trauma, increase resilience, youth empowerment and leadership, and build system capacity. Activities include improving neighborhood livability through community-led projects; providing summer employment programs for youth; and maintaining relationships with national experts to guide local systems with emerging best practices. Violence prevention programming coordinates with chronic disease prevention work at neighborhood and systems levels by building and adapting a cohesive, unified set of strategies to address overlapping root causes of inequities.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth and community members engaged in prevention activities	3,200	3,700	3,200	3,500
Outcome	Number of policies & practices established to prevent and reduce rates of chronic disease and violence	11	15	13	20
Outcome	# of community sites involved in prevention activities	27	29	33	35

### Performance Measures Descriptions

1) DCI activities conclude in FY19 resulting in reduction in engagement. Measure was changed to included violence and chronic disease prevention. 2) Includes PSE improvement and communications activities that address violence, chronic disease, and social determinants of health. 3) Includes settings implementing communications and PSE improvement activities that address violence, chronic disease, and social determinants of health.



Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,062,436	\$379,184	\$934,838	\$259,334
Contractual Services	\$729,197	\$121,354	\$90,856	\$45,883
Materials & Supplies	\$139,327	\$33,232	\$60,619	\$28,579
Internal Services	\$185,230	\$76,052	\$133,869	\$78,491
<b>Total GF/non-GF</b>	<b>\$2,116,190</b>	<b>\$609,822</b>	<b>\$1,220,182</b>	<b>\$412,287</b>
<b>Program Total:</b>	<b>\$2,726,012</b>		<b>\$1,632,469</b>	
<b>Program FTE</b>	9.35	3.60	7.95	2.25

Program Revenues				
Intergovernmental	\$0	\$609,822	\$0	\$412,287
<b>Total Revenue</b>	<b>\$0</b>	<b>\$609,822</b>	<b>\$0</b>	<b>\$412,287</b>

Explanation of Revenues

This Program Offer includes federal funding from the Centers for Disease Control and Prevention (CDC) Preventing Teen Dating Violence and Youth Violence by Addressing Shared Risk and Protective Factors (\$412,287)

Significant Program Changes

**Last Year this program was:** FY 2019: 40060-19 Chronic Disease and Violence Prevention

In F19, this program offer included DCI: Safe and Thriving Communities. The Federal grant ended in FY19 and the DCI program was consolidated into STRYVE.



**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40010B  
**Program Characteristics:**

### Executive Summary

Access to sterile injection equipment is proven to reduce transmission of hepatitis C, HIV/AIDS, and bacterial infections. The national opioid epidemic, coupled with rising methamphetamine use, has led to continued growth of injection drug use and, in turn, the need for syringe exchange and other harm reduction services. The Harm Reduction program provides syringe exchange, naloxone distribution, and resources that work to increase readiness and linkages to engage clients in addictions treatment services.

### Program Summary

The harm reduction program works with people who may not be ready to stop substance use, offering strategies to reduce risks and negative outcomes for people who inject drugs (PWID) and those around them. While syringes are legal for purchase in Oregon, 70% of program clients report homelessness/unstable housing and rely on low barrier access to services and supplies offered through Harm Reduction programming. Services incorporate trauma-informed risk reduction counseling and referrals based on readiness for change. Strategies include promoting one-time use of new, sterile syringes and other supplies, which are crucial to prevent hepatitis C, HIV, and hepatitis B transmission.

The Harm Reduction program offers access to services at the field-based and clinical site. These access points mitigate barriers faced by PWID, such as the stigma associated with drug use and housing status, through an approach focused on building trusting relationships. Sites offer syringe exchange and addictions education and resources, including access to an addictions benefit coordinator. The clinical site also provides low barrier wound/abscess care, and sexual health services for people not typically engaged in health care. Currently, the Oregon Health Plan is expanding hepatitis C treatment access to PWID, among others. The program will optimize this opportunity to engage clients in HCV/HIV testing and linkage to treatment.

Opioid overdose prevention and naloxone distribution (a medication that reverses overdoses) help clients, first responders, and other community members recognize and respond to an overdose. While prescription drug overdose (OD) deaths recently declined in Oregon, statewide data shows an increase in OD death due to illicit drugs. Multnomah County has the highest OD death rates in Oregon, but opioid OD has declined each year since the advent of naloxone distribution, a reduction not seen nationally or in local counties with limited naloxone access. Harm Reduction clients reported 913 OD reversals in FY18, an increase of 22.7%. To support overdoses prevention efforts, staff provide regional and statewide technical assistance and capacity building training, allowing local community-based organizations to buy naloxone through the program. Staff also work with partners to coordinate system-level strategies.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of syringe exchange client encounters	48,458	50,000	47,541	50,545
Outcome	Number of overdose rescues reported	913	750	970	939
Output	Number of syringes collected	6,057,763	NA	7,281,362	7,300,000
Output	Number of naloxone doses distributed	6,680	NA	7,228	7,228

### Performance Measures Descriptions

1) Visits to MCHD and Outside In. 2) Overdose rescues reported to MCHD and Outside In. 3) Includes MCHD and Outside In. 4) Clients from MCHD and Outside In.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$687,732	\$222,817	\$440,903	\$406,947
Contractual Services	\$357,417	\$114,320	\$278,838	\$96,000
Materials & Supplies	\$442,738	\$39,651	\$528,625	\$111,975
Internal Services	\$250,265	\$28,098	\$228,986	\$46,499
<b>Total GF/non-GF</b>	<b>\$1,738,152</b>	<b>\$404,886</b>	<b>\$1,477,352</b>	<b>\$661,421</b>
<b>Program Total:</b>	<b>\$2,143,038</b>		<b>\$2,138,773</b>	
<b>Program FTE</b>	6.45	2.32	4.24	3.43

Program Revenues				
Intergovernmental	\$0	\$360,360	\$0	\$646,421
Other / Miscellaneous	\$0	\$44,526	\$0	\$0
Service Charges	\$0	\$0	\$0	\$15,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$404,886</b>	<b>\$0</b>	<b>\$661,421</b>

Explanation of Revenues

- \$ 463,421 - HIV Prevention Block Grant
- \$ 15,000 - Medicaid CareOR FFS
- \$ 66,000 - Public Health Substance Abuse and Mental Health Services Administration
- \$ 117,000 - SAMHSA Opioid Use Disorder

Significant Program Changes

Last Year this program was: FY 2019: 40061A-19 Harm Reduction

**Department:** Health Department      **Program Contact:** Ebony Clarke  
**Program Offer Type:** Administration      **Program Offer Stage:** As Adopted  
**Related Programs:** 40067, 40068, 40065B  
**Program Characteristics:**

**Executive Summary**

Multnomah County's Mental Health and Addiction Services Division (MHASD) administration manages a recovery-focused, comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in children and adults. Through culturally responsive and evidence-based practices, MHASD serves low-income, uninsured, and individuals who are homeless, as well as any of the 800,000 county residents experiencing a behavioral health crisis. MHASD provides a continuum of services directly and through a provider network. These programs serve approximately 50,000 annually.

**Program Summary**

The Board of County Commissioners is the Local Mental Health Authority. Through that authority, MHASD Administration provides oversight and management of all publicly-funded behavioral health programs in the system of care, whether provided directly or through contracted agencies. MHASD is organized into three units: 1) Multnomah Mental Health, the county's managed care organization, a federally funded insurance program for children, youth and adults enrolled in Oregon Health Plan. Multnomah Mental Health is a founding member of the coordinated care organization Health Share of Oregon. 2) The Community Mental Health Program (CMHP) provides safety net and basic services that include involuntary commitment, crisis services, and addiction treatment. 3) Direct Clinical Services (DCS) which encompasses all programs for children, youth, and families where services are delivered by MHASD staff. These services may be reimbursed by Multnomah Mental Health, by the state, or by another funding source.

MHASD administration continuously assesses its continuum of services to respond to the changing needs and demographics of Multnomah County. All changes are shaped by the input of consumers, advocates, providers and stakeholders. MHASD ensures the system and services provided are consumer-driven by prioritizing consumer voice through the Office of Consumer Engagement's work, frequent provider feedback, adult system and child system advisory meetings, focus groups and ad hoc meetings.

MHASD administration is also responsible for ensuring contracted providers deliver evidence-based and culturally responsive services to consumers. The Division monitors contracts with providers for regulatory and clinical compliance. To ensure good stewardship, MHASD business and clinical decisions ensure that finite resources are targeted to serve the most vulnerable populations. MHASD management participates in planning at the state level to influence the policy decisions that affect the community we serve. MHASD values our community partners, with whom we work collaboratively to create a system of care responsive to the needs of our community.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Total Adult/Child MHASD Advisory Meetings <sup>1</sup>	26	26	26	26
Outcome	Advisors agree with the statement, "Overall, MHASD does its job well"	n/a	n/a	77%	77%

**Performance Measures Descriptions**

<sup>1</sup>Includes AMHSAAC, Wraparound CPC, & Wraparound Exec Committee meetings.

## Legal / Contractual Obligation

Oregon Administrative Rule, Standards for Management of Community Mental Health and Developmental Disability Programs, 309-014-0020, 309-014-0035, 309-14-0040.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$518,044	\$669,498	\$728,525	\$716,488
Contractual Services	\$4,000	\$301,563	\$0	\$752,048
Materials & Supplies	\$10,540	\$74,786	\$11,056	\$75,210
Internal Services	\$5,223	\$197,589	\$131,211	\$148,762
<b>Total GF/non-GF</b>	<b>\$537,807</b>	<b>\$1,243,436</b>	<b>\$870,792</b>	<b>\$1,692,508</b>
<b>Program Total:</b>	<b>\$1,781,243</b>		<b>\$2,563,300</b>	
<b>Program FTE</b>	4.65	3.83	5.65	3.83

Program Revenues				
Intergovernmental	\$0	\$1,243,436	\$0	\$1,192,508
Beginning Working Capital	\$0	\$0	\$0	\$500,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,243,436</b>	<b>\$0</b>	<b>\$1,692,508</b>

## Explanation of Revenues

\$ 829,160 - Behavioral Health Managed Care fund

\$ 363,347 - State Mental Health Grant Local Admin

\$ 500,000 - Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 40065-19 Mental Health & Addiction Services Administration

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40065A  
**Program Characteristics:**

**Executive Summary**

MHASD supports a recovery oriented system of care which endorses the belief that all consumers experiencing mental health and substance use conditions can and do recover. The important voice of consumers, with lived experience brings a valuable and necessary perspective to ensure community services are recovery oriented and trauma informed. In order to support the expansion, coordination and quality of peer services in Multnomah County, we seek to employ a leadership level position in the Office of Consumer Engagement within MHASD.

**Program Summary**

The MHASD Office of Consumer Engagement (OCE) is a team of peer staff who advise division leadership and function as a team of liaisons to community providers and system partners to ensure consumer voice is infused at critical junctures of project and program development. The recommendation to establish a County leadership level position was made through the Fall 2018 Mental Health Systems Analysis Report. This position will supervise two existing Coordinator positions, and lead efforts to improve engagement and coordination of care for the most vulnerable residents in Multnomah County living with mental illness and addiction.

In conjunction with the OCE Coordinators, this position will work with the division, department, and community to lead, support, and advise on peer efforts across the County. This supervisor will oversee the peer team's work with contracted providers and system partners to increase awareness about the value of including peers in all aspects of our community system of care. This position will work with MHASD leadership to improve strategies for outreach to diverse communities, and engagement and coordination of recovery services to a population of consumers frequently engaged with multiple systems in our community. Additionally, this position will work with their team and staff involved in workforce equity efforts at the County to develop workforce strategies to hire and retain peers in our County, and develop community training to increase awareness around peer support.

By establishing a county-level leadership position, we are able to demonstrate our value of ensuring those most impacted by decisions we are making about programs and care are at the table as decision makers. This position will also help MHASD lead and align efforts around peer support services with best and promising practices, and bring more capacity for collaboration coordination with advocacy groups and system partners.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Meet w/ MHASD staff to gather information about ways peer voice can be incorporated into program planning.	n/a	n/a	n/a	50%
Outcome	Make key recommendations to MHASD leadership on a strategy to infuse consumer voices into program supervis	n/a	n/a	n/a	4

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$105,839	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$105,839</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$105,839</b>	
Program FTE	0.00	0.00	1.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

This program offer will fund a leadership position for the Office of Consumer Engagement.

**Department:** Health Department      **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Support      **Program Offer Stage:** As Adopted  
**Related Programs:** 40065, 40068  
**Program Characteristics:**

**Executive Summary**

The Medical Records Program is responsible for the internal management of all of the Mental Health and Addiction Services Division's (MHASD) clinical records and Multnomah Mental Health records required by Oregon Administrative Rules. In support of MHASD programs, Medical Records indexed close to 40,000 documents into the electronic health record (EHR) in the last fiscal year.

**Program Summary**

MHASD Medical Records Unit ensures that mental health, alcohol and drug, and Multnomah Mental Health managed care records are maintained in compliance with federal and state laws and regulations, and county and departmental rules, policies and procedures.

Program staff provide multiple record services including: document indexing; quality assurance; billing and administrative rule compliance auditing; data entry for reporting; utilization review support; archiving and retrieval; forms design and management; authorization/release of information; direct messaging support; legal requests for records; notary services; and health information management expertise to county staff.

As the Local Mental Health Authority, MHASD is responsible for programs such as involuntary commitment, commitment monitoring, trial visit and residential services which require maintenance of individual records. The MHASD programs where services are provided by county staff are expected to serve more than 27,000 individuals, each requiring a medical record.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Count of record items processed annually plus scanned document count <sup>1</sup>	120,384	111,966	106,914	115,786
Outcome	Percent of representative sample audited for compliance with Medicaid billing rules <sup>2</sup>	100%	100%	100%	100%

**Performance Measures Descriptions**

<sup>1</sup> Records experienced a 50% attrition rate between April and June of 2018. Vacancies, recruitment issues, and multiple FMLA approved absences have impacted the output and projections for FY19. Temporary employees and summer interns will be utilized to address the existing backlog.

<sup>2</sup> Health Information Techs audit representative sample sizes of all records each month to evaluate presence of required documentation for Medicaid Billing. Percent lower than 100% means inadequate compliance with MHASD audit plans.

## Legal / Contractual Obligation

The following guidelines are utilized in monitoring MHASD compliance to federal, state and county rules and audits regarding client confidentiality and release of clinical records, record retention, responding to subpoenas and court orders for confidential client records and standards for clinical documentation: HIPAA, DSM V "Diagnostics & Statistical Manual of Mental Disorders", Children's & Adult's State of Oregon Administrative Rules, Oregon Revised Statutes related to medical records & client confidentiality, State Archiving rules, CFR 42 Public Health, Chapter 1 Part 2, Public Law 94-142, Public Law 99-57, State of Oregon Mandatory Child Abuse Reporting Laws, Oregon Health Plan, Mental Health Organization Contract, Multnomah Mental Health HSO Policies & Procedures, Practice Guidelines of the American Health Information Management Association, and Centers for Medicare and Medicaid billing regulations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$174,918	\$571,682	\$226,328	\$551,280
Contractual Services	\$0	\$33,923	\$0	\$0
Materials & Supplies	\$66	\$7,832	\$0	\$25,149
Internal Services	\$3,801	\$181,933	\$0	\$177,257
<b>Total GF/non-GF</b>	<b>\$178,785</b>	<b>\$795,370</b>	<b>\$226,328</b>	<b>\$753,686</b>
<b>Program Total:</b>	<b>\$974,155</b>		<b>\$980,014</b>	
<b>Program FTE</b>	1.96	6.34	2.46	5.84

Program Revenues				
Intergovernmental	\$0	\$795,370	\$0	\$753,686
<b>Total Revenue</b>	<b>\$0</b>	<b>\$795,370</b>	<b>\$0</b>	<b>\$753,686</b>

## Explanation of Revenues

\$ 612,748 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates

\$ 140,938 - State Mental Health Grant: LA 01 System Management and Coordination

## Significant Program Changes

**Last Year this program was:** FY 2019: 40068-19 Mental Health Quality Management & Protective Services



**Department:** Health Department                                 **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Support   **Program Offer Stage:** As Adopted  
**Related Programs:** 40065, 40067  
**Program Characteristics:**

**Executive Summary**

Quality Management (QM) assures quality of MHASD and contracted providers by: agency audits, investigations, and monitoring mental health contract performance. MHASD serves approximately 135,000 Multnomah Mental Health Oregon Health Plan (OHP) members, 52 mental health agencies and 72 residential/foster facilities. QM offer also includes the Decision Support Unit which is responsible for oversight and maintenance of the central Electronic Health Record system, and reporting for the Division Multnomah Mental Health Plan billing support.

**Program Summary**

Quality Management protects and supports mentally ill adults and children in Multnomah County by providing specific services including: coordinating compliance with Health Insurance Portability and Accountability Act (HIPAA) rules and Multnomah Mental Health contracts; measuring client outcomes; conducting Medicaid compliance audits for community mental health agencies; assuring compliance with grievance procedures; auditing and providing technical support to 52 mental health agencies; coordinating residential quality and tracking approximately 13,000 reportable residential adverse events annually; facilitating Critical Incident Reviews for high risk incidents; assisting the State with licensing visits and Oregon Administrative Rules (OARs) compliance for residential treatment homes and facilities; investigating complaints about residential care; and monitoring progress of providers found to be out of compliance with OARs.

Additionally, QM includes the Decision Support Unit which is responsible for oversight/administration of the MHASD central Electronic Health Record (EHR) system, Multnomah Mental Health Plan Billing Support and reporting for the Division.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of clinical reviews and incident reports reviewed <sup>1</sup>	14,812	22,637	14,800	13,800
Outcome	Percent of protective service reports investigated <sup>2</sup>	9%	35%	19%	N/A
Output	Number of requests managed by Decision Support <sup>3</sup>	12,877	13,000	12,800	12,800
Outcome	Percent of incident reports reviewed that resulted in a Critical Incident Review meeting with the program <sup>1</sup>	N/A	N/A	N/A	2%

**Performance Measures Descriptions**

<sup>1</sup> Decrease in contacts due mainly to a significant decrease in incident reports processed. APS Incidents removed for next year offer. Added outcome for next year to measure the percent of incident reports that require a formal critical incident review meeting with the residential program. If the incidents being reviewed are tracked and responded to in a timely manner there should be a low percentage of CIRs needed.

<sup>2</sup>Next year offer N/A because program moved to CMHP

## Legal / Contractual Obligation

1) Each provider of community mental health and developmental disability service must implement and maintain a QA program. Elements of the QA program include maintaining policies and procedures, grievance management, fraud and abuse monitoring, performance measurement, and contract management.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$570,143	\$3,395,912	\$564,653	\$3,615,318
Contractual Services	\$0	\$3,091,435	\$0	\$998,348
Materials & Supplies	\$292	\$297,658	\$946	\$325,938
Internal Services	\$84,549	\$815,613	\$37,487	\$910,960
<b>Total GF/non-GF</b>	<b>\$654,984</b>	<b>\$7,600,618</b>	<b>\$603,086</b>	<b>\$5,850,564</b>
<b>Program Total:</b>	<b>\$8,255,602</b>		<b>\$6,453,650</b>	
<b>Program FTE</b>	4.49	28.11	4.35	27.35

Program Revenues				
Intergovernmental	\$0	\$7,600,618	\$0	\$5,730,564
Beginning Working Capital	\$0	\$0	\$0	\$120,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,600,618</b>	<b>\$0</b>	<b>\$5,850,564</b>

## Explanation of Revenues

- \$ 4,867,552 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates
- \$ 732,012 - State Mental Health Grant: LA 01 System Management and Coordination
- \$ 131,000 - Clackamas County Intergovernmental Agreement
- \$ 120,000 - Beginning Working Capital

## Significant Program Changes

**Last Year this program was:** FY 2019: 40068-19 Mental Health Quality Management & Protective Services

APS was removed from Quality Management and added to CMHP in August 2018.

**Department:** Health Department **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Mental Health and Addiction Services Division operates a 24-hour, 365-day-a-year behavioral health crisis response system, including a 24/7 crisis and resource hotline, a 24/7 mobile crisis outreach team and a seven day a week crisis walk-in clinic that serves every member of Multnomah County.

**Program Summary**

The behavioral health crisis system in Multnomah County is comprised of several interconnected services: Multnomah County Call Center – operated by Multnomah County 24/7, 365 days/year. The Call Center is the hub for behavioral health crisis services for all county residents regardless of insurance status. Interpretation services are available in person and on the phone as needed. The Call Center triages and deploys crisis resources, such as mobile outreach and the urgent walk in clinic, provides crisis counseling, manages division program referrals, links callers to behavioral health services and community education on suicide prevention, serves as the after hours hospitalization authorization for Multnomah Health Share (Behavioral Health Plan) members, and authorizations for indigent medications, crisis housing and transportation. The call center also receives warm transfers from the Portland Bureau of Emergency Communications (BOEC/911) for callers that are in behavioral health crisis and do not have an immediate need for law enforcement, fire, or ambulance.

The Call Center has taken over the intake and referral process for Mental Health Crisis and Assessment Treatment Center (CATC) and will take over this function in FY20 for Crisis Respite as well. This will improve access and our clients' ability to move seamlessly through crisis levels of care.

Project Respond – Mobile outreach service provided by clinicians and peers that is contracted with a community based organization and is available 24/7, 365 days/year. Project Respond is deployed by the Call Center or BOEC/911 to provide face-to-face crisis evaluation and triage services as well as hospital diversion to those in crisis regardless of insurance status. In FY18, total number of clients served was 3,449. Hospital Outreach Liaisons- in the Project Respond program assist in diverting 320 individuals in Emergency Departments from Acute care services to appropriate treatment services in the community.

Urgent Walk-In Clinic (UWIC) – Clinic based service contracted with a community-based organization, available from 7:00 a.m. to 10:30 p.m., Monday - Friday, that provides crisis evaluation, triage, and stabilization on a walk-in basis. The UWIC is the only service available to indigent clients in crisis in Multnomah County with immediate access to a psychiatrist or psychiatric mental health nurse practitioner for medication evaluation and treatment. Peer services are also available.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total Crisis System Contacts <sup>1</sup>	89,052	80,000	95,000	95,000
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ED <sup>2</sup>	96%	96%	96%	96%

**Performance Measures Descriptions**

<sup>1</sup> FY18 totals include Crisis Line Incoming Calls: 72,524, Crisis Line Outgoing calls: 7,834, FY18 Project Respond and UWIC: 7,877, ED Liaisons: 320, CATC referrals: 312, Cascadia Respite clients: 185

<sup>2</sup> Percentage of Urgent Walk In contacts that do not need a referral to an Emergency Department for acute services.

## Legal / Contractual Obligation

The Multnomah County Community Mental Health Program is contracted with the state to provide a mental health crisis system that meets the needs of the community.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$958,648	\$2,108,972	\$324,920	\$3,028,495
Contractual Services	\$1,335,876	\$7,686,679	\$1,348,127	\$7,293,502
Materials & Supplies	\$1,691	\$18,944	\$1,714	\$5,917
Internal Services	\$110,660	\$400,439	\$91,112	\$536,948
<b>Total GF/non-GF</b>	<b>\$2,406,875</b>	<b>\$10,215,034</b>	<b>\$1,765,873</b>	<b>\$10,864,862</b>
<b>Program Total:</b>	<b>\$12,621,909</b>		<b>\$12,630,735</b>	
<b>Program FTE</b>	7.44	13.79	2.60	22.81

Program Revenues				
Intergovernmental	\$0	\$10,150,484	\$0	\$10,788,853
Beginning Working Capital	\$0	\$64,550	\$0	\$76,009
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,215,034</b>	<b>\$0</b>	<b>\$10,864,862</b>

## Explanation of Revenues

\$ 6,628,834 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates

\$ 3,320,592 - State Mental Health Grant: MHS 25 Community Crisis Services for Adults and Children

\$ 308,519 - State Mental Health Grant: MHS 37

\$ 530,906 - Washington County Crisis

\$ 76,009 - Beginning Working Capital

## Significant Program Changes

**Last Year this program was:** FY 2019: 40069-19 Behavioral Health Crisis Services

Last year this program was also: 40069B Crisis Service Current Capacity Funding

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Mental Health and Addiction Services Division (MHASD) has identified alternatives to inpatient hospitalization as a missing service in the system of care. The Crisis Assessment and Treatment Center (CATC) offers 16 beds of short-term mental health treatment in a secure locked environment as a lower cost alternative to hospitalization for over 350 clients per year. Facility staffing includes physical and mental health professionals and peer support specialists.

**Program Summary**

Crisis Assessment Treatment Center Subacute is a short-term stabilization program for those individuals who require a secure alternative to incarceration or hospitalization. It is a critical component in a full continuum of mental health services. Although it works with other community agencies that provide long term-care, the mission of the sub-acute facility is brief intervention when a person becomes a danger to themselves or others due to his/her mental illness. The target length of stay is 6 days. Since the individual remains linked to the community, length-of-stay is minimized and the person is less likely to lose critical recovery supports including Medicaid eligibility and housing. Subacute care is less expensive than hospitalization. Incarceration hinders recovery and strains the resources of courts and the jail. As part of a best practice model for facilities of this type, the proposed treatment team includes consumer positions on staff (Peer Support Specialists) to provide mentoring and linkage to services in the community. These positions are salaried members of the treatment team.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Number of admissions that are unique Multnomah Mental Health members	287	306	303	300
Outcome	Number of admissions that are Non-HSO Multnomah Members	44	56	46	45
Output	Number of inpatient days for Non-HSO Multnomah Adults	8,998	10,797	8,823	8,800
Outcome	Percentage of clients admitted that are Non-HSO Multnomah Members:	14.09%	15.5%	14.81%	14.5%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The Multnomah County Community Mental Health Program is contracted with the state to provide a mental health crisis system that meets the needs of the community.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$664,520	\$4,093,869	\$691,101	\$3,045,806
<b>Total GF/non-GF</b>	<b>\$664,520</b>	<b>\$4,093,869</b>	<b>\$691,101</b>	<b>\$3,045,806</b>
<b>Program Total:</b>	<b>\$4,758,389</b>		<b>\$3,736,907</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,093,869	\$0	\$3,045,806
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,093,869</b>	<b>\$0</b>	<b>\$3,045,806</b>

## Explanation of Revenues

\$ 3,045,806 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates

## Significant Program Changes

**Last Year this program was:** FY 2019: 40070-19 Mental Health Crisis Assessment & Treatment Center (CATC)

**Department:** Health Department                      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program                      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

MHASD Adult Protective Services (APS) investigates abuse and neglect for individuals over the age of 18 who are in mental health services and/or reside in a residential facility and who are diagnosed with serious & persistent mental health illness. We also provide protective services to individuals and outreach and coordination services to individuals who are not engaging in services or for those allegations that do not meet our authority to open up a case for investigation.

**Program Summary**

This program reviews and investigates allegations of neglect, abandonment, physical, sexual, verbal and financial abuse both in the community and in residential facilities. This program is responsible for ensuring that adults with mental health concerns are protected from abuse, neglect, and exploitation; that quality preventive and intervention services, and multi-disciplinary teams are implemented according to federal and state laws; and that the program is managed in alignment with County, Department, and Division mission, vision, and values. Finally, this program is responsible for providing our community partners and community members with education and support to better understand reporting requirements via community education presentations.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of protective services/investigations*1	1019	N/A	1030	1030
Outcome	Percent of protective services screening referred to Risk Case Management *2	N/A	N/A	9%	9%
Outcome	Number of community education presentations*3	N/A	N/A	25	25

**Performance Measures Descriptions**

\*1 As number of abuse reports increases and statutory changes increase the number of reports meeting abuse definitions but staffing stays the same, the percent of reports investigated decreases unless additional state funding is available. New offer this year pulled out of Quality Management measure.

\*2 This service is new to the program as of 11/18, therefore previous year data is not available. These clients will be either enrolled or in outreach.

## Legal / Contractual Obligation

The LMHA shall conduct the investigations and make the findings required by ORS 430.735 to 430.765 for allegations of abuse of a person with mental illness being served in a program paid for by Multnomah County.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$203,296	\$253,515	\$717,770	\$271,608
Materials & Supplies	\$929	\$146	\$929	\$146
Internal Services	\$65,020	\$18,596	\$119,708	\$503
<b>Total GF/non-GF</b>	<b>\$269,245</b>	<b>\$272,257</b>	<b>\$838,407</b>	<b>\$272,257</b>
<b>Program Total:</b>	<b>\$541,502</b>		<b>\$1,110,664</b>	
<b>Program FTE</b>	1.60	2.00	5.60	2.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$272,257	\$0	\$272,257
<b>Total Revenue</b>	<b>\$0</b>	<b>\$272,257</b>	<b>\$0</b>	<b>\$272,257</b>

## Explanation of Revenues

\$ 272,257 - State Mental Health Grant: LA 01 System Management and Coordination

## Significant Program Changes

**Last Year this program was:** FY 2019: 40068-19 Mental Health Quality Management & Protective Services

This program moved from MHASD Quality Management to MHASD Community Mental Health Program in fall 2018. Shortly following this transition, the program hired a Program Supervisor, an On Call Investigator, and a Risk Case Manager (Case Manager Senior). Additionally, the program is in process of hiring an additional Investigator/Screeners with a cultural competency KSA to outreach communities that are underrepresented in our reporting data.



**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Commitment Services includes Emergency Psychiatric Holds (E-Holds), Involuntary Commitment Program (ICP), Commitment Monitors, and the State Hospital Waitlist Reduction Program. The county is the payor of last resort for indigent E-Holds and ICP staff are required to investigate to determine whether individuals on a hold present a risk of harm to themselves or others and if a court hearing is recommended. This is a requirement of the county as the Local Mental Health Authority (LMHA).

**Program Summary**

Commitment Services is comprised of several distinct yet interconnected services:

**Involuntary Commitment Program: Pre-Commitment Services.** An emergency psychiatric hold (E-Hold) is filed with the county and keeps an individual in a hospital so a Pre-Commitment Investigator can investigate the individual's mental health status and whether or not they meet criteria for civil commitment. If a person is found to have a mental disorder, and due to that disorder, are a danger to self/others, or are unable to meet their basic needs a hearing report is filed with the circuit court and civil commitment hearing is held. ORS 426.110-120 requires that a court examiner make an independent recommendation to the judge.

**Emergency Hold:** When an individual is appropriately placed on an E-Hold and cannot pay for the hospital stay, ORS 426 requires that the county pays for these services. The county is required to provide commitment monitoring services.

**Commitment Monitors:** Staff in this unit assess committed individuals to determine whether they continue to meet commitment criteria, work with hospital staff to develop treatment & discharge plans, and make recommendations on continued hospitalization. Commitment monitors perform monitoring services during trial visits to the community, facilitate financial & medical entitlements, and ensure that individuals transition into the appropriate level of community care. In FY12, the state began funding the county to pay for uninsured consumers who are committed and monitored in the hospital by MHASD's commitment monitors.

**State Hospital Waitlist Reduction Program (WLRP):** Funding provides for Intensive Case Management (ICM) for patients discharging from the State Hospital and acute care hospitals, and for three Emergency Department Liaisons. ICM and transition planning prevent relapses into hospital care and reduce the County's burden as the payor of last resort. ICM staff provide a connection with resources and assistance in obtaining housing, access to health care, social services, and outpatient mental health services. These services address the needs of mentally ill county residents at the highest level of care. Services provide care & service coordination, ensure adequacy and appropriateness of resources and provide protection of legal and civil rights.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total number of E-Holds <sup>1</sup>	3,091	3,425	3,089	3,000
Outcome	% of investigated E-Holds that did not go to Court hearing <sup>2</sup>	87%	87%	88%	87%
Outcome	% of investigated E-Holds taken to court hearing that resulted in commitment <sup>2</sup>	90%	91%	89%	89%
Output	# of commitments monitored annually <sup>3</sup>	387	380	360	360

**Performance Measures Descriptions**

<sup>1</sup> This measure includes both E-holds for indigent residents as well as residents with insurance.

<sup>2</sup> Outcomes measure staff effectiveness in applying ORS 426 and reducing the burden on the commitment court system by bringing cases to court that definitively meet commitment criteria.

<sup>3</sup> # monitored reflects new & existing commitments of residents in acute care settings & secure placements.

## Legal / Contractual Obligation

The ORS 426 requires that all persons placed on a notice of mental illness be investigated within 24 hours, as well as monitored upon commitment, as a protection of their civil rights. The state delegates the implementation of this statute to the counties.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

The LMHA shall conduct the investigations and make the findings required by ORS 430.735 to 430.765 for allegations of abuse of a person with mental illness being served in a program paid for by Multnomah County.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,018,819	\$2,121,684	\$1,052,843	\$2,269,873
Contractual Services	\$20,700	\$569,722	\$0	\$350,096
Materials & Supplies	\$946	\$39,990	\$1,022	\$40,144
Internal Services	\$234,645	\$236,557	\$214,674	\$329,368
<b>Total GF/non-GF</b>	<b>\$1,275,110</b>	<b>\$2,967,953</b>	<b>\$1,268,539</b>	<b>\$2,989,481</b>
<b>Program Total:</b>	<b>\$4,243,063</b>		<b>\$4,258,020</b>	
<b>Program FTE</b>	8.00	16.10	8.00	16.10

Program Revenues				
Intergovernmental	\$0	\$2,967,953	\$0	\$2,967,953
Beginning Working Capital	\$0	\$0	\$0	\$21,528
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,967,953</b>	<b>\$0</b>	<b>\$2,989,481</b>

## Explanation of Revenues

\$ 2,967,953 - State Mental Health Grant: MHS 24 Acute and Intermediate Psychiatric Inpatient Services based on 2017-2019 IGA with State of Oregon.

\$ 21,528 - Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 40072-19 Mental Health Commitment Services

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer provides an ongoing portion of the funding necessary for a peer-run supported employment program. Additional funding will come from private foundations and in-kind donations. These peer-run employment and education programs typically secure funding from federal, state, and local governments including municipal mental health departments and the national Substance Abuse and Mental Health Services Administration (SAMHSA). Every dollar of county general fund would directly provide employment assistance for a person with a mental illness.

**Program Summary**

This program offer supports the peer-run supported employment center through continued funding of positions and operating costs. The Supported Employment center offers employment, wellness and administrative support to adults with a mental illness who want to become employed. Continued funding through this offer would ensure that staff can continue to meet the training standards required for Certification. Certification requires that the peer-run entity meet a defined standard of service delivery. Peer-run supported employment provides encouragement and assistance for individuals with a mental illness in securing continuing education, employment and volunteer opportunities and advocating for reasonable accommodations.

The World Health Organization in their Health Impact Assessment and the Robert Wood Johnson Foundation have both endorsed increased education and employment as determinants of good health. This program provides the opportunity for those with mental illness to pursue both educational and employment opportunities that can be factors in improved health outcomes for those experiencing mental health issues.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of active members	138	168	148	140
Outcome	Percent of members in paid employment positions	30%	35%	21%	21%
Output	Average daily attendance (ADA)	20	25	22.5	22

**Performance Measures Descriptions**

Performance measures reflect gradual increase in the total number of members enrolled in program.

**Legal / Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$109,940	\$0	\$102,000	\$0
<b>Total GF/non-GF</b>	<b>\$109,940</b>	<b>\$0</b>	<b>\$102,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$109,940</b>		<b>\$102,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

**Explanation of Revenues****Significant Program Changes**

Last Year this program was: FY 2019: 40073-19 Peer-run Supported Employment Center

**Department:** Health Department      **Program Contact:** Ebony Clarke  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

MHASD supports a recovery oriented system of care and promotes the valuable role of peers in the behavioral health workforce. This program offer provides one-time-only funding to build capacity for additional peer-run supported employment services and supports in the community. Peer-run supported employment services play a vital role in the behavioral health continuum of care, and are evidenced to reduce hospitalizations, support access to meaningful employment and/or education, and promote recovery.

**Program Summary**

Peer-run and Peer-supported services continue to be a critical component of the local behavioral health system of care. The Substance Abuse and Mental Health Service Agency (SAMHSA) has documented the significant role that peers play in supporting and sustaining recovery, and Multnomah County is committed to furthering this work.

This has been accomplished through funding peer-run and peer support services, including a community-based supported employment center (Program Offer 40073), which offers employment, wellness and administrative support to adults with a mental illness who want to become employed. However, more resources are needed to develop additional capacity in peer-run supported employment services.

This one-time-only funding will address gaps identified by community partners, the Multnomah County Office of Consumer Engagement, and various other stakeholders. Funding will address the need for additional organizational capacity to support professional development, continuing education, employment, and volunteer opportunities for individuals with a mental illness. Community organizations have also signaled a need for more culturally specific outreach. The Multnomah County Mental Health and Addiction Services Division will use this funding to support community based organizations in their efforts to reduce these gaps.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of active new members from communities of color	N/A	N/A	N/A	30
Outcome	Increased number of participants actively employed/percent of members in paid employment position	N/A	N/A	N/A	35%
Output	Average daily attendance (ADA)	N/A	N/A	N/A	30
Output	Number of new certified peers of color	N/A	N/A	N/A	15

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$100,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program includes Mental Health Residential Services with 501 beds of Housing. Residential treatment programs include: Secure Residential Treatment Facilities (SRTFs), Residential Treatment Homes (RTHs), Adult Foster Care Homes (ACHs) and a range of semi-independent supported housing programs. Transitional Housing serves approximately 136 individuals who require assistance obtaining permanent housing while addressing their mental health needs. Transitional housing provides short-term stable housing to decrease the likelihood that they will need crisis & acute services.

**Program Summary**

Residential Services provide mental health residential treatment to persons who suffer from severe mental illness, and who require structured care, foster care, and mental health rehabilitative services. Primary populations served include those who are state Choice Model-eligible and those who are under the jurisdiction of the Psychiatric Security Review Board. In some instances clients meet neither criteria, but their mental illness prevents them from functioning safely in the community.

The Residential Services Team oversees approximately 78 residential programs in Multnomah County and approximately 501 clients. This includes 6 Secure Residential Treatment Programs, 33 Residential Treatment Homes/Facilities, 30 Adult Care Homes, 2 Crisis/Respite Programs, and 7 Supportive Housing Programs. Residential Services manages the development of new Adult Care Homes that serve clients who qualify for mental health residential services. In 2018, the program developed placements in 12 new Adult Care Homes.

Residential Services staff provides regulatory oversight to licensed residential treatment programs, monitoring and supporting the treatment programs' compliance with OARs. Residential staff also provides monitoring, oversight and technical/clinical consultation to treatment programs in the areas of client health, safety and welfare. This typically occurs in the context of scheduled and unscheduled consultation, problem-solving, participation in client staffings, review of appropriateness of unplanned discharges, and monitoring and enforcement of client rights. As a part of oversight of safety, health and welfare, Residential Services is responsible for review of program incident reports, referral to protective services where appropriate, and for conducting Critical Incident Reviews with providers.

As the a designee of the CMHP, Residential Services is responsible for monitoring and responding to denials to program waitlists and client terminations from residential programs. Appeals to these denials are submitted to the Residential Supervisor for a determination. In its role as the regulatory arm of the state, Residential Services also assists state licensors with licensure inspections and quality audits of programs.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of New Residential Services Referrals <sup>1</sup>	351	360	350	350
Outcome	% of County Residential Services referrals placed <sup>2</sup>	41%	35%	35%	35%

**Performance Measures Descriptions**

<sup>1</sup> This measure indicates the gap between the number of existing residential treatment beds and the number of referrals for placement.

<sup>2</sup> OAR changes have impacted gatekeeping responsibilities of the County resulting in lower County placement percentages for in-county residential programs that are statewide resources.

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

Revenue Contract with City of Portland Bureau of Housing and Community Development.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$565,872	\$788,125	\$607,530	\$795,468
Contractual Services	\$428,920	\$11,625,137	\$99,173	\$11,607,692
Materials & Supplies	\$3,980	\$7,729	\$4,507	\$9,731
Internal Services	\$17,572	\$160,164	\$143,556	\$72,224
<b>Total GF/non-GF</b>	<b>\$1,016,344</b>	<b>\$12,581,155</b>	<b>\$854,766</b>	<b>\$12,485,115</b>
<b>Program Total:</b>	<b>\$13,597,499</b>		<b>\$13,339,881</b>	
<b>Program FTE</b>	5.00	6.68	5.00	6.64

Program Revenues				
Intergovernmental	\$0	\$12,514,649	\$0	\$12,409,106
Beginning Working Capital	\$0	\$66,506	\$0	\$76,009
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,581,155</b>	<b>\$0</b>	<b>\$12,485,115</b>

## Explanation of Revenues

- \$ 220,301 - Healthshare of Oregon (Medicaid): Based on FY19 Medicaid Rates.
- \$ 43,278 - Washington County Older Adult Behavioral Health Coordination
- \$ 43,278 - Clackamas County Older Adult Behavioral Health Coordination
- \$ 12,102,251 - State Mental Health Grant based on 2017-2019 IGA with State of Oregon
- \$ 76,009 - Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 40074A-19 Mental Health Residential Services



**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Adult Mental Health Initiative (AMHI) Renamed by the Oregon Health Authority (OHA) The Choice Model Program as of 7/1/16: diverts individuals from Oregon State Hospital (OSH); coordinates successful discharge from OSH into appropriate community placements and services; coordinates care for individuals residing primarily in licensed residential facilities in order to move individuals into the least restrictive housing possible; and coordinates care and develop supports to maximize independent living; 772 individuals were served in FY18.

**Program Summary**

Mental Health and Addiction Services Division (MHASD) AMHI/Choice Model staff work with other MHASD units, OSH, OHA/Health Systems Division, Coordinated Care Organizations (CCO), and counties to coordinate the placement and movement of individuals primarily within a statewide network of licensed housing providers. New or enhanced services offered by AMHI can include: supported housing development and rental assistance to increase housing options matched to client need; Exceptional Needs Care Coordination (ENCC) to assure access to appropriate housing placements and the development of supports to increase success in the community; referrals to community mental health programs; referrals to Supported Employment to help move clients towards greater independence; and transition planning management to assure the most efficient utilization of the licensed residential housing stock within the community.

The overarching goal of AMHI/Choice Model is assisting individuals to achieve the maximum level of independent functioning possible. This goal is achieved by diverting individuals from admission to OSH; supporting quick, safe and appropriate discharges from OSH into the community; and providing supports (skills training, etc.) to help individuals achieve independent living in the least restrictive housing environment.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of Clients Served in AMHI	722	680	731	700
Outcome	% of clients receiving direct client assistance to meet basic needs (NEW) <sup>1</sup>	18.4%	18%	18%	18%

**Performance Measures Descriptions**

<sup>1</sup> Direct client assistance includes housing assistance, moving fees, guardianship, secure transportation and storage.

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$1,388,400	\$0	\$1,423,691
Contractual Services	\$0	\$2,518,457	\$0	\$2,150,550
Materials & Supplies	\$0	\$5,533	\$0	\$7,094
Internal Services	\$0	\$289,518	\$0	\$322,791
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,201,908</b>	<b>\$0</b>	<b>\$3,904,126</b>
<b>Program Total:</b>	<b>\$4,201,908</b>		<b>\$3,904,126</b>	
<b>Program FTE</b>	0.00	11.66	0.00	11.33

<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,137,358	\$0	\$3,904,126
Beginning Working Capital	\$0	\$64,550	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,201,908</b>	<b>\$0</b>	<b>\$3,904,126</b>

## Explanation of Revenues

\$ 1,090,040 - Healthshare of Oregon (Medicaid): Based on FY19 Medicaid Rates

\$ 2,814,087 - State Mental Health Grant: Adult Mental Health Initiative (AMHI) based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2019: 40075-19 Adult Mental Health Initiative (AMHI)

**Department:** Health Department                      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program                      **Program Offer Stage:** As Adopted  
**Related Programs:** 40094  
**Program Characteristics:**

**Executive Summary**

This program offer describes the existing continuum of adult mental health care funded by Oregon Health Plan and managed by Health Share Multnomah Mental Health. The continuum addresses the needs of adults at emergent, urgent & routine levels of care. Additional respite services provide intervention when an individual's symptoms have risen beyond the scope of outpatient treatment. Outpatient treatment services provide a range of care matched to diagnosis and acuity to approximately 16,000 adults annually.

**Program Summary**

Adult mental health outpatient services provide a comprehensive array of treatment options that address the needs of each individual, including several categories of individual and group therapy, general and intensive case management for individuals with severe mental illness, intensive outreach and medication management. Outpatient services address long and short-term mental health needs to lessen the need for hospitalization. Since expansion of Oregon Health Plan, an average of 6,090 adults receive outpatient services each month, with many remaining in treatment for several months.

Mental health respite services are a community-based approach to stabilize individuals whose symptoms have exceeded the scope of outpatient treatment. The goal is to prevent hospitalization through early intervention with short-term, intensive residential treatment. Respite care contains a range of treatment options, including medication management, clinical treatment and post-discharge transition planning. It has been defined as a best practice when used in a continuum of treatment services.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total adults receiving outpatient mental health and addiction services <sup>1</sup>	22,106	16,000	23,463	23,000
Outcome	Percent of adults readmitted to inpatient within 30 days of discharge <sup>2</sup>	20.4%	17%	20.3%	20%

**Performance Measures Descriptions**

<sup>1</sup> Number of unduplicated Multnomah Mental Health adult enrollees who received an outpatient mental health service or addiction services during the measurement period - note: increase in clients is a result of the addition of Family Care members

<sup>2</sup> Percent of unduplicated Multnomah Mental Health adult enrollees who were readmitted to inpatient hospitalization within 30 days of discharge during the measurement period.

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$14,520,664	\$0	\$11,886,611
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$14,520,664</b>	<b>\$0</b>	<b>\$11,886,611</b>
<b>Program Total:</b>	<b>\$14,520,664</b>		<b>\$11,886,611</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$14,520,664	\$0	\$11,886,611
<b>Total Revenue</b>	<b>\$0</b>	<b>\$14,520,664</b>	<b>\$0</b>	<b>\$11,886,611</b>

## Explanation of Revenues

\$ 11,886,611 - Healthshare of Oregon (Medicaid): Based on FY19 Medicaid Rates

## Significant Program Changes

Last Year this program was: FY 2019: 40076-19 Mental Health Services for Adults

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Multnomah Treatment Fund (MTF) prioritizes community-based services to individuals who experience symptoms of severe mental illness and have been released from jail or psychiatric hospitals and/or are at risk of hospitalization or significant decompensation, but are uninsured and ineligible for Oregon Health Plan (OHP). MTF supports an array of services for the over 500 individuals who experience severe mental illness and are uninsured and without financial resources until insurance or OHP coverage is obtained.

**Program Summary**

The Mental Health and Addiction Services Division (MHASD) provides funds to the network of providers to treat consumers who are uninsured during periods of exacerbated symptoms in acute stages of mental illness.

The goal is to stabilize and prevent more drastic consequences including hospitalization, incarceration, loss of housing, addiction relapse and loss of custody of children. If these services are effective, the client is spared a prolonged period of instability and the county preserves funds that would otherwise be lost to the high-cost alternatives such as hospitalization, corrections or homeless services. Since these funds are limited, a designated adult services coordinator performs chart reviews for clinical necessity, choice of intervention, and financial eligibility. Services can include individual and group therapy, case management, community outreach, housing assistance, medication management, dual diagnosis treatment, care coordination, and crisis intervention. While the person is receiving services, he/she can be linked to other supports and acquire assistance in securing OHP benefits through the DCHS Benefits Recovery Project and health care through the Multnomah County Health Department or other clinics serving indigent clients. The demand on this program had slightly decreased due to Medicaid Expansion, however Medicaid eligibility requirements and limitations on Medicare approved services means there are individuals who require this safety net program to receive on-going mental health case management and treatment services. In addition, there is an unmet need for more Intensive Case Management services for individuals without Medicaid eligibility. Funds have been re-purposed to address this gap.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total # of adults who received county-funded outpatient services or medication	914	872	918	900
Outcome	Percentage of MTF clients that are hospitalized	9.63%	15%	10.35%	10%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$1,364,322	\$0	\$1,268,689	\$135,726
<b>Total GF/non-GF</b>	<b>\$1,364,322</b>	<b>\$0</b>	<b>\$1,268,689</b>	<b>\$135,726</b>
<b>Program Total:</b>	<b>\$1,364,322</b>		<b>\$1,404,415</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$135,726
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$135,726</b>

## Explanation of Revenues

\$ 135,726 - Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 40077-19 Mental Health Treatment & Medication for the Uninsured

**Department:** Health Department      **Program Contact:** Tracy Garell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young persons aged 12-25 who demonstrate initial symptoms of psychosis or are found to be at high risk for developing psychosis, with the goal of developing a long-term recovery plan. EASA offers formal mental health treatment services, educational support, and employment support. The program actively involves the young person's family and other supports in treatment. The program services for approximately 180 referred individuals each year.

**Program Summary**

EASA is an evidence and fidelity based model formed by years of research indicating that early intervention and immediate access to treatment can directly reduce hospitalization rates and the long term disabling consequences of psychosis. The multidisciplinary team approach and program activities and services are designed to meet the standards of the model as required by the State of Oregon. The team includes both a child/adolescent and an adult psychiatrist, mental health consultants, a peer support specialist, employment support specialists, an occupational therapist and a nurse. Treatment is community-based and is comprised of services tailored to meet the unique needs of each client. Clients are paired with a psychiatrist and a mental health consultant based on age and personal preferences and cultural needs. Clients can choose from any of the following services to support their unique goals and needs: medication management, case management, supportive employment, nursing services, peer support, occupational therapy, multi-family groups, individual and/or family psychotherapy, psycho-education, and social skills building groups.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total individuals enrolled in the EASA program receiving ongoing services	110	132	109.5	132
Outcome	% reduction in hospitalization rate three months pre and 6 months post enrollment <sup>1</sup>	95%	85%	83%	85%
Output	Number of unduplicated individuals referred to the EASA program	206	185	212	195

**Performance Measures Descriptions**

<sup>1</sup> This measure compares the hospitalization rate for the three months prior to services with the rate for the 6 months post EASA service enrollment which is an indication of the stabilization of the individual.

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Health Share of Oregon Risk Accepting Entity Participation Agreement.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$1,313,301	\$37,931	\$1,338,923
Contractual Services	\$0	\$186,200	\$0	\$182,960
Materials & Supplies	\$0	\$20,389	\$0	\$20,896
Internal Services	\$0	\$336,294	\$45,068	\$114,578
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,856,184</b>	<b>\$82,999</b>	<b>\$1,657,357</b>
<b>Program Total:</b>	<b>\$1,856,184</b>		<b>\$1,740,356</b>	
<b>Program FTE</b>	0.00	11.04	0.25	10.96

Program Revenues				
Intergovernmental	\$0	\$1,714,891	\$0	\$1,541,501
Service Charges	\$0	\$141,293	\$0	\$115,856
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,856,184</b>	<b>\$0</b>	<b>\$1,657,357</b>

## Explanation of Revenues

- \$ 80,189 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates
- \$ 115,856 - Fee For Service Insurance Receipts
- \$ 10,124 - State Community Mental Block Grant
- \$ 13,500 - State Vocational Rehabilitation Award
- \$ 1,324,668 - State Mental Health Grant based on 2017-2019 IGA with State of Oregon
- \$ 113,020 - SMHG MHS 38

## Significant Program Changes

Last Year this program was: FY 2019: 40078-19 Early Assessment & Support Alliance



**Department:** Health Department      **Program Contact:** Tracy Garell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Community Based Mental Health for children and youth serves over 11,000 at risk children up to age 21 through a continuum of prevention, early intervention and treatment services. The majority of funding is contracted to Certified Mental Health Providers in Multnomah County. A small portion supports Early Childhood Head Start Mental Health Prevention and Treatment Services, and Child Abuse Mental Health services at CARES NW.

### Program Summary

Services range from prevention/early intervention to a comprehensive continuum of treatment services in treatment centers, clinics, homes, schools and the community. The continuum of services for at risk children includes: Early Childhood Mental Health Prevention and Treatment Services at Head Start, Multnomah Early Childhood Program (MECP), Health Department Maternal Child and Family Services, and Child Abuse Mental Health Services at CARES NW provided by Multnomah County Direct Clinical Services. Health Share of Oregon Multnomah contracted services for Outpatient, Intensive Home Based Services, Psychiatric Day Treatment, Psychiatric Residential Treatment Services, Sub-Acute, and Respite.

Evidence-based practices for at risk children and their families are used to deliver: Incredible Years parent groups, early childhood classroom consultation, psychiatric day treatment, crisis respite, individual/group therapy, skill building and medication management. Care is coordinated with allied partners including Child Welfare, MECP, Head Start, Developmental Disabilities, Dept of Community Justice-Juvenile Services, Wraparound, School Based Mental Health and Physical Healthcare to ensure the best outcomes for children and youth. Prevention services to promote the development of healthy attachments and positive parenting practices are culturally responsive to ensure supports are accessible and relevant to all children and families served programs promote educational success and keep vulnerable children in home with their families, stable foster care, or with other long-term caregivers. Early Childhood Mental Health and Head Start programs provide prevention and treatment for 3,644 children, and address needs before a higher level of care is needed. As of 1/1/2016, culturally specific treatment services for Latino and African American children delivered to increase success at home and reduce the likelihood of expulsion from Head Start.

CARES NW, a child abuse mental health program, reduces the trauma of 1,042 vulnerable children and their families. In turn, this reduces risk of developing long-term health and mental health problems. Outpatient Services deliver a family-centered model to 4,252 children and parents, and seeks to promote long term stability. Intensive mental health treatment services intervene in crisis situations to keep children at home, in school, and out of trouble. The service array aligns with goals of the School Aged Policy Frameworks and Early Learning Multnomah: school readiness, strengthening families, and promoting educational success for children at risk for or with mental illness.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total children receiving outpatient services <sup>1</sup>	4,089	4,200	4,057	4,100
Outcome	% of children demonstrating improvement in their global distress score <sup>2</sup>	72.5	75%	69.5%	69.5%
Output	Total children (0-6) receiving prevention services <sup>3</sup>	3,644	3,600	3,600	3,600
Output	Numbers of children enrollment in early childhood culturally specific treatment services <sup>3</sup>	27	48	48	48

### Performance Measures Descriptions

<sup>1</sup> Measure is # of unduplicated children and youth ages 0-17, with at least one reported mental health or substance use treatment encounter in any outpatient service. Multnomah Mental Health, and Multnomah Treatment Fund (MTF) claims data.

<sup>2</sup> ACORN is short/frequent survey for clients to rate symptoms. Global distress score is average score of all items on survey.

<sup>3</sup> Two clinicians. 12 clients each. 50% productivity (Program enrollments started Dec 1st. 2016).

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services  
 Health Share of Oregon Risk Accepting Entity Participation Agreement  
 Head Start Revenue Contract

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,520,943	\$695,116	\$1,637,709	\$730,259
Contractual Services	\$172,827	\$1,848,224	\$104,591	\$921,775
Materials & Supplies	\$1,622	\$20,073	\$20,724	\$1,282
Internal Services	\$119,716	\$80,436	\$214,642	\$126,688
<b>Total GF/non-GF</b>	<b>\$1,815,108</b>	<b>\$2,643,849</b>	<b>\$1,977,666</b>	<b>\$1,780,004</b>
<b>Program Total:</b>	<b>\$4,458,957</b>		<b>\$3,757,670</b>	
<b>Program FTE</b>	12.32	5.26	12.23	5.21

Program Revenues				
Intergovernmental	\$0	\$2,592,047	\$0	\$1,608,819
Beginning Working Capital	\$0	\$0	\$0	\$82,323
Service Charges	\$111,500	\$51,802	\$166,918	\$88,862
<b>Total Revenue</b>	<b>\$111,500</b>	<b>\$2,643,849</b>	<b>\$166,918</b>	<b>\$1,780,004</b>

## Explanation of Revenues

- \$ 856,744 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates
- \$ 166,918 - Federally Qualified Health Centers Medicaid Wraparound Funds
- \$ 146,829 - Head Start Contracts
- \$ 88,862 - Fee For Services Insurance Receipt
- \$ 260,346 - Care NorthWest Family contracts
- \$ 344,898 - State Mental Health Grant: MHS 20 Non-Residential Mental Health Services based on 2017-2019 IGA with State of Oregon
- \$ 82,323 - Beginning Working Capital

## Significant Program Changes

**Last Year this program was:** FY 2019: 40080-19 Community Based MH Services for Children & Families

**Department:** Health Department      **Program Contact:** Tracy Garell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Youth Care Coordination provided through Multnomah Wraparound and Intensive Care Coordination (ICC) follow the System of Care principles and values, and is a contracted service through Multnomah Mental Health and Local Mental Health Authority. Multnomah Mental Health has oversight of the screening and eligibility for children in need of intensive mental health services including the State Hospital, Psychiatric Residential Treatment Services, Psychiatric Day Treatment Services, Home Based Services, Crisis Stabilization (hospital diversion), Mental Health Respite and Care Coordination.

**Program Summary**

Multnomah Wraparound and ICC is funded by Oregon Health Plan via contract with Health Share of Oregon and managed by Multnomah Mental Health, with additional resources from partnering entities such as DHS Child Welfare, School Districts, Dept of Community Justice-Juvenile Justice. Approximately 200 children, youth and families are engaged in multi-system coordination at any given time.

Multnomah Wraparound and ICC address system issues by identifying trends and implementing a cross system strategic plan through a multi-tiered System of Care governance framework. The governance framework builds partnerships to facilitate planning, decision making and oversight. It also supports family and youth involvement as primary decision makers in the development, implementation and modification of the system of care for children and families. Multnomah Wraparound and ICC utilize Mental Health Treatment Services, flex funding, and community resources to meet the needs of families, monitors quality assurance, conducts utilization management, and evaluates service effectiveness. Multnomah Wraparound and ICC ensure policies and procedures are culturally competent and services are compatible with the families' cultural beliefs, practices, literacy skills and language.

Multnomah Wraparound and ICC screen approximately 270 children per year for intensive services and care coordination. Multnomah Wraparound facilitate Child and Family Teams to develop a single plan of care with blended resources. The plan of care is family-guided, culturally competent, multidisciplinary and includes both formal and natural supports to help children stay with family, in the community, in school and out of trouble. Multnomah Wraparound, as the risk accepting entity for Health Share of Oregon Multnomah, is responsible for appropriate mental health service authorizations and managing flexible fund expenditures. Service effectiveness is monitored through data collection and outcome measurement.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of unique children served in Youth Care Coordination <sup>1</sup>	440	457	536	525
Outcome	% score measuring family's satisfaction and progress in Wraparound <sup>2</sup>	86.8%	84%	85.4%	85%
Outcome	% of families completing a Wraparound WFI-EZ survey	28%	33%	31%	31%
Output	Number of unique children screened for Youth Care Coordination eligibility	268	270	269	270

**Performance Measures Descriptions**

<sup>1</sup> Measure updated to include all Youth Care Coordination enrollments (Wraparound and Intensive Care Coordination).

<sup>2</sup> Wrap-Track State Database (Fidelity EHR) Mean Total Satisfaction Score from Wraparound WFI-EZ.

## Legal / Contractual Obligation

### Health Share of Oregon Risk Accepting Entity Participation Agreement

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$3,431,115	\$0	\$3,853,472
Contractual Services	\$0	\$992,689	\$0	\$703,449
Materials & Supplies	\$0	\$16,872	\$0	\$20,458
Internal Services	\$0	\$939,640	\$0	\$1,063,973
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,380,316</b>	<b>\$0</b>	<b>\$5,641,352</b>
<b>Program Total:</b>	<b>\$5,380,316</b>		<b>\$5,641,352</b>	
<b>Program FTE</b>	0.00	29.67	0.00	29.52

Program Revenues				
Intergovernmental	\$0	\$5,380,316	\$0	\$5,641,352
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,380,316</b>	<b>\$0</b>	<b>\$5,641,352</b>

## Explanation of Revenues

\$ 5,400,571 - Health Share of Oregon (Medicaid): Based on FY19 Medicaid Rates

\$ 172,656 - Community Mental Health Block Grant

\$ 68,125 - State Mental Health Grant MHS 37 Special Projects based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2019: 40081-19 Multnomah Wraparound

**Department:** Health Department      **Program Contact:** Tracy Garell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40080  
**Program Characteristics:** Measure 5 Education

### Executive Summary

School Based Mental Health is a vital component of the system of care for children and families, serving over 1,600 children and youth with mental health disorders in 38 schools across 6 school districts: Centennial, David Douglas, Gresham Barlow, Reynolds, Parkrose and Portland Public school districts. Mental health professionals provide evidence-based treatment in the school setting. Additionally, children, parents and school staff receive consultation from mental health consultants to assist with mental health needs during educational planning.

### Program Summary

Mental health treatment is provided in schools to decrease barriers to accessing care such as stigma, cost and transportation for under-served children and youth. This program reaches children who may not have access to services in a mental health clinic and over 43% of those served are children of color. The ongoing need for culturally specific/responsive mental health treatment and outreach continues to be a priority. Cultural alignment with the students served increases therapeutic alliance which assists with addressing challenges to school attendance and contributes to school completion. Approximately 75% of the children served are insured by the Oregon Health Plan.

Multnomah County and School Districts recognize that there is a continuum of need from prevention to mental health treatment/support for students and their families. No one partner is prepared or responsible for all the needs that are identified. School Based Mental Health Consultants also provide 1,700 hours of Prevention, Education and Outreach to over 6,000 students, school staff or families each year.

School Based Mental Health Consultants provide screening, assessment, crisis intervention, individual, group and family treatment, and case management services. School Based Mental Health Consultants provide consultation to education staff to optimize educational planning for children with mental health challenges. Mental health consultants are also co-located in Student Health Centers to provide integrated physical and mental health services.

Locating mental health services in schools is a best practice and Multnomah County has been a leader in the nation by providing this program since 1969. Mental health disorders may interfere with education completion which has lifelong implications for self-sufficiency and health outcomes. In Oregon, suicide remains the second leading cause of death among young people. Earlier identification and treatment can save lives.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total unduplicated youth referred to SBMH	1313	1,700	1285	1300
Outcome	ACORN Distribution of Patient Change Rate reported by client/student as their perception of improvement <sup>1</sup>	65%	65%	65%	65%

### Performance Measures Descriptions

<sup>1</sup> Client reported outcomes are accepted as more valid as the person receiving services is reporting changes through a global distress scale measure reported over the course of treatment. The percentage is the number of clients reporting significantly improved or somewhat improved.

## Legal / Contractual Obligation

Revenue contracts with school districts.

Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,719,661	\$1,469,474	\$1,468,827	\$1,835,071
Contractual Services	\$14,654	\$0	\$0	\$0
Materials & Supplies	\$10,625	\$3,774	\$14,194	\$5,071
Internal Services	\$95,209	\$140,276	\$178,233	\$383,600
<b>Total GF/non-GF</b>	<b>\$1,840,149</b>	<b>\$1,613,524</b>	<b>\$1,661,254</b>	<b>\$2,223,742</b>
<b>Program Total:</b>	<b>\$3,453,673</b>		<b>\$3,884,996</b>	
<b>Program FTE</b>	14.17	11.38	11.35	14.03

Program Revenues				
Intergovernmental	\$0	\$1,372,033	\$0	\$1,359,797
Beginning Working Capital	\$0	\$0	\$0	\$409,232
Service Charges	\$139,828	\$241,491	\$155,885	\$454,713
<b>Total Revenue</b>	<b>\$139,828</b>	<b>\$1,613,524</b>	<b>\$155,885</b>	<b>\$2,223,742</b>

## Explanation of Revenues

- \$ 155,885 - Federally Qualified Health Center Medicaid Wraparound payments
- \$ 202,648 - Local Public Health Agency IGA with State of Oregon for School Based Clinics
- \$ 22,500 - Parkrose School District
- \$ 75,000 - Centennial School District
- \$ 454,713 - Fee for Service Insurance Receipts
- \$ 177,000 - Portland Public Schools
- \$ 882,633 - State Mental Health Grant: MHS 20 Non-Residential Mental Health Services based on 2017-2019 IGA with State of Oregon
- \$ 409,231 - Beginning Working Capital

## Significant Program Changes

Last Year this program was: FY 2019: 40082-19 School Based Mental Health Services

**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Mental Health First Aid (MHFA) is a groundbreaking public education program that helps the public identify, understand, and respond to signs of mental illnesses and substance use disorders. In addition to MHFA, the prevention program offers a variety of evidence based trainings to county staff and the community that increases literacy around mental health challenges and interventions and suicide prevention.

**Program Summary**

The prevention program offers a minimum of two MHFA trainings per month with up to 30 participants per training. In Fiscal Year 2019 approximately 800 Multnomah County employees and community members will have been trained in Mental Health First Aid and Youth Mental Health First Aid. Also in Fiscal Year 2019, MHFA - Adult, Youth, and Older Adult MHFA in English and Spanish will continue to be offered to county employees as well as community groups.

Applied Suicide Intervention Skills Training (ASIST) is an evidenced-based practice to provide suicide first aid. Shown to significantly reduce suicidality, the ASIST model teaches effective intervention skills while helping to build suicide prevention networks in the community.

Over half of all people who die by suicide use a firearm. Counseling on Access to Lethal Means (CALM) is an evidence-based training that teaches people how to have conversations with people who are thinking of suicide and their loved ones about how to reduce someone's access to lethal means, namely firearms and medications, while they are experiencing a suicide crisis. We facilitate this training several times a year and have partnered with the Sheriff's Office to provide access to firearm information to licensed firearm owners in Multnomah County.

Question, Persuade, Refer (QPR) is an evidence-based 2-hour suicide awareness and prevention training. We provide this training throughout our community for churches, organizations and businesses, colleges and schools, social groups and general community members. QPR is an excellent way to give people an opportunity to talk about and learn about suicide, and is our most accessible training in terms of time and location.

At the beginning of Fiscal Year 2019, we also started offering safeTALK training. safeTALK is an evidence-based, suicide prevention model that is a middle ground for folks who want more skills than QPR provides, but not as in depth as ASIST. In FY19, the entire Bridges Division was trained in safeTALK to give them common language and skills to work with people that they encounter on and around Multnomah County-owned bridges that are at risk for suicide.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of individuals trained in Mental Health First Aid, ASIST <sup>1</sup> , QPR and/or CALM	890	700	800	800
Outcome	% of individuals who report greater understanding of mental illness and/or suicide prevention.	86%	86%	85%	86%

**Performance Measures Descriptions**

<sup>1</sup> Reduction in number of individuals trained due to reduction in budget.

**Legal / Contractual Obligation**

N/A

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$104,845	\$0	\$113,875	\$0
Contractual Services	\$37,260	\$0	\$37,440	\$0
Materials & Supplies	\$20,556	\$0	\$20,556	\$0
Internal Services	\$18,625	\$0	\$17,260	\$0
<b>Total GF/non-GF</b>	<b>\$181,286</b>	<b>\$0</b>	<b>\$189,131</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$181,286</b>		<b>\$189,131</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

<b>Program Revenues</b>				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues****Significant Program Changes**

**Last Year this program was:** FY 2019: 40083-19 Mental Health First Aid

\$181,286-County General Fund Support



**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Culturally-specific outpatient mental health services provide treatment for five under-served communities in our county (Pacific Islander, African-American, Eastern European, Latino, and Native-American). These communities have encountered difficulty finding mental health treatment that incorporates their culture, tradition, and language. Some communities of color are also over-represented in the criminal justice system. Through this program offer, 938 indigent individuals received services in FY18.

**Program Summary**

The system of care built and maintained by Multnomah County must reflect the demographics of those we serve. To ensure that all members of our community have treatment options that incorporate specific cultural needs, MCHD contracts for mental health services for individuals from five communities currently under-served or insufficiently served. Those communities are: Eastern European/Slavic/Russian Speaking, African-American, Asian/Pacific Islander, Latino/Hispanic, and Native American/ Alaskan Native. Multnomah County Mental Health prevalence data suggests that members of the African-American and Native American communities are more likely to be placed in restrictive settings such as hospitals and jails as a result of mental health symptoms. African-Americans are over represented in correctional facilities and the criminal justice system. Culturally-specific services address mental health problems through early access to culturally and linguistically appropriate treatment including nontraditional but culturally appropriate outreach, engagement, and treatment services. Early intervention can mitigate the need for expensive hospital, residential care, or crisis services.

<b>Performance Measures</b>					
<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Total culturally diverse individuals receiving services <sup>1</sup>	938	900	941	900
Outcome	Culturally specific persons served per 1,000 culturally diverse in population <sup>2</sup>	3.6	3.6	3.6	3.6

**Performance Measures Descriptions**

<sup>1</sup> This total includes all persons served under this contract and does not include those culturally diverse persons served by Multnomah Mental Health or in other programs. <sup>2</sup> Service Rate Per 1,000 Calculation- Numerator: Total unduplicated culturally diverse individuals served. Denominator: Total county census for similar groups taken from the American Community Survey estimates for 2015.

**Legal / Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$2,074,369	\$0	\$1,741,341	\$0
<b>Total GF/non-GF</b>	<b>\$2,074,369</b>	<b>\$0</b>	<b>\$1,741,341</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,074,369</b>		<b>\$1,741,341</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

**Explanation of Revenues****Significant Program Changes**

Last Year this program was: FY 2019: 40084-19 Culturally Specific Mental Health Services

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

This program serves over 3,000 individuals per year and consists of a continuum of adult addictions treatment and recovery support services for adult residents of Multnomah County. Services include: residential treatment, intensive outpatient treatment with supported housing, outpatient treatment, outreach/engagement, recovery mentoring, and recovery support (including linkages to housing support, pro-social/drug-free activities, basic needs support, etc). Research shows every dollar invested in addiction treatment yields a cost savings of nearly \$11.00.

### Program Summary

Substance use disorders impact many areas of the County, particularly including the criminal justice, child welfare, and the healthcare systems. While the overall goal of treatment is to promote an individual path to recovery and well-being, additional positive impacts are experienced at the interpersonal, family, and community levels, such as: reduced recidivism rates, reduced infectious disease transmission rates, reduced crisis system utilization, and strengthening of family bonds and reunification. A recent review of Multnomah County Medicaid members revealed that, on average, receiving treatment reduced physical healthcare costs by \$4,400 per person relative to individuals who didn't receive treatment.

Our adult continuum supports treatment engagement, recovery, and a return to a healthy lifestyle. Treatment and recovery services address the negative consequences of alcohol and other drug abuse; target specific issues that are barriers to recovery; and teach pro-social/drug-free alternatives to addictive behaviors through clinical therapy (individual and group based), skill building, and peer-delivered services. Community treatment and service providers also address self-sufficiency needs through support with parenting skills, stress and anger management, housing issues, independent living skills, referrals for physical and mental health issues, employment services, and pro-social activities that build community and support for a drug-free lifestyle.

Treatment and recovery support services are delivered throughout Multnomah County by a network of state licensed community providers. These providers are culturally competent and many have bilingual staff. The continuum of treatment and recovery support includes culturally responsive programming for specific populations, including: communities of color, people living with HIV, women, and parents whose children live with them while they are residential treatment.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number served in treatment (all levels of care)	3,537	3,371	3,395	3,371
Outcome	Percentage of clients who successfully complete outpatient treatment <sup>1</sup>	52%	46%	52%	46%

### Performance Measures Descriptions

Performance measures reflect the continuation towards more intensive services for a fewer number of individuals with higher-level needs, and an increase in recovery support services separate from treatment. Recently implemented County reporting methods and State MOTS data have led to continually adjusting estimates. (See, Significant Program Changes section, for additional comments regarding Performance Measure 1). <sup>1</sup>"Successful completion of treatment" is defined as the client completing at least two thirds of their treatment plan goals and demonstrating 30 days of abstinence.

## Legal / Contractual Obligation

This program is funded with federal substance abuse prevention/ treatment resources and federal Ryan White grant funds targeting individuals with HIV, as well as, state general funds through the State Oregon Health Authority (OHA) Addictions and Health Systems Division contract. Program planning is developed based on State Mental Health Grant Award requirements and submitted in the "Biennial Implementation Plan." Multnomah County accepts the State Mental Health Grant which obligates us to spend funds in accordance with State Service Elements. Local 2145 Beer and Wine tax and Marijuana tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug treatment/ recovery support services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$96,153	\$777,662	\$245,195	\$787,274
Contractual Services	\$2,503,200	\$8,074,278	\$2,170,046	\$8,052,863
Materials & Supplies	\$6,470	\$5,390	\$6,541	\$5,530
Internal Services	\$69,433	\$131,232	\$97,474	\$132,063
<b>Total GF/non-GF</b>	<b>\$2,675,256</b>	<b>\$8,988,562</b>	<b>\$2,519,256</b>	<b>\$8,977,730</b>
<b>Program Total:</b>	<b>\$11,663,818</b>		<b>\$11,496,986</b>	
<b>Program FTE</b>	0.65	6.70	1.85	6.50

Program Revenues				
Intergovernmental	\$0	\$8,988,562	\$0	\$8,977,730
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,988,562</b>	<b>\$0</b>	<b>\$8,977,730</b>

## Explanation of Revenues

- \$ 155,939 - Healthshare of Oregon (Medicaid): Based on FY19 Medicaid Rates
- \$ 135,264 - Ryan White Award
- \$ 676,184 - Local 2145 Beer and Wine Tax
- \$ 500,001 - Marijuana Tax
- \$ 3,353,624 - SAPT Block Grant
- \$ 125,000 - Safe Neighborhoods Advocacy Partnership
- \$ 170,576 - TANF A&D67 Award
- \$ 47,145 - Stop ACT Grant
- \$ 249,999 - OHA Peer Delivered Services
- \$ 3,563,998 - State Mental Health Grant based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2019: 40085A-19 Adult Addictions Treatment Continuum

There are no significant program changes. It is important to note that youth served moved from this Performance Measure in FY 2019 and are included in 40090 Family and Youth Addictions Treatment Continuum.

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Gambling addiction treatment uses evidence-based practices in an outpatient setting to provide treatment to persons diagnosed with mild, moderate, or severe gambling addiction. Based on FY18 data the county's community-based providers treated approximately 318 individuals and family members. Countywide data shows that problem gamblers and family members can access treatment in less than five days from initial contact over 90% of the time, and over 55% meet retention criteria by attending a minimum of ten contact sessions (the State benchmark is 40%).

### Program Summary

Multnomah County's Problem Gambling services are guided by a public health approach that takes into consideration biological, behavioral, economic, cultural, and policy factors influencing gambling and health. Services incorporate prevention, harm reduction and multiple levels of treatment by placing emphasis on quality of life issues for the person who gambles, their family members, and communities. In FY18, 186 individuals enrolled in problem gambling treatment. As noted, family participation is important, and 55 family members enrolled in treatment.

Approximately 1,400 adult Oregonians statewide receive Lottery funded treatment each year. Multnomah County has the highest rate, per capita (18 years and older), of lottery sales statewide. Nearly 90% report a preference for gambling on machines (video poker, line games, slots). Problem gambling treatment services are focused on relieving initial client stress and crisis, supporting the client and family members in treatment, and assisting the family to return to a level of healthy functioning. Problem gambling treatment assists the gambler and family in managing money/finances, rebuilding trust within the family,, and maintaining recovery.

Multnomah County provider network includes Lewis & Clark College, Volunteers of America InAct, Cascadia Behavioral Healthcare, and Voices of Problem Gambling Recovery (VPGR). The Latino Problem Gambling Tri-County Services program, administered through Lewis & Clark College, was established in FY18. An Asian Problem Gambling Program is being developed by Asian Health & Services Center for FY20. Culturally-specific programs are funded direct by the State.

Problem gambling prevention programming has focused on assessing overall community awareness of problem gambling as an issue and developing new strategies for the prevention of problem gambling disorders in Multnomah County. Prevention messaging focuses on the risks of problem gambling, tips for responsible gambling, and resources for finding help for individuals with gambling issues. In FY20, the prevention program will be working to reducing stigma related to problem gambling addiction, and promoting the Reflect, Resource, Renew campaign put together by the State's Problem Gambling Services program.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of gamblers and family members accessing treatment annually <sup>1</sup>	318	350	350	350
Outcome	Gambler successful treatment completion rate <sup>2</sup>	33%	45%	30%	30%

### Performance Measures Descriptions

<sup>1</sup> Output - The number of persons completing the enrollment process and entering treatment.

<sup>2</sup> Outcome - The number of gamblers completing a minimum of 75% of the short-term treatment goals, completing a continued wellness plan, and not engaging in problem gambling behaviors for a least 30 days prior to discharge. The rate is the number of successful gamblers divided by the number of unsuccessful gamblers and the "neutral" drops.

## Legal / Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with State Service Elements. The funds earmarked for gambling prevention and treatment in the Service Element are from Oregon Lottery revenues and may not be used for other purposes.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$19,927	\$0	\$18,458
Contractual Services	\$0	\$788,119	\$0	\$788,978
Materials & Supplies	\$0	\$2,204	\$0	\$2,204
Internal Services	\$0	\$0	\$0	\$610
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$810,250</b>	<b>\$0</b>	<b>\$810,250</b>
<b>Program Total:</b>	<b>\$810,250</b>		<b>\$810,250</b>	
<b>Program FTE</b>	0.00	0.15	0.00	0.15

Program Revenues				
Intergovernmental	\$0	\$810,250	\$0	\$810,250
<b>Total Revenue</b>	<b>\$0</b>	<b>\$810,250</b>	<b>\$0</b>	<b>\$810,250</b>

## Explanation of Revenues

\$ 38,500 - State Mental Health Grant: Local Administration - Addictions Services based on 2017-2019 IGA with State of Oregon

\$ 700,000 - State Mental Health Grant: Problem Gambling Treatment Services based on 2017-2019 IGA with State of Oregon

\$ 71,750 - State Mental Health Grant: Problem Gambling Prevention Services based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2019: 40086-19 Addiction Services Gambling Treatment & Prevention

A request for programmatic qualifications will be released in Spring 2019. This qualification process may impact the current provider network for both treatment and prevention. The outcome measure for successful completion rate was updated to match the State's requirement (Service Element AD-81), which is more in line with actual performance.

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Alcohol and Drug Prevention Education Program (ADPEP) uses Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant funds to address risk and protective factors for youth substance use that can lead to alcohol, tobacco, and other drug addiction. These State-funded efforts include prevention education, youth leadership activities, and support for schools and parents. With the prevention grant program now transitioned to the Oregon Health Authority's Public Health division, new emphases on tobacco prevention and environmental strategies have been introduced.

### Program Summary

Beginning in FY18, Multnomah County's State-funded substance abuse prevention program refocused to begin a pilot prevention program offering services to schools, community organizations, parents and other groups. The key focus is to address alcohol and marijuana use among youth and young adults. Priorities include increasing capacity for prevention in schools, convening stakeholders to assess needs, and offering prevention activities at school sites and organizations serving youth and parents. Year 1 activities include conducting key informant interviews and parent focus groups, partnering with local coalition efforts, and starting to offer prevention activities and classes.

The goal for FY20 (the first year following the pilot) will be to identify additional schools and community programs seeking prevention programming and support for youth, parents and staff. Depending on identified needs within participating schools, prevention programming may include introducing evidence-based prevention curricula, student groups, campus-wide leadership initiatives and early intervention and referrals; offering positive youth activities (that include skill-building, health promotion, etc.); and providing presentations and educational materials at parent/family events. These prevention strategies can also be delivered to community-based groups and venues.

The prevention program became ADPEP -- the Alcohol and Drug Prevention Education Program -- when the Oregon Health Authority (OHA) moved the SAPT block grant program to its Public Health Division/Health Promotion and Chronic Disease Prevention unit. The Multnomah County 2017-19 Biennial ADPEP Local Plan now includes a tobacco policy strategy following up on the new "T21" law raising the minimum legal age to purchase tobacco in Oregon to 21. ADPEP will work with the County Public Health Tobacco Prevention Education Program (TPEP) to engage in T21 education and outreach emphasizing that it is no longer legal for tobacco or inhalant delivery systems to be purchased by 18-20 year olds.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Adults and youth served by substance abuse prevention services and programming <sup>1</sup>	527	275	425	425
Outcome	Prevention activity attendees/participants with improved awareness and/or educational outcomes <sup>1</sup>	80%	75%	75%	75%

### Performance Measures Descriptions

FY20 output measures will reflect prevention programming across the community. FY20 outcome measures will be determined by evaluation measures including, but not limited to, pre-and post tests, surveys, and interviews in collaboration with participating schools, community organizations and other prevention partners.

## Legal / Contractual Obligation

Contractual obligation: This program is funded with federal substance abuse prevention resources and state general funds through a State Oregon Health Authority (OHA) Public Health Intergovernmental Grant Agreement. Program plans are developed and submitted in accordance with State and Federal grant requirements. Because Multnomah County accepts the OHA Public Health revenue agreement, we are obligated to spend funds in accordance with its terms referencing applicable Oregon Administrative Rules, and/or any service elements to be determined.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$118,700	\$0	\$110,837
Contractual Services	\$0	\$193,069	\$0	\$195,280
Materials & Supplies	\$0	\$4,850	\$0	\$4,850
Internal Services	\$0	\$7,632	\$0	\$13,284
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$324,251</b>	<b>\$0</b>	<b>\$324,251</b>
<b>Program Total:</b>	<b>\$324,251</b>		<b>\$324,251</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$324,251	\$0	\$324,251
<b>Total Revenue</b>	<b>\$0</b>	<b>\$324,251</b>	<b>\$0</b>	<b>\$324,251</b>

## Explanation of Revenues

\$ 324,251 - Oregon Health Authority. Federal Substance Abuse Prevention and Treatment (SAPT) block grant and State general funds.

The SAPT block grant is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), Department of Health and Human Services.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40087-19 Addiction Services Alcohol & Drug Prevention

The substance abuse prevention program has focused its services to help build prevention capacity and offer prevention programming to schools and communities. Now funded through the Oregon Health Authority's Public Health Division Health Promotion and Chronic Disease Prevention unit, the Alcohol and Drug Prevention Education Program (ADPEP) is including more environmental strategies as well as tobacco prevention strategies. This is the final year of the pilot, and a request for programmatic qualifications will be released in Spring 2019.



**Department:** Health Department      **Program Contact:** Neal Rotman  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Coordinated diversion includes three jail and/or hospital diversion programs for justice-involved individuals experiencing severe mental health issues. Mental health professionals staff the Community Court, Mental Health Court, and Forensic Diversion Program. Programs provide intensive support, to connect to appropriate community treatment options. Each program works to divert individuals experiencing a serious mental health issue from lengthy jail stays and promote stability in the community.

### Program Summary

The three coordinated diversion programs target persons in the criminal justice system experiencing serious mental health issues who are at risk of lengthy stays in jail or the state hospital unless provided additional treatment, support, and resources. The diversion programs address the needs of residents experiencing severe mental health issues who can be safely diverted from jail and/or the State Hospital, by providing support for successful completion of court directives as well as providing linkage to community services that increase mental health stability. Initial case management and coordination protects the legal and civil rights of these individuals, ensures appropriateness of resources and decreases the unnecessary expense of time spent in jail or the State Hospital.

The Community Court Program works with defendants who have been involved in low-level quality of life crimes. The focus is on restorative justice and clients are able to participate in a variety of social services as an alternative to jail or community service. Mental Health Court provides time-limited intensive monitoring services to persons involved in the criminal justice system post-adjudication. Defendants plea into the court and are supported by Parole/probation, mental health court monitors and peer specialists. The focus is on connecting defendants to community treatment, housing, and financial and medical entitlements. Staff provides ongoing monitoring and support for persons enrolled in the Mental Health Court. Staff initiated services to 60 new participants in FY18.

The Forensic Diversion Program is a pre-adjudication program, focusing on diverting mentally ill defendants from the criminal justice system. The program also works with persons charged with felonies and misdemeanors and ordered to undergo evaluation/restoration at the Oregon State Hospital (OSH). Staff provides mental status evaluations and linkage to basic needs in the community; time-limited coordination/linkage to treatment services, housing, financial and medical entitlements, and social services. In addition, Forensic Diversion provides community restoration as an alternative to being placed in the Oregon State Hospital. This option is less restrictive and provides the client with continued stability and services while maintaining safely in their community as an alternative to extended time in the Multnomah County Detention Center.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	# of participants in Community Court	630	690	616	630
Outcome	% of participants in good standing or have successfully completed services	58%	55%	57%	57%
Output	# of participants served by Forensic Diversion	464	450	431	435
Outcome	% of participants served in the Community by Forensic Diversion	11%	33%	12%	12%

### Performance Measures Descriptions

The outcomes measure the program's effectiveness to engage clients toward community based stabilization.

## Legal / Contractual Obligation

Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Additions and Mental Health Services

State of Oregon Safe Neighborhood Advocacy Partnership grant

US Dept of Health & Human Services Substance Abuse & Mental Health Services Administration (SAMHSA) grant

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$249,429	\$1,275,267	\$265,677	\$1,188,548
Contractual Services	\$302,287	\$354,879	\$478,131	\$208,473
Materials & Supplies	\$3,392	\$5,604	\$3,458	\$2,955
Internal Services	\$267,629	\$3,984	\$126,440	\$133,262
<b>Total GF/non-GF</b>	<b>\$822,737</b>	<b>\$1,639,734</b>	<b>\$873,706</b>	<b>\$1,533,238</b>
<b>Program Total:</b>	<b>\$2,462,471</b>		<b>\$2,406,944</b>	
<b>Program FTE</b>	2.00	10.70	2.00	9.70

Program Revenues				
Intergovernmental	\$0	\$1,620,273	\$0	\$1,533,238
Beginning Working Capital	\$0	\$19,461	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,639,734</b>	<b>\$0</b>	<b>\$1,533,238</b>

## Explanation of Revenues

\$ 1,533,238 - State Mental Health Grant: MHS Special Projects based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2019: 40088-19 Coordinated Diversion for Justice Involved Individuals

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Alcohol and drug detoxification, or medically monitored withdrawal management, medically stabilizes a highly vulnerable and diverse client population. It prepares them for further alcohol and drug treatment and connects them to other services needed to resolve homelessness and health issues. There are approximately 2,400 admissions to detox services annually. Supportive Housing targets homeless addicted individuals who have completed detoxing from substances, providing additional engagement and stability to enhance outcomes of continued treatment.

### Program Summary

The detoxification and stabilization program supports capacity for withdrawal management services to be provided 24 hours/day, 7 days/week under medical oversight. Clients receive prescribed medication to safely manage withdrawal symptoms and acupuncture to reduce physiological stress so they are more likely to complete the process. Services are also provided in an integrated medical clinic with primary care and dual-diagnosis capability and include culturally specific considerations for African American and Latino populations. Stabilization services include counseling; case management; referrals related to housing, food and transportation, and such economic independence resources as job training, employment referrals, benefits eligibility screening; and discharge linkage to continuing care treatment.

Supportive Housing greatly increases post-detoxification treatment engagement rates. For people who are homeless, addicted, and newly sober, it can be a vital resource in the work towards long-term recovery. Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without attached supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Supportive housing (\$29/day) is an evidence-based, lower-cost resource when compared to either Level 3.7 Medically Monitored Inpatient Withdrawal Management (\$945/ day) or Level 3.2 A&D Residential treatment (\$120/day), and we can provide less restrictive/expensive outpatient treatment while the individual is in supportive housing. 58 supportive housing units can each house two to three clients per year (3-4 month stays). Clients are helped by Housing Support Specialists to access key services that promote health, recovery, stability, and self-sufficiency.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of admissions annually to detoxification <sup>1</sup>	2,470	2,600	2,600	2,600
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	95%	94%	94%	94%
Output	Number of individuals receiving supportive housing <sup>2</sup>	324	168	168	168

### Performance Measures Descriptions

<sup>1</sup> An admission is a person completing the admission process. There can be multiple admissions per individual.

<sup>2</sup> Average length of stay in supportive housing is 14-15 weeks. Our outcome measures reflect the annual utilization rate (Measure 2) and estimated annual number of individuals housed (Measure 3).

## Legal / Contractual Obligation

Contractual obligation: This program is funded with federal substance abuse prevention and treatment resources and state general funds through the State Oregon Health Authority (OHA) Addictions and Mental Health Division (AMH) contract. Program planning is developed based on State Mental Health Grant Award requirements and submitted in the "Biennial Implementation Plan." Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with State service elements. Also, Local 2145 Beer & Wine Tax Revenues are provided to counties on a dedicated formula basis and are restricted to alcohol & drug services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$1,607,167	\$1,296,616	\$1,515,276	\$671,461
Internal Services	\$23,223	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$1,630,390</b>	<b>\$1,296,616</b>	<b>\$1,515,276</b>	<b>\$671,461</b>
<b>Program Total:</b>	<b>\$2,927,006</b>		<b>\$2,186,737</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,296,616	\$0	\$671,461
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,296,616</b>	<b>\$0</b>	<b>\$671,461</b>

## Explanation of Revenues

\$ 283,733 - State Mental Health Grant: A&D Community Mental Health Block Grant based on IGA with State of Oregon.  
\$ 387,728 - State Mental Health Grant: A&D Community Behavioral and Substance Use Disorder Services based on IGA with State of Oregon.

## Significant Program Changes

Last Year this program was: FY 2019: 40089-19 Addictions Detoxification & Post Detoxification Housing

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program provides a continuum of services for youth in outpatient, residential, early recovery, and culturally-specific outpatient addiction treatment services. Additionally, this program provides alcohol/drug-free supportive housing resources for families of adult parent(s) who are in addictions treatment. Annually, approximately 90 families receive housing supports in family-focused recovery housing communities.

**Program Summary**

A 2015 report from the Center for Behavioral Health Statistics and Quality cites the fact that around 37,000 adolescents in Oregon (almost 13% of the total adolescents) per year report using illicit drugs. Youth alcohol and drug treatment focuses on the developmental issues of youth, to mitigate the immediate and long-term consequences of substance abuse. Our youth treatment continuum reflects collaboration with schools, juvenile justice, and a network of community-based treatment and recovery support providers. This collaborative network provides outreach/engagement services, outpatient treatment, residential treatment, and recovery support services for youth and families with an income at or less than 200% of Federal Poverty Level.

The Family Alcohol and Drug-Free Network (FAN) is a collaboration of community providers supporting families in 89 units of Central City Concern long-term transitional housing. FAN provides a clean, safe and sober living environment in which parents can raise their children while in a recovery supported environment. FAN offers families an array of services, including: rent assistance, family mentoring, and housing case management. Goals focus on supporting the sobriety and recovery of the parent(s); family reunification in cases of child welfare involvement; supports to enhance family stability, economic self-sufficiency, pro-social/ drug-free relationships and community involvement; and placement in permanent housing. The FAN Housing Coordination program helps those families in early recovery as they transition from residential treatment to locate suitable Alcohol and Drug Free Communities (ADFC) recovery-focused housing, as well as providing assistance with housing maintenance and referrals to other supportive resources. Access to this supportive ADFC housing in turn lays a foundation for families' future self-sufficiency and ability to obtain permanent housing. FAN Rent Assistance provides payment of rent and associated expenses inclusive of deposits, move-in costs, and utilities.

Altogether, the services embedded within the family and youth addictions treatment continuum are vital to serving youth and families, many of whom struggle with a myriad of challenges such as trauma histories, dual diagnoses, generational cycles of poverty, incarceration, and fragmented family structures among other difficulties.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households that received rent assistance	86	85	85	85
Outcome	Exiting families that move into long-term permanent housing	75%	75%	75%	75%
Output	Number of families that received housing coordination services	89	120	90	90
Output	Number of youth served in outpatient treatment	45	45	45	45

**Performance Measures Descriptions**

The performance measures shown above are consistent with measures attached to these funds by the State, and based on provider quarterly reports submitted to the State via the County. State funds to staff housing coordination were reduced in the current biennium, impacting support to families seeking employment and affordable permanent housing. Measures 1 & 3 were adjusted for FY19 to accurately reflect expectations.

## Legal / Contractual Obligation

This program is funded with federal substance abuse prevention and treatment resources and state general funds through the State Oregon Health Authority (OHA). Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements. Additionally, Local 2145 Beer & Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to use for alcohol & drug services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$137,727	\$493,647	\$128,073	\$459,216
<b>Total GF/non-GF</b>	<b>\$137,727</b>	<b>\$493,647</b>	<b>\$128,073</b>	<b>\$459,216</b>
<b>Program Total:</b>	<b>\$631,374</b>		<b>\$587,289</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$493,647	\$0	\$459,216
<b>Total Revenue</b>	<b>\$0</b>	<b>\$493,647</b>	<b>\$0</b>	<b>\$459,216</b>

## Explanation of Revenues

\$ 27,700 - Local 2145 Beer & Wine Tax

\$ 275,100 - SAPT Block Grant

\$ 156,416 - State Mental Health Grant: A&D Community Behavioral and Substance Use Disorder Services based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2019: 40090-19 Family & Youth Addictions Treatment Continuum

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Family Involvement Team (FIT) for Recovery program is a collaborative effort with Oregon Department of Human Services/Child Welfare, alcohol and drug treatment providers, social service agencies, and the Family Dependency Court. In FY19, the FIT for Recovery program connected approximately 270 unique individuals with addictions treatment and provided enhanced services to assist clients to successfully complete treatment and maintain recovery.

**Program Summary**

The FIT for Recovery Core Team, housed at the Family Dependency Court, works with parents involved with DHS Child Welfare who may have a substance use disorder and be in need of treatment services. Volunteers of America outreach workers, located at Multnomah County DHS offices, begin working with the families by screening parent/s for an addictive disorder and referring to a treatment program.

Once in treatment, FIT case managers at the treatment agencies provide the family with supportive services including case management, family therapy, and family recovery services to assist the parent/family in being successful and in developing a recovery plan. DHS Child Welfare caseworkers assist and collaborate with parent skill building, ensuring child visitation and reunification while in treatment. Peer and parent mentors are also available through the FIT collaborative before, during, and after treatment.

FIT partners include: DHS Child Welfare, Family Dependency Court, Cascadia Behavioral Healthcare, CODA, Inc., Lifeworks NW, Central City Concern, Volunteers of America, Oregon and their Family Recovery Support/Miracles partnership, NARA, Inc., Bridges to Change, Miracles Club, Raphael House and Morrison Center.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of FIT Triage starts per year	878	800	868	800
Outcome	Average monthly number of clients in treatment	93	95	96	NA
Outcome	% of FIT screened clients who enter treatment	86.5%	NA	91%	81&

**Performance Measures Descriptions**

Output: FIT Triage starts are the number of individuals referred from DHS to FIT Outreach Workers.

Outcome: A target outcome of the collaborative efforts between DHS Child Welfare, FIT Outreach Workers/Screeners, and Agency Case Managers is to engage individuals with child-welfare involvement in substance use disorder treatment, increasing the likelihood of parent/child reunification. FY20 program offer has been updated to be in line with program instructions.

## Legal / Contractual Obligation

Multnomah County accepts the State Mental Health Grant, and we are obligated to spend funds in accordance with State Service Elements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$445,107	\$0	\$440,442
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$445,107</b>	<b>\$0</b>	<b>\$440,442</b>
<b>Program Total:</b>	<b>\$445,107</b>		<b>\$440,442</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$445,107	\$0	\$440,442
<b>Total Revenue</b>	<b>\$0</b>	<b>\$445,107</b>	<b>\$0</b>	<b>\$440,442</b>

## Explanation of Revenues

\$ 440,442 - State Mental Health Grant - Community Behavioral and Substance Use Disorder based on 2017-2019 IGA with the State.

## Significant Program Changes

**Last Year this program was:** FY 2019: 40091-19 Family Involvement Team

FY20 performance measures have been updated to be in line with program instructions. The previous outcome was better defined as an output. The revised outcome (% of FIT screened clients who enter treatment) better demonstrates collaboration between outreach/screening workers and agency case managers to expedite treatment engagement for individuals with child-welfare involvement.



**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Administration      **Program Offer Stage:** As Adopted  
**Related Programs:** 40076, 40080, 40085  
**Program Characteristics:**

**Executive Summary**

This program offer describes the existing management and administration of Multnomah Behavioral Health, which is a Behavioral Health Plan Partner under contract with Health Share of Oregon to administer the behavioral health benefits for approximately 170,000 members (County residents) on the Oregon Health Plan. The behavioral health plan includes operational functions that span all levels of care related to mental health and substance use disorder treatment (from outpatient care to acute care).

**Program Summary**

Multnomah Mental Health and Addictions Services Division (MHASD) manages the mental health and substance use disorder benefit for Oregon Health Plan members enrolled with Health Share of Oregon/Multnomah Behavioral Health (MBH). The Oregon Health Plan provides health coverage to low-income Oregonians who are eligible for Medicaid. Multnomah Behavioral Health currently has more than 170,000 members. This number varies from month-to-month based on the number of Oregon Health Plan members. The administration of behavioral health benefits for Health Share of Oregon member aligns with Multnomah County Board of Commissioners' responsibility as the local mental health authority and MHASD's role as the Community Mental Health Program (CMHP), managing a critical aspect of the system of care for the most vulnerable residents of Multnomah County. By managing the behavioral health benefit for MBH members, MHASD is able to ensure that county residents receive timely and appropriate access to care and care coordination services that prevent members from going to higher and more restrictive levels of care. Additionally, as a behavioral health plan, MBH provides billing support to community providers and also manages the oversight of all plan financials to ensure the sustainability and viability of the benefit (and that residents with the benefit can retain access to core mental health services).

The Multnomah Intensive Transition Team (M-ITT) is responsible for following up with members who are unaffiliated with mental health services within 7 days of discharge from psychiatric hospitalization. Meeting a State defined benchmark (currently 79.9%) results in approximately \$2 million in incentive funding.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Penetration rate - percentage of members who receive mental health or addictions services	13.23%	11%	13.97%	13.50%
Outcome	Percent of members who receive outpatient service within 7 days of being discharged from hospitalization <sup>1</sup>	76.70%	86%	72%	72%

**Performance Measures Descriptions**

<sup>1</sup> OHA removed this as an incentive measure for providers which may explain drop in performance

## Legal / Contractual Obligation

Risk Accepting Entity contract with Health Share of Oregon CCO.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$3,980,861	\$0	\$4,567,066
Contractual Services	\$0	\$1,529,405	\$0	\$151,678
Materials & Supplies	\$0	\$6,338	\$0	\$8,608
Internal Services	\$0	\$933,781	\$0	\$1,090,694
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,450,385</b>	<b>\$0</b>	<b>\$5,818,046</b>
<b>Program Total:</b>	<b>\$6,450,385</b>		<b>\$5,818,046</b>	
<b>Program FTE</b>	0.00	35.90	0.00	38.10

Program Revenues				
Intergovernmental	\$0	\$6,450,385	\$0	\$5,818,046
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,450,385</b>	<b>\$0</b>	<b>\$5,818,046</b>

## Explanation of Revenues

\$ 5,725,053 - Healthshare of Oregon (Medicaid): Based on FY19 Medicaid Rates

\$ 80,078 - Ryan White Award

\$ 12,918 - State Mental Health Grant MHS 37 Special Projects based on 2017-2019 IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2019: 40094-19 Medicaid Insurance Plan Administration and Operations

**Department:** Health Department      **Program Contact:** Rachael Banks  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40048  
**Program Characteristics:**

### Executive Summary

The Public Health Office of the Director provides leadership as the local public health authority. The PHD 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, and assessment.

### 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 and ensure health for all residents. The Office of the Director provides regular updates and identifies the most pressing public health issues facing the community to the BOH through sharing health data, community wisdom, and promising practices. The BOH and PHD coordinate to identify policy and systems level changes that reduce health disparities in the leading causes of preventable death and disability in the County. Currently, the focus is on chronic disease and injury prevention policies and systems interventions.

**Leadership and Policy:** This unit implements the strategic direction and anticipates future needs of public health in Multnomah County through leading division-wide strategies and participating in regional and statewide public health systems. Major areas of focus include assessment and implementation of public health system reform and leadership on the Coalition of Local Health Officials, the Governor-appointed Public Health Advisory Board of the Oregon Health Authority, and the Multnomah County Public Health Advisory Board. Key activities include implementing public health education and communication campaigns.

**Community Partnerships and Capacity Building:** Community Powered Change, a Community Health Improvement Planning contract with a community partner coalition, identifies and implements community-driven recommendations addressing longstanding and persistent health inequities through aligning Public Health Division activities with community needs and priorities and shifting public health practice and organizational culture toward the elimination of health disparities.

**Partnership Coordination:** Develops and coordinates division-level health equity work, community engagement, and partnerships to support approaches and policies to decrease health disparities. Strategies include: the Future Generations Collaborative, a culturally-specific, trauma-informed partnership with Native American and Alaska Native community members, Native-serving organizations; Pacific Islander Coordination which convenes and supports the PI Coalition to identify community priorities and address health inequities; support for Community Health Worker (CHW) training for community-based organizations to conduct cultural specific CHW certification training; improving institutional practice on partnerships; and building and maintaining a competent and culturally responsive public health workforce.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of Multnomah County Public Health Advisory Board meetings	10	12	13	12
Outcome	Number of policy and/or service system strategies presentations to the BOH	NA	NA	2	5
Output	# internal/external partners provided TA in applying culturally responsive partnership/equity strategies	NA	NA	15	20

### Performance Measures Descriptions

1) Measures moved from program offer 40001. 2) New measure. 3) New measure.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$881,883	\$0	\$1,488,431	\$0
Contractual Services	\$439,076	\$150,000	\$975,109	\$150,000
Materials & Supplies	\$95,841	\$0	\$153,504	\$0
Internal Services	\$238,697	\$0	\$254,225	\$0
<b>Total GF/non-GF</b>	<b>\$1,655,497</b>	<b>\$150,000</b>	<b>\$2,871,269</b>	<b>\$150,000</b>
<b>Program Total:</b>	<b>\$1,805,497</b>		<b>\$3,021,269</b>	
<b>Program FTE</b>	6.30	0.00	10.70	0.00

Program Revenues				
Intergovernmental	\$0	\$150,000	\$0	\$150,000
Other / Miscellaneous	\$0	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>	<b>\$150,000</b>

Explanation of Revenues

\$ 150,000 - State: MCH Child and Adoles

Significant Program Changes

**Last Year this program was:** FY 2019: 40001-19 Public Health Administration and Quality Management

In FY19, the Leadership and Policy elements of this program offer were included in 40001 Public Health Administration and Quality Improvement. This unit, Community Powered Change (CPC)/Community Health Improvement Plan (CHIP), and health equity staff are core components of the Public Health Division and were moved to this program offer in FY20 as part of divisional and program offer reorganization.

**Department:** Health Department      **Program Contact:** LaRisha Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 40056, 40055, 40058, 40054  
**Program Characteristics:**

### Executive Summary

Maternal, Child, and Family Health (MCFH) Administration provides leadership, compliance, quality, and program data oversight and support to MCFH programs within the Public Health Division. MCFH Administration sets a health equity-focused strategic direction and assures compliance to program and fiscal standards for all MCFH programs.

### Program Summary

MCFH Administration supports the following programs: Healthy Birth Initiatives; Nurse Family Partnerships; Healthy Families, Healthy Homes Asthma Home Visiting, and Community Based Health Consulting. MCFH Administration ensures that service delivery is focused on improving health outcomes before, during, and after pregnancy to reduce racial/ethnic disparities in perinatal and birth outcomes. To implement this approach, MCFH Administration provides administrative and leadership functions to its programs.

Administrative functions include fiscal and programmatic compliance; health information technology management; and quality assurance. These functions support assessing and evaluating partner, client, and service delivery needs based on program outcomes; overseeing contracts, billing, health information technology systems, and compliance with Local, State, and Federal guidelines; and implementing quality and process improvements.

Leadership functions include program management, partnership engagement, and health equity-focused strategic planning. These functions support working with clients, program leadership, community-based service-delivery partners, and other County programs to set the strategic direction for MCFH programs. Examples include working to shift the MCFH workforce culture toward the elimination of racial/ethnic disparities by implementing culturally specific and responsive programs and meaningful community partnerships.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of billable visits that meet targeted case management (TCM) requirements	NA	NA	4,519	1,320
Outcome	Percent of partnership contracts in compliance	NA	NA	100%	100%
Quality	Number of monthly chart audits completed	NA	NA	326	200

### Performance Measures Descriptions

1) Billing requirements that meet the provision with Medicaid program that allows reimbursement for specific case management services. FY20 Offer reduction due to reduction in NFP services. 2) Contracts are created and executed in compliance with County rules and practice. 3) Provider charts are audited for compliance that meets, HIPAA privacy, nursing charting standards, and TCM requirements.

## Legal / Contractual Obligation

MCFH Administration ensures that all MCFH programs comply with a number of legal/contractual guidelines related to model fidelity, Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$941,698	\$21,339	\$978,014	\$20,806
Contractual Services	\$115,100	\$101,388	\$49,300	\$100,000
Materials & Supplies	\$42,579	\$0	\$61,095	\$1,921
Internal Services	\$226,637	\$2,273	\$246,865	\$2,273
<b>Total GF/non-GF</b>	<b>\$1,326,014</b>	<b>\$125,000</b>	<b>\$1,335,274</b>	<b>\$125,000</b>
<b>Program Total:</b>	<b>\$1,451,014</b>		<b>\$1,460,274</b>	
<b>Program FTE</b>	8.35	0.14	8.00	0.13

Program Revenues				
Intergovernmental	\$0	\$125,000	\$0	\$125,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$125,000</b>	<b>\$0</b>	<b>\$125,000</b>

## Explanation of Revenues

\$ 100,000 - State: MCH Child and Adoles Grant  
 \$ 25,000 - Early Home Visit Grant

## Significant Program Changes

### Last Year this program was:

This program offer is new for FY20 as part of Public Health Division program offer reorganizations. In previous fiscal years, MCFH Administration was included as part of multiple program offers: 40054 Nurse Family Partnerships; 40055 Home and Community Based Health Consulting, and 40056 Healthy Families. This program offer continues to provide leadership and administrative support to these program offers, as well as 40058 Healthy Birth Initiatives, and does not represent new funding.

# Department Overview

Multnomah County Library’s mission: Empowering our community to learn and create

Multnomah County Library uses three-year priorities to shape what we do and explain how we do it. In a world that changes quickly, we build those priorities on four pillars that will not change.

Our pillars:

- Free access for all
- A trusted guide for learning
- The leading advocate for reading
- A champion for equity and inclusion

Our priorities:

- Making connections for a stronger community
- We help people learn, create, have fun and understand their world.
- We connect people to help solve shared problems.
- We help people build trust and work toward common goals.

Removing barriers

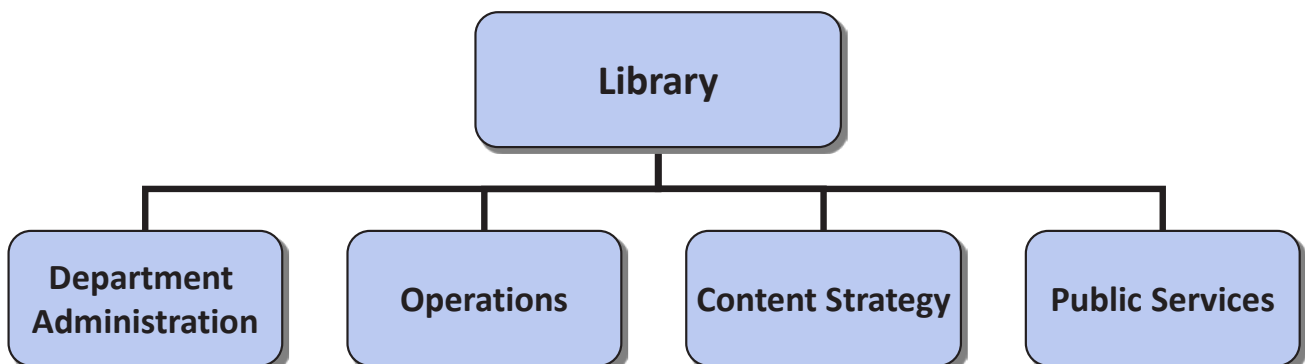
- We help people better understand each other and respect differences.
- We invest in people who face the greatest barriers in life.
- We use public resources in ways that make the greatest impact.

Helping meet basic needs

- We work to provide safe, welcoming and clean spaces that serve many different needs.
- We create services and partnerships that increase personal safety, food security, health, and access to shelter.

Honoring the past and embracing the future

- We have books and materials people want.
- We protect freedom of thought and expression.
- We use research and community input to shape our services and spaces.



### Budget Overview

The Library FY 2020 Adopted budget is \$88,124,357, a \$4.0 million increase from the FY 2019 Adopted budget. Library operations were funded exclusively through the independent Multnomah County Library District, which was enacted by voters in 2012. Changes from FY 2019 include the elimination of 6.70 FTE of vacant positions to meet a 1% constraint and an increase in the Library District property tax rate.

The Library’s FY 2020 proposed expenditures of \$88.1 million represent a 4.8% increase over FY 2019. There are no major programmatic changes in this budget. Notable budgetary changes include:

- The Library applied a 1% constraint to current service level. The constraint was met by eliminating 6.70 FTE of vacant positions.
- Library capital expenditures budgeted as Internal Services increased by \$1.1 million above expectation in order to address a maintenance backlog. These resources were reallocated from other areas.
- The Security program offer (80015) was moved from Operations to Public Services, and last year’s Equity & Inclusion program offer was folded in to the Library Director’s Office (80010) with no change in programmatic activity.

In the seventh year of the Library District, the Library will levy a rate of \$1.21 per \$1,000 of assessed value. This rate is an increase from the \$1.20 per \$1,000 of assessed value levied in FY 2019, but is in line with with the District’s original financial plan and below the voter approved maximum of \$1.24 per \$1,000 of assessed value. According to the most recent economic forecast for the Library, expenses will begin to grow faster than revenues in the near future, but annual budget surpluses are still forecast for the next two years.

Budget Trends	FY 2018	FY 2019	FY 2019	FY 2020	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	542.12	542.45	542.45	534.00	(8.45)
Personnel Services	\$49,177,348	\$51,765,474	\$53,868,963	\$56,260,369	\$2,391,406
Contractual Services	1,282,687	1,632,650	1,712,517	1,689,609	(\$22,908)
Materials & Supplies	10,300,798	12,118,964	12,428,063	11,863,623	(\$564,440)
Internal Services	16,055,954	14,189,402	16,070,816	18,290,756	\$2,219,940
Capital Outlay	<u>300</u>	<u>20,047</u>	<u>20,000</u>	<u>20,000</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$76,817,087</b>	<b>\$79,726,537</b>	<b>\$84,100,359</b>	<b>\$88,124,357</b>	<b>\$4,023,998</b>

Does not include cash transfers, contingencies or unappropriated balances. Due to the transition to a new ERP system, some services that were budgeted in Contractual Services or Materials & Supplies before FY 2020 are now in Internal Services.



## Successes and Challenges

Multnomah County Library looks to Fiscal Year 2020 with a focus on long-term sustainability, while working to reduce barriers to access wherever possible. As the community's diverse needs continue to shift and become more complex, the library is working to respond and serve in new ways. The library implemented new priorities in Fiscal Year 2019, based on revisions following a yearlong community engagement effort. The FY 2020 budget proposal includes a new set of performance measures centered around that feedback.

Fiscal Year 2019 has involved major technology initiatives for the library. In addition to the countywide Enterprise Resource Planning replacement project and its attendant training needs and business process changes, the library is also replacing another core system. The integrated library system (ILS) is the backbone of a library's technology environment, powering the catalog and tracking materials. Scheduled to launch in May 2019, the new ILS requires training for nearly every library staff member and will have limited impacts on meeting room availability and patrons' ability to place holds shortly before the system goes live.

The library will continue its long term space planning effort into FY 2020. Building on the vision in the Framework for Future Library Spaces, approved by the Board in 2017, the library has continued its due diligence to create models for costs, funding, timelines and staging of projects to achieve the framework's recommendations. Those models will continue to solidify in FY 2020, giving commissioners more detailed information and analysis on which to base decisions and proposals for next steps.

As one of the most public spaces in a community, issues that manifest in a community also manifest in its public library, often related to housing insecurity, addiction and mental health. In the current fiscal year, the library has taken new steps to respond to those issues, including increasing the number of library safety officers in public locations, placing sharps containers in public restrooms and providing the overdose-inhibiting drug Naloxone and training at all libraries. Library staff are engaging people experiencing homelessness to better understand their needs and desires, responding with innovative efforts like "Writing Through It," a group aimed at writers who have or who are experiencing homelessness or "Coffee and Conversation," a recurring forum for discussion and relationship building between staff and patrons.

Looking forward to FY 2020, the library will focus on the challenge presented by a structural deficit, in which costs rise faster than revenues. To mitigate the long term impacts of this deficit, the library reviews every vacancy to ensure that it meets current and future business and community needs, reallocating FTE to locations and programs that demonstrate the greatest community benefit or eliminating vacant positions. Because two-thirds of the library's expenses are personnel-related costs, managing vacancies is the most effective long-term way to control costs and limit the effects on library staff.

# Diversity, Equity and Inclusion

Multnomah County Library is working to create a system that equitably nurtures, empowers and lifts staff, patrons and the community to their highest potential. Libraries are uniquely positioned to address barriers to opportunity and access that disproportionately affect families in poverty and communities of color.

Fiscal Year 2020 will be the fourth year of the library’s equity and inclusion (E&I) program. Ongoing efforts include a “leading with race” series training for the library’s Executive Management Team, training for all library managers, membership on the Safety, Trust and Belonging Advisory Council and participating in the Workforce Equity Strategic Plan development process.

The library continued its effort to recruit from a diverse pool of potential applicants in FY 2019. These activities included in-person recruitment efforts at the American Library Association 2019 Midwinter and Annual conferences, a presentation about recruitment at the Joint Conference of Librarians of Color, and attendance at local job fairs and events including, the Diversity Employment Job Fair, the Urban League Job Fair, Pride and Good in the Hood.

The library recruited for the following positions in FY 2019: a Black cultural competency community engagement coordinator; two Black cultural competency library assistants; two Black cultural competency access services assistant; two bilingual Russian library assistants; bilingual Spanish youth librarian; and a bilingual Spanish senior office assistant for the Contact Center. Currently, nearly one in five library positions include a linguistic or cultural competency (though numerous other staff members who identify as people of color serve in non-KSA positions).

# Budget by Division

Division Name	FY 2020 General Fund	Other Funds	Total Division Cost	Total FTE
Department Administration	\$0	\$2,134,959	\$2,134,959	10.00
Operations	0	8,978,978	8,978,978	48.25
Content Strategy	0	22,880,542	22,880,542	44.25
Public Services	0	54,129,878	54,129,878	431.50
<b>Total Library</b>	<b>\$0</b>	<b>\$88,124,357</b>	<b>\$88,124,357</b>	<b>534.00</b>

## Department Administration

Department Administration provides executive leadership and strategic vision for the library system; connects the community with library materials and services; and develops and leads proactive equity and inclusion initiatives.

The Director's Office works with elected leaders, stakeholders, residents and staff to ensure that library services meet the needs of Multnomah County residents; provides timely and helpful communication about the library to the public and library staff; develops policies and procedures to help people use library services; and ensures that the library provides relevant information and exceptional customer service to patrons.

Equity and Inclusion leads the library's work to equitably nurture, empower and lift staff, patrons and the community to their highest potential.

## Significant Changes

There are no significant changes.

### Operations

Operations provides leadership and strategic vision for the operational support of the library system; manages the library's finance and budget operations; ensures accurate and timely delivery of library materials; coordinates building maintenance; promotes the resource management of highly qualified staff; provides flexible staffing coverage for the system; and provides opportunities for people to contribute their time and talents to Multnomah County Library.

Division Management works with stakeholders to ensure the efficient operation of Multnomah County libraries; Business Services manages the library's finance and budget operations; Facilities and Logistics coordinates the movement of books and materials among all 22 locations and coordinates buildings and grounds maintenance; Human Resources/Learning + Organizational Development provides assistance with all aspects of the employment cycle and coordinates training for staff and patrons; Systemwide Staffing provides flexible staffing coverage across the system; and Volunteer Services oversees the recruitment and placement of volunteers for all libraries, outreach programs and The Title Wave Used Bookstore.

### Significant Changes

The security program offer (80015) is now located in the Public Services Division. This will allow for better communication and integration of the security program with public services management and operations. The systemwide staffing cost center (803910) will be folded into the Human Resources cost center (803710). Both cost centers currently exist in the Human Resources program offer (80017), so there will be no change to that program offer.

### Content Strategy

Content Strategy aligns Collections & Technical Services, Marketing + Online Engagement, and IT Services for selection, curation and development of physical and digital library materials; web, print and social media content; and technology to engage patrons in meaningful ways.

Collections & Technical Services buys, catalogs, digitizes, curates and processes print and electronic/digital resources. It manages interlibrary loan, around 2,500 periodical subscriptions, more than 120 databases and online resources such as OverDrive and Hoopla.

Marketing + Online Engagement connects patrons to library services, programs and collections, through the website, mobile accessibility, social media and email marketing. This group develops brand identity, digital strategy, and patron feedback channels to provide guidance for strategic organizational decisions.

IT Services leads development and support for the library's technology strategy, ensuring robust and sustainable IT for progressive service to a diverse community. IT Services supports staff computing and over 1,000 computers and mobile devices for public use. Wired and wireless networking provides public access to the library catalog, databases, downloadable books/media and websites for job hunting, continuing education and government services.

### Significant Changes

There are no significant changes.

### Public Services

Public Services includes 19 neighborhood libraries, which are hubs of community engagement, learning and creativity; the contact center, which serves patrons via phone, email, text and chat; security, which provides support for a welcoming library atmosphere; and programming and outreach, which provides services both in libraries and throughout the county.

Neighborhood libraries are welcoming spaces with friendly staff that provide access to books, computers with internet access, free programs and meeting spaces. Patrons visited libraries more than 3.7 million times last year. These libraries provide patrons with access to over two million physical and digital materials and host storytimes in English, Spanish, Russian, Vietnamese, Mandarin, Cantonese and Somali. Dedicated volunteers contributed more than 60,000 hours of service last year.

Programming and outreach provides support for programming, community outreach, public training, creative learning, reader services and partnership initiatives. This includes the Every Child Initiative, which supports kindergarten readiness; the School Age Services team, which works with school districts and afterschool programs to improve student success; and the Summer Reading program, which served more than 100,000 youth in 2018. Adult outreach provides programs and services to older adults, new immigrants, adult learners, people with disabilities and people who are institutionalized or homeless.

### Significant Changes

This division now includes the Security program offer (80015). This will allow for better communication and integration of the security program with public services management and operations.

## Multnomah County Library

The following table shows the programs that make up the department's total budget. The individual programs follow their respective divisions.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>					
80010	Library Director's Office	\$0	\$2,134,959	\$2,134,959	10.00
<b>Operations</b>					
80012	Operations Division Management	0	609,814	609,814	4.00
80013	Business Services	0	1,195,919	1,195,919	6.75
80014	Facilities & Logistics	0	3,902,005	3,902,005	15.25
80016	Volunteer Svcs/Title Wave Bookstore	0	677,360	677,360	4.75
80017	Human Resources	0	2,593,880	2,593,880	17.50
<b>Content Strategy</b>					
80018	IT Services	0	8,353,605	8,353,605	1.00
80019	Marketing + Online Engagement	0	1,635,828	1,635,828	9.50
80020	Collections & Technical Services	0	12,891,109	12,891,109	33.75
<b>Public Services</b>					
80001	Central Library	0	14,018,996	14,018,996	113.75
80002	North County Libraries	0	5,164,590	5,164,590	42.75
80003	Inner/South County Libraries	0	11,993,714	11,993,714	102.50
80004	Mid/East County Libraries	0	12,181,516	12,181,516	102.00
80005	Contact Center	0	1,314,772	1,314,772	13.50
80006	School-Age Services	0	1,460,622	1,460,622	8.75
80007	Every Child Initiative	0	1,421,793	1,421,793	8.25
80008	Programming & Community Outreach	0	1,805,052	1,805,052	8.00
80009	Adult Outreach	0	1,160,461	1,160,461	8.25
80015	Security	0	1,641,037	1,641,037	15.00
80021	Programming & Outreach Management	0	258,101	258,101	1.00
80022	Public Services Division Management	0	<u>1,709,224</u>	<u>1,709,224</u>	<u>7.75</u>
<b>Total Library</b>		<b>\$0</b>	<b>\$88,124,357</b>	<b>\$88,124,357</b>	<b>534.00</b>

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**Department:** Library **Program Contact:** David Ratliff

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer is for Central Library, which serves the downtown core of the city of Portland along with visitors from the entirety of Multnomah County. Residents visited Central Library 664,000 times last year and benefited from diverse learning, cultural and recreational opportunities. Central Library also serves patrons throughout the county via email reference services provided by Central Library staff. This program offer includes circulation, stacks, and information services for Central Library as well as the John Wilson Special Collections.

### Program Summary

Central Library is a community anchor where patrons attend classes, programs, and forums that provide opportunities for neighbors to interact. County residents have access seven days per week, including some evenings, to nearly 675,000 books and other items from this library. Central Library patrons checked out or renewed over 1,750,000 physical items last year. Central Library empowers new immigrants, small business owners, seniors, students and people experiencing homelessness by providing informational tools to develop life skills.

Patrons develop critical life skills through job training resources, book groups, opportunities for civic engagement, and other library programs. To support critical life skill development and digital literacy, Central Library staff conducted 430 individualized patron appointments, a service with a 98% satisfaction rating.

Central Library provides opportunities for diverse neighbors to interact and engender a sense of community. The library partners with other organizations to improve work and life skills through free public programs. Central Library offers space for library-organized and community-led events to discuss ideas and issues of public interest. Central Library presented 740 programs to 11,000 participants last year. Libraries provide opportunities and resources for lifelong learning by providing free access to computers and high-speed wireless internet. Central Library provides 780,000 internet and wi-fi sessions annually on library and patron devices, including on 162 library-provided public computers. Central Library hosted 140 free computer classes and labs to help attendees develop life and job skills. Children and young people participate in storytimes and Summer Reading at Central Library. Nearly 6,500 people attended youth programs at Central Library last year.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of library visits	664,416	na/-	616,000	615,000
Outcome	% of patrons who found books and items they wanted	91%	90%	90%	90%

### Performance Measures Descriptions

New output measure for FY 2020: Number of library visits.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$10,486,989	\$0	\$10,748,437
Contractual Services	\$0	\$147,000	\$0	\$191,700
Materials & Supplies	\$0	\$193,383	\$0	\$139,394
Internal Services	\$0	\$2,769,755	\$0	\$2,939,465
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$13,597,127</b>	<b>\$0</b>	<b>\$14,018,996</b>
<b>Program Total:</b>	<b>\$13,597,127</b>		<b>\$14,018,996</b>	
<b>Program FTE</b>	0.00	119.50	0.00	113.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

Last Year this program was: FY 2019: 80001-19 Central Library

No significant changes

**Department:** Library **Program Contact:** David Ratliff  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 80003, 80004  
**Program Characteristics:**

### Executive Summary

This program offer is for the libraries serving the northern area of Multnomah County: Kenton, North Portland, Northwest and St. Johns libraries. Residents visited these libraries nearly 495,000 times last year and benefited from diverse learning, cultural, and recreational opportunities. These libraries serve a large number of African American and Spanish-speaking patrons with culturally relevant services.

### Program Summary

North County libraries are community anchors where patrons attend classes, programs, and community forums that provide opportunities for neighbors to interact. County residents have access seven days per week, including some evenings, to 154,000 books and other items at these libraries, including Spanish language materials. Patrons of North County libraries checked out or renewed more than 1.8 million physical items last year. North Portland Library features a new and growing Black Pacific Northwest Collection that currently features 207 titles.

Patrons develop critical life skills through job training resources, book groups, opportunities for civic engagement and other programs. North County libraries' language learning and educational programs improve employment opportunities and quality of life for those with low English proficiency and limited resources. To support critical life skill development and digital literacy, North County libraries' staff conducted 930 individualized patron appointments, a service with a 98% satisfaction rating.

North County libraries provide opportunities for people to interact through a variety of programs. North County libraries' volunteers from youth to seniors contributed over 7,000 hours of service last year, and community groups used the meeting rooms 290 times. Libraries serve as a bridge for the diverse cultures within Multnomah County. Residents who are non-English speakers enjoy over 320 bilingual programs and events each year at North County libraries. Libraries provide opportunities and resources for lifelong learning by providing free access to computers and high-speed wireless internet. North County libraries provided 95,000 internet sessions on 116 library public computing devices last year. Patrons developed life and job skills at 252 free computer classes and labs. Children and young people participate in storytimes, Summer Reading and after school activities in these libraries. More than 33,000 people attended youth programs at North County libraries last year.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of library visits	494,370	na/-	497,000	495,000
Outcome	% of patrons who found books and items they wanted	93%	90%	90%	90%

### Performance Measures Descriptions

New output measure for FY 2020: Number of library visits.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$3,894,062	\$0	\$4,177,999
Contractual Services	\$0	\$2,900	\$0	\$3,000
Materials & Supplies	\$0	\$76,679	\$0	\$53,375
Internal Services	\$0	\$864,238	\$0	\$930,216
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,837,879</b>	<b>\$0</b>	<b>\$5,164,590</b>
<b>Program Total:</b>	<b>\$4,837,879</b>		<b>\$5,164,590</b>	
<b>Program FTE</b>	0.00	42.75	0.00	42.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80002-19 North County Libraries

No significant changes.

**Department:** Library **Program Contact:** Aaron Bluitt

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:** 80002, 80004

**Program Characteristics:**

### Executive Summary

This program offer is for the libraries serving the southern and inner areas of the county: Albina, Belmont, Capitol Hill, Hillsdale, Hollywood, Sellwood-Moreland and Woodstock libraries. Last year, people visited these libraries more than 1.4 million times and benefited from diverse learning, cultural, and recreational opportunities. These libraries serve a diverse array of county residents including seniors, Chinese-speaking, and Somali-speaking residents.

### Program Summary

Inner/South County libraries are community anchors where patrons attend classes, programs, and community forums that provide opportunities for neighbors to interact. County residents have access seven days per week, including some evenings, to nearly 400,000 books and other items, including Chinese and Somali materials, at these libraries. Patrons of Inner/South County libraries checked out or renewed nearly 6.5 million physical and digital items last year.

Patrons develop critical life skills through job training resources, book groups, opportunities for civic engagement and other library programs. Inner/South County libraries' language learning and educational programs improve employment opportunities and quality of life for those with low English proficiency and limited resources. To support critical life skill development and digital literacy, Inner/South County libraries' staff conducted over 1,500 individualized patron appointments, a service with a 98% satisfaction rating.

Inner/South County libraries provide opportunities for neighbors to interact through a variety of programs. Volunteers at Inner/South County libraries, from youth to seniors, contributed more than 17,500 hours of service last year, and community groups used the meeting rooms 772 times. Libraries serve as a bridge for the diverse cultures within Multnomah County. Non-English speakers enjoyed 107 bilingual programs and events last year at Inner/South County libraries. Libraries provide opportunities and resources for lifelong learning by supplying free access to computers and high-speed wireless internet. Inner/South County libraries hosted over 185,000 internet sessions on 208 library public computing devices last year. Patrons developed life and job skills at 220 free computer classes and labs. Children and young people participate in storytimes, Summer Reading, and after school activities in these libraries. More than 81,000 people attended youth programs at Inner/South County libraries last year.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of library visits	1,403,749	na/-	1,395,000	1,390,000
Outcome	% of patrons who found books and items they wanted	92%	90%	90%	90%

### Performance Measures Descriptions

New output measure for FY 2020: Number of library visits.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$9,524,930	\$0	\$10,092,913
Contractual Services	\$0	\$10,300	\$0	\$7,000
Materials & Supplies	\$0	\$166,634	\$0	\$112,075
Internal Services	\$0	\$1,676,832	\$0	\$1,781,726
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,378,696</b>	<b>\$0</b>	<b>\$11,993,714</b>
<b>Program Total:</b>	<b>\$11,378,696</b>		<b>\$11,993,714</b>	
<b>Program FTE</b>	0.00	102.50	0.00	102.50

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80003-19 Inner/South County Libraries

No significant changes

**Department:** Library **Program Contact:** Rita Jimenez  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 80002, 80003  
**Program Characteristics:**

### Executive Summary

This program offer is for the libraries that serve the middle and eastern areas of the county: Fairview-Columbia, Gregory Heights, Gresham, Holgate, Midland, Rockwood and Troutdale libraries. Last year, people visited these libraries more than 1.2 million times and benefited from diverse learning, cultural and recreational opportunities. These libraries serve the most culturally and ethnically diverse part of the county, as well as the area with the highest concentration of poverty.

### Program Summary

Mid/East County libraries are community anchors where patrons attend classes, programs, and community forums that provide opportunities for neighbors to interact. County residents have access seven days per week, including some evenings, to 427,422 books and other items at these libraries including Spanish, Vietnamese, Chinese and Russian materials. Patrons of Mid/East County libraries checked out or renewed 3.8 million physical items last year.

Patrons develop critical life skills through job training resources, book groups, opportunities for civic engagement and other programs. Mid/East County libraries' language learning and educational programs improve employment opportunities and quality of life for those with low English proficiency and limited resources. To support critical life skill development and digital literacy, Mid/East libraries' staff conducted 2,835 individualized patron appointments, a service with a 98% satisfaction rating.

Mid/East County libraries provide opportunities for neighbors to interact through a variety of programs. Mid/East County Libraries volunteers from youth to seniors contributed over 21,000 hours of service last year, and community groups used the meeting rooms more than 1,300 times. Libraries serve as a bridge for the diverse cultures within Multnomah County. Non-English speakers enjoy over 1,800 bilingual programs and events each year at Mid/East County libraries. Libraries provide opportunities and resources for lifelong learning by providing free access to computers and high-speed wireless internet. Mid/East County libraries provided 220,557 internet sessions on 252 library public computing devices last year. Patrons developed life and job skills at over 500 free computer classes and labs. Children and young people participate in storytimes, Summer Reading, and after school activities in these libraries. More than 69,000 people attended youth programs at Mid/East libraries last year.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of library visits	1,212,950	na/-	1,184,000	1,180,000
Outcome	% of patrons who found books and items they wanted	92%	90%	90%	90%

### Performance Measures Descriptions

New output measure for FY 2020: Number of library visits.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$9,395,868	\$0	\$10,004,417
Contractual Services	\$0	\$12,950	\$0	\$14,500
Materials & Supplies	\$0	\$197,096	\$0	\$111,890
Internal Services	\$0	\$1,924,585	\$0	\$2,050,709
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,530,499</b>	<b>\$0</b>	<b>\$12,181,516</b>
<b>Program Total:</b>	<b>\$11,530,499</b>		<b>\$12,181,516</b>	
<b>Program FTE</b>	0.00	102.50	0.00	102.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80004-19 Mid/East County Libraries

No significant changes



**Department:** Library  
**Program Offer Type:** Support

**Program Contact:** David Ratliff  
**Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Contact Center serves patrons who want to connect with library services via phone and email. A team of virtual service experts helps patrons manage their library accounts, register for programs and classes, check out library e-content, provides answers to basic questions and makes referrals for more complex questions.

### Program Summary

The Contact Center answered more than 145,000 questions via phone related to library accounts, service information and quick fact checks. Contact Center staff also responded to more than 14,000 similar information requests received via email. Contact Center staff answer more than 90% of all incoming questions at the first point of contact, referring questions that need specialized assistance to appropriate staff for follow-up. Contact Center staff serve patrons in both English and Spanish, while using IRCO phone translation services to assist patrons in other languages. This service simplifies access for the public by providing a single phone number for all Multnomah County Library users. The Contact Center allows staff in public service locations to concentrate on serving the patrons at those locations.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of contacts (phone, email, chat, text) answered by contact center staff	145,000	200,000	150,000	150,000
Outcome	% of contacts answered by contact center staff without the need for a referral	90%	90%	90%	90%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,182,774	\$0	\$1,260,927
Materials & Supplies	\$0	\$17,599	\$0	\$13,150
Internal Services	\$0	\$44,633	\$0	\$40,695
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,245,006</b>	<b>\$0</b>	<b>\$1,314,772</b>
<b>Program Total:</b>	<b>\$1,245,006</b>		<b>\$1,314,772</b>	
<b>Program FTE</b>	0.00	13.50	0.00	13.50

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

Last Year this program was: FY 2019: 80005-19 Contact Center

No significant changes.

**Department:** Library **Program Contact:** Jennifer Studebaker  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** Measure 5 Education

### Executive Summary

School-Age Services improves kindergarten through high school students' reading and information literacy by training students to use public library online research tools effectively; by connecting students in libraries or through outreach with dynamic book collections and reading motivation programs; and by offering curriculum support, training and resources for their educators, parents and caregivers. Services are targeted toward students at risk of low literacy. This program contains the School Corps and Books 2 U work units.

### Program Summary

School-Age Services staff are trained in research, book-talking and reading promotion. They serve students, educators, parents and caregivers in public and private schools, community agencies, county programs, treatment facilities and other locations serving school-age youth.

Staff provide expertise, information, books, training, recreational programs and technical support to increase students' and invested adults' literacy and information skills. Thousands of quality children's books are delivered to schools and community agencies. School Corps provides direct service to students, parents and educators during the school day, afterschool and during the summer. Librarians collaborate with educators to increase students' academic success and literacy in the county's K-12 schools and SUN programs by training students to use public library resources effectively and efficiently for research and pleasure reading.

Books 2 U staff and volunteers introduce students to high-interest books in the classroom through booktalking programs and by providing paperback copies of books they promote. Their goal is to introduce Multnomah County Library as an educational partner and significant resource. To that end, Books 2 U staff attend and present at parent and family night programs; provide library cards to children served; and promote the library's Summer Reading program and other library services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Youth served in Books 2 U & School Corps (duplicated)	62,677	47,280	55,000	45,000
Outcome	% of students whose research skills increase after School Corps presentation	93%	90%	90%	90%
Quality	% of teachers indicating that they will ask for School Corps services again	100%	95%	95%	95%
Outcome	% of teachers who report Books 2 U helps their students develop a desire and motivation to read	95%	95%	95%	95%

### Performance Measures Descriptions

Performance Measure 4: data source is the annual Books 2 U survey led by NPC Research. Survey is now biennial; Previous Year Actual uses most recent survey data available.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,385,406	\$0	\$1,076,782
Contractual Services	\$0	\$5,500	\$0	\$36,300
Materials & Supplies	\$0	\$278,750	\$0	\$304,136
Internal Services	\$0	\$50,628	\$0	\$43,404
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,720,284</b>	<b>\$0</b>	<b>\$1,460,622</b>
<b>Program Total:</b>	<b>\$1,720,284</b>		<b>\$1,460,622</b>	
<b>Program FTE</b>	0.00	11.50	0.00	8.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80006-19 School-Age Services

No significant changes

**Department:** Library **Program Contact:** Annie Lewis

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** Measure 5 Education

### Executive Summary

Every Child Initiative (ECI) prepares children for kindergarten by offering education, motivation and support for parents and caregivers to provide language and literacy experiences that foster children's brain development and early literacy skills. This builds the foundation for learning to read. Experts in early learning and literacy, ECI staff deliver engaging programs and hands-on literacy activities that open up the wonder of stories, music, culture and play. Services are directed toward families living in poverty and those learning English.

### Program Summary

Every Child staff, who are trained in child development, brain development and early reading research, visit parents and caregivers in social service agencies, childcare centers, Head Start centers, teen parent programs, treatment facilities, and other locations serving adults with children birth to age five. They teach parents and caregivers easy techniques to prepare their preschool children for learning to read. Classes, taught in English, Spanish, Russian, Chinese, Russian and Vietnamese, show adults how to read, talk, sing, play and rhyme with babies, toddlers and preschoolers so that children develop the pre-reading skills they need before they enter kindergarten.

From birth to age five, children go through a critical window for brain development that supports literacy. Reading, talking, singing, playing, writing and rhyming with children during this sensitive time determines a child's future as a reader. Many parents and caregivers don't know how early this window opens — and closes — and how tremendous an impact simple actions can have on their children's future ability to read. Children must have early experiences with language, books, and writing tools to become successful readers.

Research shows that children most at risk for being unprepared for kindergarten are those who live in poverty, have parents who speak a language other than English in the home, have few books in their homes, and whose mothers have limited education and/or low literacy. These children start kindergarten with significantly lower cognitive skills than their more advantaged peers because they likely lacked the opportunity to have rich language and literacy experiences in the five years before they attend school. Every Child Initiative reaches these parents on-site and shows them easy ways to help their children gain pre-reading skills during these important years. Program evaluations show that parents and caregivers gain clear knowledge of their role in their children's preparedness for reading.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of parents, caregivers, and adults served in Every Child Initiative outreach	20,456	21,000	21,000	21,000
Outcome	% of participants who show an increase in five reading and literacy activities	61%	70%	61%	65%
Output	Number of books circulated in Every Child Initiative	1,614,496	1,612,000	1,417,000	1,417,000

### Performance Measures Descriptions

**Output:** The number of parents, caregivers, and adults served in all Every Child Initiative outreach, including those who receive welcome baby gifts for their new baby.

**Outcome:** The evaluation measures an increase in five behaviors: 1. Reading and sharing books together; 2. Talk about pictures and new words; 3. Rhyming or singing together; 4. Children play with books or pretend to read; 5. Children ask to be read to. The source of the data is the biannual Every Child a Reader program participant survey.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$920,554	\$0	\$1,002,066
Contractual Services	\$0	\$12,500	\$0	\$49,900
Materials & Supplies	\$0	\$306,898	\$0	\$323,557
Internal Services	\$0	\$43,753	\$0	\$46,270
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,283,705</b>	<b>\$0</b>	<b>\$1,421,793</b>
<b>Program Total:</b>	<b>\$1,283,705</b>		<b>\$1,421,793</b>	
<b>Program FTE</b>	0.00	8.25	0.00	8.25

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80007-19 Every Child Initiative

No significant changes.

**Department:** Library

**Program Contact:** June Bass

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Programming and Community Outreach (PCO) leads the library's public programming and training, community outreach, reader services, Summer Reading program and partnership initiatives. PCO ensures that activities align with library priorities, is accountable for resource allocation, coordinates and supports staff engaged in this work and assists in research and evaluation. Responsibilities include program development, scheduling, grant writing, curation, volunteer coordination, staff and public training, event/project management, program coordination, website content, and fiscal oversight.

### Program Summary

Programming and Community Outreach meets the needs of library users by providing in-person and virtual activities, experiences, learning opportunities and exhibitions that complement library materials and services. Programs include arts and cultural programming for all ages, author and literature programs, book discussions, and creative learning activities for all ages. PCO staff provided the professional and technical expertise to make more than 12,200 programs possible that served over 209,000 people.

Community outreach extends library services and programs to a broader section of the community by taking services and programs out of the library and into the particular environments of community members who have barriers to using the library. This work ranges from outreach programs and services for new immigrants and marginalized populations to promoting the library and providing information services, community events and presentations to local organizations.

Reader services is responsible for establishing, implementing and keeping the vision for advising the community about reading and the library's content offerings. Staff lead systemwide training, program and service initiatives in this area and work with other divisions to engage the community and generate excitement around reading.

Summer Reading oversees Oregon's largest annual youth reading incentive program. More than 111,000 babies, kids and teens participated in the 2018 program, representing 73% of all youth in Multnomah County. The library partners with school districts, businesses, community organizations and The Library Foundation to encourage youth to build their habit of reading during the summer months. By reading during the summer, youth retain or even improve their reading skills gained during the school year. Summer Reading also engages over 800 youth volunteers serving nearly 15,000 hours of time to administer the program at all 19 library locations.

PCO also leverages partnerships to enhance all of this work. Partnerships make programs like Everybody Reads possible. Partners include, but are not limited to, Oregon Humanities, Portland State University, Portland Community College, Delta Society, Portland Opera, Home Forward and Multnomah County's Aging and Disability Services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of programs offered	12,288	na/-	12,250	12,250
Outcome	% of attendees who say library programs connect them to their community	43%	45%	43%	43%
Outcome	% of attendees who say they learned something new at a library program	79%	80%	79%	79%
Quality	% of attendees of library programs who rate them as good or excellent	97%	97%	97%	97%

### Performance Measures Descriptions

New output measure for FY 2020: Number of programs offered.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$945,445	\$0	\$1,048,758
Contractual Services	\$0	\$224,500	\$0	\$328,000
Materials & Supplies	\$0	\$344,297	\$0	\$394,407
Internal Services	\$0	\$30,264	\$0	\$33,887
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,544,506</b>	<b>\$0</b>	<b>\$1,805,052</b>
<b>Program Total:</b>	<b>\$1,544,506</b>		<b>\$1,805,052</b>	
<b>Program FTE</b>	0.00	8.00	0.00	8.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80008-19 Programming & Community Outreach

No significant changes



**Department:** Library

**Program Contact:** Carole Scholl

**Program Offer Type:** Existing Operating Program

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Adult Outreach provides library services and programs to Multnomah County residents underserved by traditional library means, including older and homebound adults, new immigrants, people with disabilities, adult learners, and those who are institutionalized, incarcerated or homeless. Adult Outreach delivers books and other materials to people who are homebound; provides resources and conducts classes and other programs for immigrants, new readers, older adults and GED seekers; and partners with community agencies.

### Program Summary

Adult Outreach delivers books and other library materials and services to Multnomah County residents who are homebound, or who live in assisted living facilities, retirement homes, adult care homes, shelters, transitional homes or jails (the last in partnership with Multnomah County Sheriff's Office).

Adult Outreach connects these people with their community by providing library services and programs, such as book discussion groups and instruction. Adult Outreach, in partnership with literacy organizations, supports people whose first language is not English — or who may not read or write well in English — by providing assistance, referrals, resources, and library programs, including citizenship classes, GED labs, literacy tutoring and Talk Time sessions (English conversation practice).

Delivering books, reading to residents of assisted living units, leading book discussion groups for seniors, teaching citizenship classes, leading book groups in the jails, connecting patrons with computer and e-reader classes and leading English conversation practice in neighborhood libraries also provide meaningful opportunities for volunteers, working with outreach staff, to contribute significantly to the lives of vulnerable residents.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Book discussion groups for seniors	276	220	220	200
Outcome	% of homebound patrons who report that library service reduces social isolation	90%	80%	90%	80%
Output	Book deliveries to homebound patrons	700	700	700	750

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$937,585	\$0	\$1,029,367
Contractual Services	\$0	\$0	\$0	\$4,900
Materials & Supplies	\$0	\$69,750	\$0	\$81,088
Internal Services	\$0	\$40,367	\$0	\$45,106
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,047,702</b>	<b>\$0</b>	<b>\$1,160,461</b>
<b>Program Total:</b>	<b>\$1,047,702</b>		<b>\$1,160,461</b>	
<b>Program FTE</b>	0.00	8.25	0.00	8.25

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

Last Year this program was: FY 2019: 80009-19 Adult Outreach

No significant changes.

**Department:** Library **Program Contact:** Vailey Oehlke  
**Program Offer Type:** Administration **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Library Director's Office provides executive leadership and strategic vision for the library system by working with the Board of County Commissioners (BCC), the Multnomah County Library District Board (MCLDB), the Library Advisory Board (LAB), stakeholders, community organizations, businesses, private citizens and staff to ensure that library services are responsive to the evolving needs of Multnomah County residents. This program offer is also responsible for the leadership and direction of the library's equity and inclusion program.

### Program Summary

The Library Director's Office envisions the library's role and future in the community; translates that vision into strategic direction in partnership with the BCC, MCLDB, the community, and the LAB; represents Multnomah County Library on local, regional and national levels, working with other libraries and library organizations; partners with The Library Foundation and Friends of the Library to enhance public support and fundraising efforts; leads policy work with the senior management team; and leads in achieving enterprise-wide objectives with county peers.

Since the 2012 voter approval of a library district to fund library programs and services, the Library Director's Office has coordinated with key stakeholders and partners to maintain governance, budgeting and operational practices that comply with applicable statutes and policies. This office is directly responsible to Multnomah County residents for the effectiveness and efficiency of the library system.

The Library Director's Office develops and leads a sustainable process to implement, continuously assess and adapt the Library's goals related to diversity, equity and inclusion. This includes creating and implementing metrics, monitoring, and reporting systems to effectively benchmark organizational progress.

The Library's Equity and Inclusion Manager leads the library's equity and inclusion program and represents the library on the county's Workforce Equity Strategic Plan committee. The manager builds effective collaborations with internal and external partners to leverage resources, advise on organizational policy, advance business needs and carry out organizational initiatives.

This program develops training for front-line staff and managers on how to work effectively with the Library's diverse staff and patrons in a culturally responsive manner. The program also works to foster a common vocabulary and understanding around diversity, inclusion and equity. It also ensures diversity and inclusion are embedded in recruitment, hiring, retention, performance management, leadership development and all other aspects of human capital management.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Retention rate for employees of color	94%	96%	94%	94%
Outcome	Patron satisfaction with the library	96%	95%	95%	95%
Outcome	Recent library users who say they would recommend the library to others (Net Promoter Score)	86	na/-	87	85
Outcome	% of library staff who agree that people in their work unit value diversity.	93%	93%	90%	90%

### Performance Measures Descriptions

New measure for FY 2020: Recent library users who say they would recommend the library to others (Net Promoter Score).

Net Promoter Score is an ongoing email survey that routinely samples recent library users to get their feedback: "How likely are you to recommend the library to others?"

Performance Measure 4: Results from library respondents to the biennial Countwide Employee Survey.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,630,189	\$0	\$1,729,654
Contractual Services	\$0	\$260,500	\$0	\$248,659
Materials & Supplies	\$0	\$147,866	\$0	\$95,001
Internal Services	\$0	\$59,653	\$0	\$61,645
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,098,208</b>	<b>\$0</b>	<b>\$2,134,959</b>
<b>Program Total:</b>	<b>\$2,098,208</b>		<b>\$2,134,959</b>	
<b>Program FTE</b>	0.00	10.00	0.00	10.00

Program Revenues				
Intergovernmental	\$0	\$84,065,359	\$0	\$88,089,357
Other / Miscellaneous	\$0	\$35,000	\$0	\$35,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$84,100,359</b>	<b>\$0</b>	<b>\$88,124,357</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80010-19 Library Director's Office

The Fiscal Year 2019 program offer for Equity and Inclusion (80011) has been combined with this program offer.

**Department:** Library **Program Contact:** Don Allgeier

**Program Offer Type:** Administration **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Operations Division Management oversees the Business Services, Facilities & Logistics, Volunteer Services, and Human Resources programs. The Operations Division Management program includes a unit that provides research and evaluation for Multnomah County Library. This division supports the financial, physical, and human operations of Multnomah County Library.

### Program Summary

Operations Division Management provides oversight and accountability for the internal services of Multnomah County Library. This program is responsible for the coordination of program managers in the Human Resources, Facilities & Logistics, and Business Services work units. This division partners with Multnomah County Facilities, Human Resources, and Finance to ensure the efficient operation of the library system.

Operations Division Management encompasses an evaluation unit, as well. This unit provides analysis to support management decision-making and coordinates data collection for the organization.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of program evaluation and research projects completed	0	4	2	4
Outcome	Library manager satisfaction with Operations Division Support	88%	90%	88%	88%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$526,791	\$0	\$566,167
Contractual Services	\$0	\$0	\$0	\$20,000
Materials & Supplies	\$0	\$7,100	\$0	\$4,500
Internal Services	\$0	\$18,592	\$0	\$19,147
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$552,483</b>	<b>\$0</b>	<b>\$609,814</b>
<b>Program Total:</b>	<b>\$552,483</b>		<b>\$609,814</b>	
<b>Program FTE</b>	0.00	4.00	0.00	4.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80012-19 Operations Division Management

No significant changes

**Department:** Library **Program Contact:** Chung Fun Leung  
**Program Offer Type:** Administration **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Business Services manages and provides accounts payable, accounts receivable, fiscal reporting, budget preparation, grant reporting, purchasing and contracts for the entire library system.

### Program Summary

Business Services manages the annual budget preparation and submission process; monitors and adjusts the budget throughout the fiscal year; manages contracts, procurement and grants; processes and oversees accounts payable/receivable; and administers purchasing cards and cash management for the library system. This program ensures that library funds are budgeted, received, accounted for and spent appropriately.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of vendor invoices processed	10,242	10,100	10,100	10,100
Outcome	% of vendor invoices paid within 30 days of invoice date	90%	91%	90%	90%
Outcome	% of customer payments posted within 5 business days of receipt	99%	99%	99%	99%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,201,892	\$0	\$1,070,316
Contractual Services	\$0	\$14,000	\$0	\$14,000
Materials & Supplies	\$0	\$71,850	\$0	\$62,769
Internal Services	\$0	\$58,504	\$0	\$48,834
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,346,246</b>	<b>\$0</b>	<b>\$1,195,919</b>
<b>Program Total:</b>	<b>\$1,346,246</b>		<b>\$1,195,919</b>	
<b>Program FTE</b>	0.00	6.50	0.00	6.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80013-19 Business Services

No significant changes.



**Department:** Library  
**Program Offer Type:** Support

**Program Contact:** Lisa Canavan  
**Program Offer Stage:** As Adopted

**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Logistics ensures that library books and materials move quickly and accurately among all 22 library locations, including 19 libraries, Library Administration, Isom Operations Center and the Title Wave Used Bookstore. Library Facilities coordinates the maintenance of the buildings and grounds in an effort to maintain safe, secure and welcoming facilities.

**Program Summary**

Logistics operates the centralized Sort Center and delivery operations that move library materials to and among library locations, enabling residents to have quick access throughout Multnomah County. This program operates a seven-day-per-week delivery system that provides delivery to 40 service points each weekday, delivering and receiving all library books and materials, interoffice mail, U.S. mail, library supplies and bank deposits.

Library Facilities provides central coordination and direction of repair and maintenance activities among county facilities staff, telecommunications, contractors and vendors for 22 library locations. This program serves all library staff and the public as expert resources on ADA-compliant building access, ergonomics, and workflow management; assists the Security Manager and provides support for security policy development and implementation. This program manages risk and safety for the library in coordination with the security program.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Crates of books, mail and supplies moved annually	230,857	215,000	232,500	230,000
Outcome	Staff satisfaction with delivery system	95%	95%	95%	95%

**Performance Measures Descriptions**

Output: A crate is the library's unit of measurement for transporting library materials, mail, supplies and other items.

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,274,332	\$0	\$1,425,612
Contractual Services	\$0	\$2,000	\$0	\$4,500
Materials & Supplies	\$0	\$161,911	\$0	\$55,000
Internal Services	\$0	\$1,215,006	\$0	\$2,396,893
Capital Outlay	\$0	\$20,000	\$0	\$20,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,673,249</b>	<b>\$0</b>	<b>\$3,902,005</b>
<b>Program Total:</b>	<b>\$2,673,249</b>		<b>\$3,902,005</b>	
<b>Program FTE</b>	0.00	14.75	0.00	15.25

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80014-19 Facilities & Logistics

This program offer includes a new Facilities Manager position that will be accountable for this program offer.

**Department:** Library  
**Program Offer Type:** Support

**Program Contact:** Chris Linn  
**Program Offer Stage:** As Adopted

**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Library Security facilitates and supports the library's efforts to create safe and welcoming environments for patrons and staff at 22 locations. Priorities include security staffing; safety and security training; and related facilities resources, IT resources, and supplies. Security develops and implements related policies and procedures in collaboration with library executive leadership.

### Program Summary

Security coordinates the staffing of Library Safety Officers at multiple library locations. Security personnel support library operations by monitoring library facilities, preventing and resolving safety and security concerns, fostering compliance with the library's behavior rules, issuing and enforcing exclusions, coordinating efforts with law enforcement and other support agencies, and providing security training.

Security coordinates related training for library and security personnel. General and role-specific training programs are designed to aid personnel in their efforts to ensure library resources are used safely and appropriately. Within these programs, personal safety is a priority.

Security helps coordinate the acquisition, development, and use of safety and security related material and resources including security cameras, inventory control systems, building access systems, Library Safety Officer uniforms and equipment, and security reporting resources.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Security training opportunities offered	36	28	35	38
Outcome	Library manager satisfaction with support from security team support	90%	90%	84%	90%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,373,408	\$0	\$1,462,988
Contractual Services	\$0	\$9,500	\$0	\$8,000
Materials & Supplies	\$0	\$120,400	\$0	\$19,400
Internal Services	\$0	\$45,787	\$0	\$150,649
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,549,095</b>	<b>\$0</b>	<b>\$1,641,037</b>
<b>Program Total:</b>	<b>\$1,549,095</b>		<b>\$1,641,037</b>	
<b>Program FTE</b>	0.00	15.00	0.00	15.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80015-19 Security

This program offer is being moved from the Operations Division to the Public Services Division.

**Department:** Library **Program Contact:** Becky Blumer  
**Program Offer Type:** Support **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Volunteer Services provides opportunities for more than 2,100 people who contribute their time and talents to Multnomah County Library each year. Volunteers are active across the library system, including the 19 neighborhood libraries, the Isom Operations Center, the Title Wave Used Bookstore, and at various outreach programs. The Title Wave Used Bookstore generates revenue for the library through the sale of discarded books and other materials. Opened in 1988, the Title Wave Used Bookstore provides an effective means of recycling the library's collection back into the community.

**Program Summary**

Volunteer Services oversees the recruitment, screening, placement, performance management, position creation, volunteer policies and recognition of over 2,100 volunteers. Volunteers enhance library services at locations throughout the community. The scope of volunteer opportunities includes booktalking with Books 2 U; conducting citizenship classes; delivering library materials to shelters through Adult Outreach; teaching basic computer skills; and searching for reserved items at all library locations. Volunteers share their skills and are given responsibilities that engage them in their libraries and neighborhoods. About 50 percent of library volunteers are students 10-18 years old. Students and adults are given an experience that provides life skills and engages them in their community. Last year, volunteers contributed more than 64,000 hours of time to the library.

The Title Wave Used Bookstore recycles and sells discarded library books and materials to the community. The store is open 40 hours per week and is staffed by 65 monthly volunteers who are supported by one paid staff person. Because the used books are sold at reasonable prices, many of the Title Wave Used Bookstore's regular customers are teachers/media specialists buying books for their classrooms and libraries. Many home-school families buy books for educational purposes as well. Last year, the Title Wave Used Bookstore generated over \$141,000 in revenue.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Hours contributed by volunteers	64,360	67,000	67,000	68,000
Outcome	% of student volunteers who report using their volunteer service for school/community requirement	38%	38%	34%	34%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$496,446	\$0	\$600,241
Contractual Services	\$0	\$13,300	\$0	\$12,900
Materials & Supplies	\$0	\$47,759	\$0	\$44,595
Internal Services	\$0	\$18,817	\$0	\$19,624
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$576,322</b>	<b>\$0</b>	<b>\$677,360</b>
<b>Program Total:</b>	<b>\$576,322</b>		<b>\$677,360</b>	
<b>Program FTE</b>	0.00	4.25	0.00	4.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80016-19 Volunteer Svcs/Title Wave Bookstore

No significant changes.

**Department:** Library

**Program Contact:** Johnette Easter

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Human Resources promotes resource management of highly qualified staff through the employment life cycle, including recruiting, hiring and retaining. This program consults with employees and managers; provides technical assistance, time entry and staff training/development; and plans for future workforce needs.

### Program Summary

Human Resources supports the library's mission and goals by ensuring HR systems are collaboratively implemented; assisting and consulting with over 600 regular and 90 on-call/temporary employees and supervisors; and assessing, developing and coordinating employee training needs and learning opportunities. This program provides internal consultation to managers and employees on a wide range of HR, employee and labor relations issues, including performance management to ensure a highly functioning workforce; recruitment to attract highly qualified, diverse applicants to serve the changing needs of county residents; legal, contractual and policy compliance to reduce liability and the costs of unlawful employment actions; and accurate time entry to ensure that employees are paid correctly for hours worked.

Human Resources work with staff and managers to assess organizational needs; provide strategic direction, succession and workforce planning; and provide learning opportunities to ensure highly qualified and competent staff who have the requisite skills to serve their customers. This program partners with Central HR/Labor Relations to develop and implement integrated HR initiatives and solutions.

Human Resources includes the Learning + Organizational Development work group. This work group coordinates library training throughout the system, supports organizational growth through targeted development programs, and supports work groups with planning and team-building.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of library staff who agree that they receive sufficient training and education to do their jobs effectively	89%	89%	89%	89%
Outcome	% of library staff who agree that they can make a difference by working here	94%	91%	92%	92%
Outcome	% of incoming staff participating in New Employee Orientation equity training	95%	85%	95%	95%

### Performance Measures Descriptions

Both measures: Results from library respondents to the biennial Countywide Employee Survey. Previous Year Actual represents the latest survey results.

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$2,350,948	\$0	\$2,265,851
Contractual Services	\$0	\$52,900	\$0	\$26,500
Materials & Supplies	\$0	\$202,700	\$0	\$228,403
Internal Services	\$0	\$86,923	\$0	\$73,126
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,693,471</b>	<b>\$0</b>	<b>\$2,593,880</b>
<b>Program Total:</b>	<b>\$2,693,471</b>		<b>\$2,593,880</b>	
<b>Program FTE</b>	0.00	19.70	0.00	17.50

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80017-19 Human Resources/Learning + Organizational Development/Systemwide

The Systemwide Staffing cost center (803910) is being combined into the Human Resources cost center (803710) within this program offer.



**Department:** Library

**Program Contact:** Jon Worona

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

IT Services provides leadership and development resources for the library's technology vision and digital strategy, ensuring that the library has robust and sustainable information technology that supports innovative and progressive service to Multnomah County's diverse community. IT Services maintains computers, mobile devices, and equipment for public and staff use; wired and wireless networks across all library locations; and applications integration, development, security, and support for patron learning, creation and staff productivity.

### Program Summary

IT Services works with partners inside and outside the library to plan, define and develop leading edge technology solutions that align with patron and staff needs and support library priorities.

IT Services maintains more than 1,000 public computers and mobile devices, related software and servers, high-speed internet access and a wireless network in library facilities for use by the general public. Library users can search the catalog of books and other materials; view and manage their library accounts; download e-books; stream audio and video content; use research databases and other electronic resources; and access the internet for educational, business and personal use. Children and adults use library computers and tablets to do personal and business research, complete homework assignments, apply for jobs, find recreational reading, communicate with government agencies, manage their library accounts and participate in the social web.

Public computers also provide office automation software, such as word processing, to accomplish personal, business or school work. The library has computers and software in training rooms, teen after school homework lounges, and for checkout to be used in libraries with the library's public wireless network. Many public computer users have no access to a computer or high speed internet at home, so the library is their only window to the world of 21st century technology, communication and information.

IT Services also maintains more than 600 computers, related equipment and software for library staff, supporting general office computing and library systems such as the library catalog, patron database, circulation system, materials acquisition system, website, provision of electronic resources and other internal operations.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of public computers	935	1,036	1,036	1,036
Outcome	Patron satisfaction with availability of public computers	94%	na/-	92%	92%
Output	Number of free computer and wi-fi sessions	2,553,476	na/-	2,300,000	2,300,000

### Performance Measures Descriptions

New measures for FY 2020: Patron satisfaction with availability of public computers, and Number of free computer and wi-fi sessions.

Performance Measure 3: The library's public wi-fi network is accessed by people using their own devices as well as those using library loaner laptops and tablets; library wi-fi is an important service to bridge the digital divide.

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$203,127	\$0	\$220,288
Contractual Services	\$0	\$100,000	\$0	\$300
Materials & Supplies	\$0	\$1,105,100	\$0	\$925,388
Internal Services	\$0	\$6,923,058	\$0	\$7,207,629
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,331,285</b>	<b>\$0</b>	<b>\$8,353,605</b>
<b>Program Total:</b>	<b>\$8,331,285</b>		<b>\$8,353,605</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

Last Year this program was: FY 2019: 80018-19 IT Services

No significant changes

**Department:** Library **Program Contact:** Jeremy Graybill**Program Offer Type:** Support **Program Offer Stage:** As Adopted**Related Programs:****Program Characteristics:****Executive Summary**

Marketing + Online Engagement connects the community to library services, resources, programs and collections. As the library's in-house creative and digital strategies team, the section serves the public by maintaining the web portal to library services; creating helpful, effective and compelling informational and promotional materials; analyzing and deploying emerging digital communication strategies; and developing and leveraging the library's brand into more powerful connections with the community.

**Program Summary**

Marketing + Online Engagement provides essential services to the library and the more than 21,000 patrons who use it each day, either online or in person. The section employs integrated strategies to create lasting, meaningful relationships with the community; oversees the library's public website, online presence in social media, email marketing and other channels to create rewarding and beneficial online experiences and value; oversees the library's brand and identity; develops strategies to promote library use; creates mechanisms to gather patron feedback and input; maintains the library's mobile experience; and provides critical guidance and input into systemwide strategic decisions.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Active cardholders	253,485	260,000	266,243	260,000
Outcome	Market penetration (active cardholder households as a percentage of all households in the service area)	43%	na/-	44%	44%

**Performance Measures Descriptions**

Output: Active cardholders are those who have used their library card to check out materials or use the library's computers in the past year.

New outcome measure FY 2020: Market penetration (active cardholder households as a percentage of all households in the service area).

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,281,621	\$0	\$1,373,604
Contractual Services	\$0	\$36,000	\$0	\$94,500
Materials & Supplies	\$0	\$220,870	\$0	\$125,760
Internal Services	\$0	\$41,890	\$0	\$41,964
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,580,381</b>	<b>\$0</b>	<b>\$1,635,828</b>
<b>Program Total:</b>	<b>\$1,580,381</b>		<b>\$1,635,828</b>	
<b>Program FTE</b>	0.00	9.50	0.00	9.50

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80019-19 Marketing + Online Engagement

No significant changes

**Department:** Library  
**Program Offer Type:** Support

**Program Contact:** Javier Gutierrez  
**Program Offer Stage:** As Adopted

**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Collections & Technical Services staff select, purchase, catalog and process new books, DVDs, audiobooks, e-books, streaming audio/video and other material added to the library materials collection in order to meet the informational, recreational and cultural needs of Multnomah County residents. This section manages the materials budget, interlibrary loan and digital curation.

### Program Summary

Collections & Technical Services staff enable patrons to access a wide variety of books and media, both in print and electronic form.

Selection staff decide what materials to buy using professional reviews, patron suggestions, staff input and established criteria. Their purchasing decisions reflect the diverse interests and needs of Multnomah County residents. Acquisitions staff place orders with vendors, receive shipments, approve invoices for payment and monitor the various funds that make up the library materials budget.

Cataloging staff create bibliographic description records, create metadata schema and assign classification numbers to enable discovery in the online catalog. Cataloging/Processing staff prepare each item for shelving and checkout. This includes applying barcodes, repackaging materials and creating inventory records.

Approximately 25 percent of the materials budget is allocated for new books in English for children, teens and adults. Over three percent is allotted for materials in five "We Speak Your Language" collections (Spanish, Chinese, Vietnamese, Russian and Somali). The remaining funds are budgeted for other formats, including eight percent on media (DVDs, music and audiobook CDs), 46 percent on electronic resources (e-books, downloadable audiobooks, streaming music and video, online periodicals, full-text databases and electronic reference sources) and two percent on print periodicals.

Effective management of the library materials collection allows library patrons to enjoy recreational reading, research specific topics, stay current on local, national and global events, and continue to learn at any stage of life.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of items in the collection, physical & digital	2,380,739	na/-	2,300,000	2,300,000
Outcome	% of patrons who found books and items they wanted	92%	90%	90%	90%
Output	Number of checkouts and renewals, physical & digital	18,554,896	na/-	18,500,000	18,500,000
Outcome	Turnover rate, physical & digital content	7.8	na/-	8.0	8.0

### Performance Measures Descriptions

New measures for FY 2020: Number of items in the collection; Number of checkouts and renewals; and Turnover rate. Each of these metrics includes both physical materials & digital content.  
 Turnover rate is a measure of how heavily the library collection is used (defined as circulation/holdings).

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$3,459,062	\$0	\$3,628,338
Contractual Services	\$0	\$774,167	\$0	\$587,850
Materials & Supplies	\$0	\$8,231,321	\$0	\$8,565,990
Internal Services	\$0	\$105,987	\$0	\$108,931
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,570,537</b>	<b>\$0</b>	<b>\$12,891,109</b>
<b>Program Total:</b>	<b>\$12,570,537</b>		<b>\$12,891,109</b>	
<b>Program FTE</b>	0.00	34.25	0.00	33.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80020-19 Collections & Technical Services

No significant changes.

**Department:** Library

**Program Contact:** Katie O'Dell

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:** Measure 5 Education

### Executive Summary

Programming and Outreach leads the library's public programming, community outreach, public training, reader services, Library Outreach Services (LOS) and Youth Services, including Youth Services Outreach. This department ensures that activities in each of these workgroups align with library priorities, is accountable for resource allocation, coordinates and supports staff engaged in this work and assists in research and evaluation.

### Program Summary

This program plans, directs, evaluates, supports and works with executive, supervisory, outreach, and front-line staff to deliver library services that include the informational, educational and entertainment needs of library users by providing a wide array of in person and virtual activities, experiences, learning opportunities and exhibitions that complement library materials and services.

The programming and outreach director coordinates activities with other library services via the Executive Management Team and leads a team that is responsible for allocating library resources and outside funding to design and implement library initiatives and programs; and provides highly responsible, complex staffing assistance to the library director and deputy director in the areas of programming, outreach, and youth services. This program oversees budget, personnel, quality management and program operations.

Programming and Outreach Management represents the library and its program of service to local educators and school administrators, educational advocacy groups, partners, elected officials, nonprofits, and the public. In this leadership role, the programming and outreach director is visible, accessible, proactive in developing relationships, approachable to staff and patrons, and works collaboratively with staff and stakeholders in resolving issues, implementing change and improving service. The programs and staff this position manages are Library Outreach Services, Programming and Community Outreach, Every Child Initiative and School-Age Services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of children and teens countywide who have library cards	52%	50%	50%	50%
Outcome	Staff who report improved/reinforced skills after Youth Services training	90%	90%	90%	90%
Output	% of card-holding children and teens who used their library card within the past year	55%	60%	50%	50%

### Performance Measures Descriptions

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$210,183	\$0	\$221,020
Contractual Services	\$0	\$1,000	\$0	\$6,000
Materials & Supplies	\$0	\$30,280	\$0	\$24,280
Internal Services	\$0	\$11,756	\$0	\$6,801
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$253,219</b>	<b>\$0</b>	<b>\$258,101</b>
<b>Program Total:</b>	<b>\$253,219</b>		<b>\$258,101</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80021-19 Programming & Outreach Management

No significant changes



**Department:** Library **Program Contact:** Terrilyn Chun  
**Program Offer Type:** Administration **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Public Services Division Management (PSDM) provides leadership and accountability for the library's direct service to the people of Multnomah County including the 19 public libraries. Public Services Division Management plans services, develops and evaluates programs and staff, and administers the budget for all public library locations.

**Program Summary**

Public Services Division Management (PSDM) provides leadership and accountability for the county's 19 public libraries. This division plans services, develops and evaluates programs and staff, and administers the budget for all public library locations. This program is led by the library's Deputy Director who is accountable for the Public Services Division and backs up the Library Director.

Public Services Division Management communicates with staff at all levels of the organization; develops collaborative relationships with community and governmental organizations to maximize the impact of library services for county residents; sets priorities and policies for libraries to best address community needs and county priorities; and implements best practices for safe and efficient operations. The division also provides resources to individual managers, staff, and work groups to improve their performance through ongoing training, coaching, leadership development and assessments.

Public Services Division Management supports the programs and services of the public libraries which patrons visited more than 3.7 million times last year. These libraries provide learning, cultural and recreational opportunities to all county residents, as well as a community space for civic engagement and lifelong learning.

Public Services Division Management supports the library's focus on equity and inclusion through systemwide management of culturally specific services to the county's African-American, immigrant and refugee communities. The division includes bilingual staff who speak Spanish, Chinese, Vietnamese, Russian and Somali and staff with an African-American cultural competency.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Outreach program attendance	46,817	52,000	46,000	46,000
Outcome	Patron satisfaction with One-on-One book-a-librarian service	98%	95%	100%	95%
Output	E-books and other digital titles checked out	2,588,064	2,400,000	3,200,000	3,000,000

**Performance Measures Descriptions**

Outcome: Book-a-Librarian service is now known as 'One-on-One Appointments.'

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would ... prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$1,187,351	\$0	\$1,254,624
Contractual Services	\$0	\$33,500	\$0	\$31,100
Materials & Supplies	\$0	\$429,820	\$0	\$179,465
Internal Services	\$0	\$39,788	\$0	\$244,035
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,690,459</b>	<b>\$0</b>	<b>\$1,709,224</b>
<b>Program Total:</b>	<b>\$1,690,459</b>		<b>\$1,709,224</b>	
<b>Program FTE</b>	0.00	5.75	0.00	7.75

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.96%) and resources from the County's Library Fund (0.04%). It represents a pro-rated share of property taxes (97.69%) and other revenues such as overdue fines, interest earnings, grants, and user charges for services provided to library patrons (2.31%).

## Significant Program Changes

**Last Year this program was:** FY 2019: 80022-19 Public Services Division Management

No significant changes

## Department Overview

The Nondepartmental budget accounts for programs and countywide functions that do not belong to particular departments. Programs include: the Board of County Commissioners and its Chair; the Auditor's Office; the County Attorney's Office; the Communications Office; the offices of Emergency Management, Sustainability, Diversity and Equity, and the Joint Office of Homeless Services; independent County organizations such as the Local Public Safety Coordinating Council and the Citizen Involvement Committee; non-County agencies such as the Regional Arts and Culture Council and the Oregon Historical Society; and entities that account for corporate debt service. Fund-level transactions are also budgeted here.

The Board of County Commissioners provides corporate leadership, policy direction, and strategic direction for Multnomah County. The elected Auditor and staff promote efficient, effective, accountable government. The County Attorney's Office provides legal guidance, advice, and other services. The Communications Office provides information and access to County government for the news media and public. The Office of Emergency Management coordinates countywide emergency disaster preparedness, response, and mitigation activities. Several independent County agencies provide advice, oversight, analysis, and advocacy on behalf of the County and the community. The Citizen Involvement Committee involves citizens in County policy and decision-making processes. The Local Public Safety Coordinating Council coordinates public safety plans, policies, operations, and strategies of local government agencies; and the Tax Supervising and Conservation Commission oversees budget and tax levy authority for taxing districts in the County.

## Joint Office of Homeless Services

The Joint Office of Homeless Services (JOHS) administers contracts for homeless services, manages systems of care, oversees system reporting and evaluation, conducts homeless street counts and one night shelter counts, and writes proposals to and monitor funds issued by the US Department of Housing and Urban Development's Continuum of Care program. These operations affect the lives of thousands of homeless singles, youth, and families, as well as survivors of domestic violence in Portland and Multnomah County. Homelessness is an ongoing crisis in the City of Portland and Multnomah County. Recently, our community has come together in unprecedented ways to respond. A Home for Everyone, a multi-jurisdictional collaboration, is helping an unprecedented number of people prevent and end their homelessness.

In FY 2017, the City of Portland and the County consolidated resources and services under the Joint Office, guided by the shared values and common agenda of the A Home for Everyone partners, to maximize the impact from a systems perspective. The Office receives funding and policy direction from the County and the City of Portland, and policy guidance from the City of Gresham and Home Forward, providing a platform of mutual responsibility and accountability for all partners, with the added benefit of integrated staffing for enhanced operational coordination and effectiveness. Due to the size of the budget and the extensive scope of programming, the Joint Office budget is broken out from the rest of Nondepartmental on the following pages.

### Budget Overview

Nondepartmental contains County programs, independent County agencies, corporate functions, and payments to other entities that do not belong to County departments. The FY 2020 Nondepartmental Adopted Budget is \$180.1 million, which is an increase of \$3.8 million over FY 2019. (These figures exclude the Joint Office of Homeless Services, which is detailed on the following page.)

The General Fund (including Video Lottery) has increased by \$3.5 million, with the following highlights:

\$1.7 million for new, ongoing programs:

- Office of Diversity & Equity Civil Rights Administration (10017D) - 2.00 FTE \$357,356
- Complaints Investigation Unit (10040) - 6.00 FTE \$1,336,564

\$250,000 in one-time-only resources are dedicated to ensure a complete census count. (Complete Count Census, Program Offer 10035)

\$3.6 million of funding in State Mandated Expenses (10021) to cover the debt payment associated with the new Downtown Courthouse.

A list of programs funded as one-time-only can be found in the Budget Director’s message on page 33.

<b>Budget Trends</b>	<b>FY 2018</b>	<b>FY 2019</b>	<b>FY 2019</b>	<b>FY 2020</b>	
	<b>Actual</b>	<b>Current Estimate</b>	<b>Adopted Budget</b>	<b>Adopted Budget</b>	<b>Difference</b>
Staffing FTE	104.28	107.38	107.38	117.39	10.01
Personnel Services	\$14,581,729	\$16,654,150	\$16,994,031	\$19,380,817	2,386,786.00
Contractual Services	81,756,989	\$88,429,236	90,233,914	88,345,655	(1,888,259.00)
Materials & Supplies	964,202	\$1,456,848	1,486,580	1,615,450	128,870.00
Internal Services	9,047,981	\$12,405,954	12,659,137	13,280,409	621,272.00
Debt Service	45,303,400	54,964,645	54,964,645	57,499,766	2,535,121.00
Capital Outlay	<u>37,925</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0.00</u>
<b>Total Costs</b>	<b>\$151,692,226</b>	<b>\$173,910,834</b>	<b>\$176,338,307</b>	<b>\$180,122,097</b>	<b>3,783,790</b>

\*Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies, and unappropriated balances. Due to the transition to a new ERP system, some services that were budgeted in Contractual Services or Materials & Supplies before FY 2020 are now in Internal Services.

### Budget Overview - Joint Office of Homeless Service

The FY 2020 Joint Office of Homeless Services (JOHS) Adopted budget is \$70.2 million, a \$0.8 million decrease from the FY 2019 budget. The decrease in funding is primarily due to one-time-only Capital funds that were budgeted and spent in FY 2019. The FY 2020 budget funds 27.00 full-time-equivalent positions, an increase of 6.00 FTE from FY 2019. These new FTE are primarily in systems support and data analytics. The FY 2020 budget is comprised of \$30.5 million of County discretionary funds (General Fund, Tax Title, Video Lottery, and Permanent Supportive Housing funds).

The FY 2020 General Fund allocation contains new, ongoing funding for the following programs, among others:

- Data Staff Capacity (10050B) \$104,400
- Expanded Adult Shelter Operations (10052E) \$250,000

Additionally, funding for certain program offers that was one-time-only in FY 2019 is made ongoing in FY 2020:

- Gresham Community Outreach OTO Restoration (10053M) \$50,000
- Expanded Housing Assistance (10056C) \$100,000

The FY 2020 Adopted budget transfers \$436,073 County funds from the Department of County Human Services to JOHS for the Benefit Acquisition Program. This transfer consolidates all county funds for this purpose in JOHS.

\$3.5 million of capital funds appropriated in FY 2019 are carried into the FY 2020 Adopted budget because the planned shelter projects are still in progress.

The FY 2020 General Fund allocation also includes \$3.02 million in one-time-only funding, including \$2.6 million for Tax Title Affordable Housing (10057) and \$420,000 for Family System OTO Rent Assistance Restoration (10053L).

A complete list of programs funded as one-time-only can be found in the Budget Director's message on page 33.

Budget Trends	FY 2018	FY 2019	FY 2019	FY 2020	Difference
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	15.00	21.00	21.00	27.00	6.00
Personnel Services	\$1,779,018	\$2,648,244	\$2,702,290	\$3,562,512	\$860,222
Contractual Services	52,699,986	\$59,561,296	60,776,833	61,663,885	887,025
Materials & Supplies	143,071	\$508,792	519,176	241,714	(277,862)
Internal Services	1,449,538	\$784,435	800,444	1,233,814	433,370
Capital Outlay	0	<u>6,125,000</u>	<u>6,250,000</u>	<u>3,500,000</u>	<u>(2,750,000)</u>
<b>Total Costs</b>	<b>\$56,071,613</b>	<b>\$69,627,768</b>	<b>\$71,048,743</b>	<b>\$70,201,498</b>	<b>(\$847,245)</b>

The table does not include cash transfers, contingencies or unappropriated balances. Due to the transition to a new ERP system, some services that were budgeted in Contractual Services or Materials & Supplies before FY 2020 are now in Internal Services.

## Successes

In the last year, the **County Auditor's Office's** nationally award winning audit on the Office of Emergency Management's performance in the Eagle Creek Fire highlighted the good work during the response, and identified critical steps the County needs to take for future emergencies. Other audits focused on fiscal, security, and risk positions to help ensure effective stewardship of taxpayer funds and information. The Auditor published its second report on the County's ethical culture and the annual Good Government Hotline report.

The **Office of Government Relations'** work in the Legislature resulted in an additional \$600,000 for transitional housing for individuals who are unable to aid and assist in their defense. Presented to the Board on the impact of Ballot Measure 5 and 50 on gentrification in North Portland. Coordinated the federal advocacy approach to identify and ameliorate the impacts of federal legislation. Supported over \$1.5 million in grant development and helped streamline grant processes.

The **Office of Diversity and Equity** led adoption of the Workforce Equity Strategic Plan and partnered with the Evaluation Research Unit and IDEA Employee Resource Group to publish recommendations to improve experiences for employees with disabilities. The diverse Multnomah Youth Commission continued to lead policy advocacy for young people. College to County supported over 35 college students in county work and ODE provided training and consultation on the Equity and Empowerment Lens, Gender Inclusive policies, and compliance with federal regulations.

The **Local Public Safety Coordinating Council** launched the Diane Wade House, an Afrocentric transitional housing program for justice-involved women. With the support of the John D. and Catherine T. MacArthur Foundation, LPSCC staff continue to focus on reducing jail use by implementing and evaluating criminal justice policies and practices.

**Sustainability** marked several policy milestones, including the adoption of the Clean Air Construction standards that will curb emissions from County construction projects and the Environmental Justice resolution that codifies the County's commitment to environmental justice. In the second annual Multnomah County "Resource Conservation Report" Sustainability reported that greenhouse gas emissions from County operations were reduced 57% year over year. The Fiscal Year also marked the end of the first year and a half of the Green Gresham Healthy Gresham project, which is bringing tree planting to the Rockwood neighborhood. Finally, Sustainability worked with the County Attorney's Office to make Multnomah County the first government in the nation to support the youth lawsuit against the State of Oregon for its failure to act on climate change.

The **County Attorney's Office** led County efforts to bring attention to important social, political and public health issues like combating climate change, continued funding for teen pregnancy prevention grant, the opioid crisis and validating the constitutionality of voter approved campaign finance legislation. The Office also supported the County's capital project goals by facilitating real property purchasing and leasing and construction projects.

### Successes (Continued)

The **Office of Emergency Management** led County efforts on several events including: the Cully scrapyard fire, the after action program leading to improvements after the Eagle Creek Fire and started outreach programs resulting in 4,400 volunteer and internship hours and 56 training events. The office expanded its role during hazardous weather, staffing and supporting shelters during very cold weather.

The **Communications Office** led public engagement for over 25 agencies during the Eagle Creek Fire, including 30 press conferences, and more than 40 stories and videos in multiple languages. A new e-newsletter, the Multco Message was launched and the office supported workforce equity through the pronoun use on business cards and culturally specific guidance documents.

The **Joint Office of Homeless Services** served over 35,000 people in 2018 including emergency shelter, housing placement, retention and supportive housing and diversion services. Of those served over 60% were people of color. Homeless Performance measures including the 2015 and 2017 Point-in-Time Counts, indicate a continued high demand for homeless services.

### Diversity, Equity, and Inclusion

Nondepartmental is the “home” of the County’s Office of Diversity and Equity (ODE), a hub for countywide diversity and equity initiatives. ODE focuses on ensuring equal opportunity and fair treatment, advancing an inclusive and diverse workplace, uplifting underrepresented voices with and for systems and policy change, and ingraining equity into daily practice.

ODE is responsible for managing civil rights, including Affirmative Action and Equal Employment Opportunity compliance, providing training and consultation on the Equity and Empowerment Lens and developing countywide policies and practice guidance in line with the goal of everyone in Multnomah County experiencing safety, trust and belonging. ODE has recently been charged with facilitating the implementation of the Workforce Equity Strategic Plan - an unprecedented countywide initiative.

Workforce equity demands that the County identify and address structural and policy barriers to equal employment opportunity faced by our employees and communities because of their race, ethnicity, national origin, disability, gender and gender identity, sexual orientation and other protected classes. In partnership with ODE, County employees stepped forward to help develop a strategic plan to create a workplace where everyone can reach their full potential. In April 2018, the Board of County Commissioners adopted the Workforce Equity Strategic Plan.

The plan identified key objectives to improve recruitment, hiring, retention, promotion and organizational culture. It also includes metrics and timelines to measure progress. Over the last year, departments created specific workforce equity implementation plans and a countywide committee was established to provide input, oversight and accountability for the work. The Workforce Equity Strategic Plan was also amended in January 2019 to include additional goals, recommendations and next steps for structural change.



# Nondepartmental

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## Nondepartmental

The following table shows the programs that make up the department's total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
10000	Chair's Office	\$1,802,500	\$0	\$1,802,500	9.45
10001	BCC District 1	716,000	0	716,000	4.00
10002	BCC District 2	716,000	0	716,000	4.00
10003	BCC District 3	716,000	0	716,000	4.00
10004	BCC District 4	716,000	0	716,000	4.00
10005A	Auditor's Office	1,798,230	0	1,798,230	8.29
10005B	Auditor's Office - Restoration	60,240	0	60,240	0.30
10006	Tax Supervising and Conservation Commission	365,340	0	365,340	2.00
10007	Communications Office	1,721,800	0	1,721,800	11.00
10008	County Attorney's Office		6,502,530	6,502,530	26.00
10009A	Local Public Safety Coordinating Council	743,880	918,480	1,662,360	3.00
10009B	HB3194 Justice Reinvestment		629,360	629,360	1.00
10010	Office of Community Involvement	286,650	0	286,650	2.00
10011	Office of the Board Clerk	1,102,468	0	1,102,468	2.35
10012A	Office of Emergency Management	1,842,760	728,370	2,571,130	9.00
10012B	Emergency Management - Restoration	84,250	0	84,250	0.00
10016	Government Relations Office	1,107,290	0	1,107,290	5.00
10017A	Office of Diversity and Equity	1,087,970	0	1,087,970	6.00
10017B	Multnomah Youth Commission Support	140,830	0	140,830	1.00
10017C	Office of Diversity and Equity - Workforce Equity Program Manager	195,051	0	195,051	1.00
10017D	Office of Diversity and Equity - Civil Rights Administration	357,356	0	357,356	2.00
10018	Office of Sustainability	762,530	100,000	862,530	5.00
10018B	Multnomah County's Fossil Fuel Infrastructure Study - Phase I	50,000	0	50,000	0.00
10020	Regional Arts & Culture Council	300,000	0	300,000	0.00
10021	State Mandated Expenses	9,867,152	414,993	10,282,145	0.00
10022	Pass-Through Payments to East County Cities	9,952,155	0	9,952,155	0.00
10023	OHS Local Option Levy	0	3,460,788	3,460,788	0.00
10024	County School Fund	0	80,300	80,300	0.00
10025	Convention Center Fund	0	44,094,044	44,094,044	0.00
10026	Capital Debt Retirement Fund	0	37,180,692	37,180,692	0.00



# Nondepartmental

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Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Nondepartmental (cont.)</b>					
10027	Neighborhood Prosperity Initiative	500,000	0	500,000	0.00
10028	PERS Pension Bond Sinking Fund	0	63,525,637	63,525,637	0.00
10029A	Youth Opportunity and Workforce Development Program	0	1,650,000	1,650,000	1.00
10035	Complete Count Census 2020	250,000	0	250,000	0.00
10040	Complaints Investigation Unit	<u>1,336,564</u>	<u>0</u>	<u>1,336,564</u>	<u>6.00</u>
<b>Total Nondepartmental</b>		<b>\$38,579,016</b>	<b>\$159,285,194</b>	<b>\$197,864,210</b>	<b>117.39</b>

\*DOES include cash transfers, contingencies, and/or unappropriated balances.

## Joint Office of Homeless Services

The following program offers account for General Fund revenues and other fund level transactions. General Fund expenditures are budgeted in departments.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
10050A	Joint Office of Homeless Services Administration & Operations	\$1,649,700	\$590,045	\$2,239,745	12.00
10050B	Joint Office of Homeless Services Data Staff Capacity	104,400	0	104,400	1.00
10051	System Support, Access, & Coordination	418,665	1,683,465	2,102,130	5.00
<b>Safety off the Streets</b>					
10052A	Safety off the Streets - Adult Shelter	129,330	7,405,945	7,535,275	2.00
10052B	Safety off the Streets - Women's Shelter	163,390	3,563,540	3,726,930	0.00
10052C	Safety off the Streets - Alternative Shelter for Adults	0	387,540	387,540	0.00
10052D	Safety off the Streets - Family Shelter	981,680	1,356,900	2,338,580	0.32
10052E	Safety off the Streets - Expanded Adult Shelter Operations	250,000	250,000	500,000	0.00
10052F	Safety off the Streets - Domestic Violence Shelter	856,720	632,310	1,489,030	0.40
10052G	Safety off the Streets - Youth Shelter	1,500,810	245,690	1,746,500	0.00
10052H	Safety off the Streets - Domestic Violence Emergency Motel Voucher Restoration	93,000	0	93,000	0.00
10052I	Safety off the Streets - Winter Shelter & Severe Weather	1,194,650	1,097,980	2,292,630	0.00

# Nondepartmental

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Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
<b>Housing Placement and Retention (cont.)</b>					
10053A	Housing Placement & Retention - Adults & Women Households	22,900	4,137,370	4,160,270	1.00
10053C	Housing Placement & Retention - Homeless Families	3,712,800	1,196,910	4,909,710	1.68
10053D	Housing Placement & Retention - Placement out of Adult Shelter	67,780	2,429,705	2,497,485	0.00
10053E	Housing Placement & Retention - Domestic Violence	1,766,785	1,129,270	2,896,055	1.60
10053G	Housing Placement & Retention - Medical/ Aging	0	608,690	608,690	0.00
10053H	Housing Placement & Retention - Youth Services	2,853,130	1,732,160	4,585,290	1.00
10053J	Housing Placement & Retention - Veterans	198,300	663,780	862,080	0.00
10053K	Housing Placement & Retention - Family System Rent Assistance Restoration	270,000	0	270,000	0.00
10053L	Housing Placement & Retention - Family System OTO Rent Assistance Restoration	420,000	0	420,000	0.00
10053M	Housing Placement & Retention - Gresham Community Outreach Restoration	50,000	0	50,000	0.00
<b>Supportive Housing</b>					
10054A	Supportive Housing	1,471,540	6,213,940	7,685,480	1.00
10054B	Supportive Housing - Mental Health/ Medical Housing	82,000	4,906,815	4,988,815	0.00
10054C	Supportive Housing - Local Long Term Rental Vouchers	376,760	138,240	515,000	0.00
10054D	Supportive Housing - Families	624,000	0	624,000	0.00
10055A	Diversion Services	1,504,903	1,525,500	3,030,403	0.00
10056A	Employment Programs	0	1,340,260	1,340,260	0.00
10056C	Employment Programs - Expanded Housing Assistance	100,000	0	100,000	0.00
10057	Tax Title Affordable Housing	2,602,200	0	2,602,200	0.00
10058	Emergency Shelter Strategic Investment	<u>\$3,500,000</u>	<u>0</u>	<u>3,500,000</u>	<u>0.00</u>
<b>Total Joint Office</b>		<b>\$22,965,443</b>	<b>\$43,236,055</b>	<b>\$70,201,498</b>	<b>27.00</b>

## Fund Level Programs

The following program offers account for General Fund revenues and other fund level transactions. General Fund expenditures are budgeted in departments.

Prog. #	Program Name	FY 2020 General Fund	Other Funds	Total Cost	FTE
95000	Fund Level Transactions	102,729,600	74,016,891	176,746,491	0.00
	<i>This beginning fund balance is not shown in the Nondepartmental detail budget.</i>				
95001	General Fund Revenues	561,089,447	750,000	561,839,447	0.00
	<i>This program offer contains the budget for General Fund revenues. Expenses are budgeted in departments.</i>				

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**Department:** Nondepartmental      **Program Contact:** Deborah Kafoury  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Chair is the Chief Executive Officer of Multnomah County. With both legislative and executive responsibilities, the Chair works closely with the Board of County Commissioners to set the policy direction of Multnomah County and implement that direction as mandated by the Home Rule Charter. All departments and non-departmental offices report to the Chair, including the Office of Diversity and Equity, Office of Sustainability, Communications, Government Relations, the Local Public Safety Coordinating Council and the Office of the Board Clerk.

### Program Summary

The Chair oversees a \$2.0 billion budget and more than 6,000 employees. The Chair has broad responsibilities that include: developing an executive budget, appointing department directors, overseeing contracts and financial instruments, presiding over the Board of County Commission meetings, executing policies and ordinances adopted by the Board, and serving as the Chief Personnel Officer of Multnomah County.

Chair Kafoury has long championed issues supporting the most vulnerable in our community such as preventing and ending homelessness, expanding after school programs for kids, creating stability for families, and providing healthcare to underserved populations. She has worked to reduce the use of incarceration for low-level offenders and instead expanded diversion programs. She has also led successful plans to replace unsafe buildings and crumbling bridges.

In FY 2020, Chair Kafoury will focus on the following priorities:

- Practices, programs and partnerships that will better serve those struggling with homelessness, mental illness and interaction with the public safety system.
- Implementing Workforce Equity Strategic Plan initiatives within Multnomah County and supporting external workforce development and apprenticeship programs for underserved communities.
- Protecting the health of our community and built environment through a continued focus on reducing air pollution, climate, strengthening tribal government partnerships and setting a health policy agenda for the Board of Health.
- Continued investments in programs that promote youth success and family stability.
- Continued investments in and support for culturally responsive and culturally specific services that help meet community needs and reduce inequities across Multnomah County.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Ensure broad community input by conducting community listening sessions and budget hearings.	8	10	12	15
Outcome	Respond to constituent emails, phone calls and meeting requests in a timely manner.	100%	100%	100%	100%
Outcome	Proactively communicate with residents through a regular community newsletter.	N/A	N/A	10	10
Outcome	Meet FY 2020 countywide Workforce Equity implementation deadlines.	N/A	N/A	N/A	100%

### Performance Measures Descriptions

The Chair's office will continue to provide access and engagement opportunities for the community on the budget and policy development to ensure the County's agenda reflects the needs of the entire community.

## Legal / Contractual Obligation

The Multnomah County Chair and Commissioner offices are mandated by the Multnomah County Home Rule Charter, Chapter III, 3.10.(3)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,402,588	\$0	\$1,468,552	\$0
Contractual Services	\$25,880	\$0	\$19,670	\$0
Materials & Supplies	\$71,330	\$0	\$60,700	\$0
Internal Services	\$241,057	\$0	\$253,578	\$0
<b>Total GF/non-GF</b>	<b>\$1,740,855</b>	<b>\$0</b>	<b>\$1,802,500</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,740,855</b>		<b>\$1,802,500</b>	
<b>Program FTE</b>	9.00	0.00	9.45	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10000-19 Chair's Office

**Department:** Nondepartmental      **Program Contact:** Sharon Meieran  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Commissioner Meieran serves as one of five elected members that make up the governing body of Multnomah County, representing District 1. District 1 includes areas west of the Willamette River, as well as the inner east side of Portland south of Interstate 84. Her responsibilities include adopting a balanced budget, setting policy priorities, and responding to the needs and concerns of her district. She works to make Multnomah County a place where everyone can thrive by supporting programs and policies that allow residents to be safe, healthy, and live with dignity.

### Program Summary

Commissioner Meieran is working on issues such as: increasing affordable housing and reducing homelessness, improving access to quality mental health and addiction services, better linking our public safety system with other systems to reduce recidivism and promote alternatives to costly incarceration, conducting a study of the feasibility of municipal broadband in Multnomah County, and advocating for policies that decrease air pollution. She prioritizes programs that provide meaningful and effective services to Multnomah County residents and have clear and measurable goals. She is also a strong advocate for effective policies and funding at the state and federal levels.

During the FY 2020 budget process, Commissioner Meieran will advocate for strategies that address the root causes of intergenerational cycles of poverty. She will prioritize the needs of our most vulnerable residents and focus on the intersection of housing and homelessness, health care, and public safety. She will continue to spearhead efforts to improve mental health and addictions services, focusing on effective, evidence-based strategies, peer support, integration with housing, and connection to health care and other supportive wrap-around services. She will look for opportunities to continue to address the needs of veterans, older adults, and people with disabilities, and she will focus on reproductive health equity as well as public health interventions that improve the health and wellbeing of the whole community. She will actively seek opportunities to improve our resilience in an emergency, including through partnerships with others in the region. She will center the need to enact policies that address the disparities and racial injustices disproportionately faced by people of color.

As a Board liaison to the Association of Oregon Counties, she will advocate for Multnomah County's interests within that organization, ensuring Multnomah County's voice is heard in that organization's legislative agenda and other work.

Finally, Commissioner Meieran will oversee and collaborate with her colleagues on major construction projects in her district, including the Courthouse Project, the Burnside Bridge Lifeline Feasibility Study, and other transportation projects.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Respond to constituent emails, phone calls and meeting requests timely and resolve constituent concerns.	82%	92%	93%	94%
Outcome	Provide testimony and meet directly with state and federal legislators for priority issues.	8 Meetings	12 Meetings	13 Meetings	13 Meetings
Output	Conduct or partner on twice quarterly outreach events.	8 Events	12 Events	14 Events	15 Events
Output	Hours spent proactively connecting with District 1 constituents by meeting them where they are.	N/A	N/A	N/A	52 Hours

### Performance Measures Descriptions

1) Timely response is within 10 business days. 2) Priorities for legislative testimony are issues on the County's legislative agenda, including housing and homelessness, health care, mental health care, public health, eliminating domestic violence and reproductive rights and justice. 3) At least four events focusing on mental health care in Multnomah County. 4) Connecting with constituents by meeting them where they are includes knocking on doors and attending community events.

## Legal / Contractual Obligation

The Multnomah County Commissioners offices are mandated by the Multnomah County Home Rule Charter, Chapter III, 3.10.(3)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$522,369	\$0	\$541,905	\$0
Contractual Services	\$19,455	\$0	\$20,240	\$0
Materials & Supplies	\$53,330	\$0	\$52,603	\$0
Internal Services	\$96,796	\$0	\$101,252	\$0
<b>Total GF/non-GF</b>	<b>\$691,950</b>	<b>\$0</b>	<b>\$716,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$691,950</b>		<b>\$716,000</b>	
<b>Program FTE</b>	4.00	0.00	4.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10001-19 BCC District 1



**Department:** Nondepartmental **Program Contact:** Susheela Jayapal

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

Commissioner Susheela Jayapal serves as one of five elected officials tasked with developing policy, coordinating the development of Multnomah County's annual budget, and ensuring that policy and budget support the work of County Departments. She serves District 2, which includes North and Northeast Portland. Commissioner Jayapal is committed to promoting effective, evidence-driven programs and services, ensuring racial equity, and engaging in community driven policy. To learn more about Commissioner Jayapal's office visit the website at <https://multco.us/commissioner-jayapal>.

### Program Summary

Our regional economy is booming, but the rising tide is not lifting all boats. On the contrary: too many people in Multnomah County are struggling to survive, much less thrive. District 2 exemplifies this dichotomy, with communities of color and immigrant and refugee communities experiencing severe income inequality and displacement.

Commissioner Jayapal will focus on houselessness and affordable housing, workforce development, and public safety. During the 2020 budget process, she will prioritize programs and strategies that address racial inequities, focus on upstream causes, protect our most vulnerable residents, and deliver results. The commissioner is committed to monitoring and supporting the progress of the Workforce Equity Strategic Plan. Additionally, she will oversee and collaborate with her colleagues on major construction projects in her district, including Walnut Park and the North Williams Center.

Commissioner Jayapal will Chair the Multnomah Sex Trafficking Collaborative and Co-Chair The Gateway Center for Domestic Violence Council as well as the Domestic Violence Fatality Review Committee. She will also be the liaison to the Regional Arts and Culture Council (RACC), and serve on the Metro Advisory Policy Committee (MPAC), Workforce Development Board (Worksystems), Walnut Park Redevelopment Project, and Multnomah County's Audit Committee.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Community engagement and constituent outreach via meetings and events.	N/A	N/A	6	12
Outcome	Ongoing responsiveness to all County departments.	N/A	N/A	100%	100%
Outcome	Ensure Phase Two of Walnut Park planning process is completed on time.	N/A	N/A	100%	100%
Output	Respond to constituent emails, phone calls and meeting requests timely and resolve constituent concerns.	N/A	N/A	100%	100%

### Performance Measures Descriptions

1) Measured by number of constituent coffees, neighborhood meetings and community events hosted, attended or led by Commissioner Jayapal and her staff. 2) Measured by percentage of department meetings, briefings and communication requested and completed. 3) Measured by percentage of communications and response provided to constituents of Multnomah County District 2. 4) Timely response is within 10 days.

## Legal / Contractual Obligation

The Multnomah County Commissioners offices are mandated by the Multnomah County Home Rule Charter, Chapter III, 3.10.(3)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$520,525	\$0	\$547,391	\$0
Contractual Services	\$17,000	\$0	\$13,383	\$0
Materials & Supplies	\$51,197	\$0	\$51,280	\$0
Internal Services	\$103,228	\$0	\$103,946	\$0
<b>Total GF/non-GF</b>	<b>\$691,950</b>	<b>\$0</b>	<b>\$716,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$691,950</b>		<b>\$716,000</b>	
<b>Program FTE</b>	4.15	0.00	4.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10002-19 BCC District 2

**Department:** Nondepartmental      **Program Contact:** Jessica Vega Pederson  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Multnomah County Commissioner Jessica Vega Pederson is one of five elected officials who form the governing body of Multnomah County. She represents District 3, comprising most of SE Portland. Commissioner Vega Pederson focuses on serving her constituents and the needs of East Portland while embracing the county's mission, vision and values of equity, sustainability, inclusivity, social justice, health, public safety, integrity and innovation. To learn more please visit <https://multco.us/commissioner-vega-pederson>.

### Program Summary

As the lone locally elected official designated with representing East Portland, Commissioner Jessica Vega Pederson takes her responsibilities to serve this marginalized part of our region very seriously. The Commissioner's top priorities include finding solutions to the disparities and inequities affecting District 3, as well as low income and communities of color generally, such as: the lack of transportation options, including transit and sidewalks; accessible and affordable early childhood education; mitigating the impacts of climate change and pollution on front line communities; and affordable housing. To best work on these priorities, Commissioner Vega Pederson serves as the County's representative at various regional transportation tables, chair's the County's Preschool for All task force, and has championed the County's efforts to combat climate change and pollution.

The Commissioner represents the County on several transportation committees, including the Joint Policy Advisory Committee on Transportation. She serves on the TriMet Transit Advisory Committee, advocating for expanded service to east Portland, as well as converting the TriMet fleet to electric buses. She also co-chairs the Earthquake Ready Burnside Bridge feasibility project, which aims to create a resilient lifeline crossing over the Willamette River in the event of a major earthquake.

Knowing the importance of early learning, Commissioner Vega Pederson chairs the County's Preschool For All task force, which is exploring expanding preschool access across Multnomah County for the thousands of children in our community who are not currently being served. The Commissioner also serves on the Portland Children's Levy allocation committee, which awards nearly \$19 million annually in programs touching on early childhood, hunger relief, mentorship, after school activities, child abuse prevention and supports for foster kids.

Lastly, Commissioner Vega Pederson is the County's liaison to the Advisory Committee on Sustainability and Innovation, which provides guidance to the County on sustainability issues affecting our community, the environment, and the economy. She sponsored the 100by50 resolution, putting the County on the path to being 100 percent renewable by 2050 and has fought to reduce diesel pollution.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	State/Federal advocacy for transportation, homelessness, housing, and environmental protection.	8	8	8	8
Outcome	Respond to all constituent emails, phone calls, and meeting requests in a timely manner.	100%	100%	100%	100%
Outcome	Conduct outreach on the recommendations of the Preschool For All task force report.	N/A	N/A	N/A	8
Output	Community engagement and constituent outreach via neighborhood meetings and community events.	12	12	12	12

### Performance Measures Descriptions

1) Advocate for County priorities before state and federal lawmakers. 2) Respond to constituents in a timely and accurate manner. 3) Speak with school boards, interest groups, community organizations and the general public about the results from the Preschool For All task force. 4) Attend community events in her district to inform policy and budgetary priorities.

## Legal / Contractual Obligation

The Multnomah County Commissioners offices are mandated by the Multnomah County Home Rule Charter, Chapter III, 3.10.(3)

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$548,996	\$0	\$583,485	\$0
Contractual Services	\$5,180	\$0	\$3,620	\$0
Materials & Supplies	\$41,728	\$0	\$25,970	\$0
Internal Services	\$96,046	\$0	\$102,925	\$0
<b>Total GF/non-GF</b>	<b>\$691,950</b>	<b>\$0</b>	<b>\$716,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$691,950</b>		<b>\$716,000</b>	
<b>Program FTE</b>	4.00	0.00	4.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

This is a General Fund Program.

## Significant Program Changes

Last Year this program was: FY 2019: 10003-19 BCC District 3

**Department:** Nondepartmental      **Program Contact:** Lori Stegmann  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Commissioner Lori Stegmann is one of five elected members that comprise the governing body of Multnomah County, representing District 4 in East County. As a member of the board of County commissioners, Commissioner Stegmann is responsible for adopting a balanced budget, setting policy, and effectively representing her district. Commissioner Stegmann is committed to engaging the community, operating in an open and transparent manner, and responding to the needs of constituents in a timely manner. For more information, please visit: <https://multco.us/commissioner-stegmann>

### Program Summary

In FY 2020, Commissioner Stegmann continues to prioritize place-based efforts to reduce the impacts of poverty and negative systemic interactions for all residents of East Multnomah County. Specific policy areas include: housing stability and affordability, economic development and workforce collaborations, increased access to health and human services provided through the County, disparities for communities of color and residents involved in the justice system, and effective, ongoing conversations with East County communities.

Commissioner Stegmann is chair of the East Multnomah County Transportation Committee, co-chair of the jail population subcommittee of the Local Public Safety Coordinating Council, and Multnomah County's lead for the East County Caring Community. She represents Multnomah County through leadership with Greater Portland, Inc., East Metro Economic Alliance, Visitor's Development Fund, the Library Advisory Board, the Commission on Economic Dignity and the NE Multnomah County Community Association. Appointed to the Association of Oregon Counties board and the Governor's Metro Regional Solutions leadership team, Commissioner Stegmann continues to bring East County needs to regional and state resource discussions.

This year Commissioner Stegmann will lead Multnomah County's Census 2020 efforts. Convening a regional planning team with Clackamas and Washington Counties, community partners, and regional agency partners, the Commissioner and her team will work with the U.S. Census Bureau, Governor's Office, and collaborative initiatives across Oregon to increase census counts and involvement in historically undercounted communities.

Commissioner Stegmann is committed to implementing the Equity and Empowerment Lens in all policy discussions and actively discuss how decisions may disproportionately impact communities who are underrepresented in those discussions.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of East County community partners engaged.	N/A	2,000	2,000	2,500
Outcome	Increase in awareness of East County issues (reported by attendees of monthly forums)	N/A	N/A	N/A	75%
Output	Number of meetings convened in East County.	N/A	25	25	30
Outcome	Increase in knowledge of East County resources (reported by attendees of monthly forums).	N/A	N/A	N/A	75%

### Performance Measures Descriptions

1) Measured by number of individuals involved in topic-specific meetings, gathered through mailing lists and sign in sheets.  
 2) Measured by survey administered at monthly issue forums. 3) Measured by number of publicized and completed meetings hosted or led by Commissioner Stegmann and her staff. 4) Measured by survey administered at monthly issue forums.

## Legal / Contractual Obligation

The Multnomah County Commissioners offices are mandated by the Multnomah County Home Rule Charter, Chapter III,3.10(3).

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$544,685	\$0	\$553,056	\$0
Contractual Services	\$5,280	\$0	\$5,500	\$0
Materials & Supplies	\$45,671	\$0	\$56,318	\$0
Internal Services	\$96,314	\$0	\$101,126	\$0
<b>Total GF/non-GF</b>	<b>\$691,950</b>	<b>\$0</b>	<b>\$716,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$691,950</b>		<b>\$716,000</b>	
<b>Program FTE</b>	4.00	0.00	4.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10004-19 BCC District 4

**Department:** Nondepartmental      **Program Contact:** Jennifer McGuirk  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Auditor is elected by voters countywide and answers to the people who live in Multnomah County. The mission of the Auditor's Office is to ensure that County government is efficient, effective, equitable, transparent, and fully accountable to all who live in our county. To meet this mission, we conduct performance audits and special studies that provide accountability to the public and help to improve Multnomah County programs, services, and operations.

**Program Summary**

County Charter requires the County Auditor to perform duties including conducting performance audits of all County operations and financial affairs, as well as studies intended to measure or improve the performance of county efforts.

The Auditor prioritizes auditing County programs that directly impact people's health and safety. Audits involve hundreds of hours of work, including research, interviews, onsite observations, and data analysis. Audit work includes an intense fact-checking process. Based on sufficient, appropriate evidence, we arrive at logical conclusions. We acknowledge the good work taking place in County programs and identify impediments to the County's mission to help people. We provide meaningful recommendations to County leaders so they can take actions to improve government for the benefit of their constituents, including County employees and the vulnerable people who receive County services.

The Office also operates the Good Government Hotline, providing an avenue for employees and the public to report fraud, waste or abuse, harassment and discrimination, and potential privacy/HIPAA violations. And, per County Code, the Auditor's Office provides technical and clerical support to the Audit Committee, which is a liaison to the Board of County Commissioners, the external auditor, and management for the external financial audits required under Oregon law.

Our program has recurring requirements, including the following to take place in FY 2020.

- 1) Peer review: Charter requires the Office to carry out audits in accordance with generally accepted government auditing standards and these standards require the Office to be reviewed by a committee of its peers. These peer reviews are required every three years to ensure we meet audit standards; our last review was in 2017.
- 2) Salary Commission: County Charter requires the Auditor to appoint a Salary Commission by January 1 each even year. This Commission sets the salaries for the Chair, Commissioners, Sheriff, and the District Attorney's supplement. (Under the Charter, the Auditor's salary is set at 80% of the salary of a Circuit Court Judge.)

All of our reports and audit schedule are at: <https://multco.us/auditor>.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of reports issued (Audit Reports + special studies and annual reports)	10	8+2	7+3	5+2
Outcome	Recommendation implementation rate - within 5 years (implemented or in progress)	92%	92%	94%	92%

**Performance Measures Descriptions**

The output measure includes reports on audits, special studies, and traditional annual reports on the Good Government Hotline and implementation of audit recommendations. The output measure is reduced due to the 3% budget constraint which translates to a loss of 0.30 FTE. This reduces the number of audits the office can complete in the fiscal year. The outcome measure reports the percentage of audit recommendations that are implemented or in-progress over a rolling five-year period.

## Legal / Contractual Obligation

County Charter 8.10 states, "The auditor shall conduct performance audits of all county operations and financial affairs and make reports thereof to the board of county commissioners according to generally accepted government auditing standards. The auditor may also conduct studies intended to measure or improve the performance of county efforts. Government auditing standards outline our practices, including ongoing training and peer reviews; we will be peer reviewed this year. Other Charter duties include the Salary Commission and redistricting after the census every ten years. The County Code establishes the Audit Committee and our work in supporting that function and contract.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,362,911	\$0	\$1,398,401	\$0
Contractual Services	\$158,000	\$0	\$168,000	\$0
Materials & Supplies	\$29,458	\$0	\$34,491	\$0
Internal Services	\$187,431	\$0	\$197,338	\$0
<b>Total GF/non-GF</b>	<b>\$1,737,800</b>	<b>\$0</b>	<b>\$1,798,230</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,737,800</b>		<b>\$1,798,230</b>	
<b>Program FTE</b>	8.58	0.00	8.29	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 10005-19 Auditor's Office

Approximately 98% of the budget is essentially fixed (Personnel, External Audit Contract, Internal Services), which makes it difficult to reach targeted budget decreases.



**Department:** Nondepartmental      **Program Contact:** Jennifer McGuirk  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10005A-20  
**Program Characteristics:**

**Executive Summary**

County Charter creates several duties for the County Auditor, including that “the auditor shall conduct performance audits of all county operations and financial affairs.” This is a significant task given the County’s numerous departments, offices, and programs. The County Auditor directs an office including seven staff auditors, whose experience and dedication are essential for the Auditor to meet Charter requirements.

**Program Summary**

County Charter creates several duties for the County Auditor, including that “the auditor shall conduct performance audits of all county operations and financial affairs.” This is a significant task; County operations take place through numerous departments and offices, including the Departments of Community Justice, County Management, County Assets, and County Human Services, and the Health Department, Sheriff’s Office, District Attorney’s Office, Joint Office for Homeless Services, and Office of Diversity and Equity. The County Auditor directs an office including seven staff auditors, whose experience and dedication are essential for the Auditor to meet Charter requirements.

This program offer represents 0.30 of a staff auditor FTE. During her campaign for office, Auditor McGuirk pledged to start several audits in FY 2020: conditions in County jails, in homes for seniors and individuals with disabilities, and of how vulnerable individuals access County supports to stay in their homes or exit houselessness. The 0.30 FTE represented by this program offer is critical to completing at least two of them during FY 2020, and fulfilling Auditor McGuirk’s promise to County community members, who voted overwhelmingly for her audit agenda. This 0.30 FTE is critical to keeping the County Auditor in compliance with County Charter.

Auditor McGuirk’s office is already understaffed when compared to other auditor’s offices that serve jurisdictions of comparable size and jurisdictional staff. On average, these auditor’s offices have eight staff auditors, plus administrative support. This program offer will keep the County Auditor’s Office from dipping further below this average by maintaining seven staff auditor positions.

All of our reports and audit schedule are at: <https://multco.us/auditor>.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of reports issued (audits)	N/A	N/A	N/A	2
Outcome	Recommendation implementation rate - within 5 years (implemented or in progress)	92%	92%	94%	92%

**Performance Measures Descriptions**

The output measure represents reports on audits. The outcome measure reports the percentage of audit recommendations that are implemented or in-progress over a rolling five-year period.

## Legal / Contractual Obligation

County Charter 8.10 states, "The auditor shall conduct performance audits of all county operations and financial affairs and make reports thereof to the board of county commissioners according to generally accepted government auditing standards. The auditor may also conduct studies intended to measure or improve the performance of county efforts. Government auditing standards outline our practices, including ongoing training and peer reviews; we will be peer reviewed this year. Other Charter duties include the Salary Commission and redistricting after the census every ten years. The County Code establishes the Audit Committee and our work in supporting that function and contract.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$58,587	\$0
Materials & Supplies	\$0	\$0	\$1,653	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$60,240</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$60,240</b>	
<b>Program FTE</b>	0.00	0.00	0.30	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Craig Gibons  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Tax Supervising and Conservation Commission (TSCC) carries out statutory mandates to oversee budget, debt, and property tax issues of local governments in Multnomah County. In carrying out these mandates, the TSCC protects and represents public interest, ensures local government compliance with Local Budget Law, promotes economy and efficiency within those local governments, and provides budgetary advice and assistance.

### Program Summary

The Tax Supervising and Conservation Commission (TSCC), established by the Oregon Legislature in 1919, is an independent and impartial panel of five governor-appointed citizen volunteers that review and monitor the financial affairs of local governments in Multnomah County. The TSCC reviews the budgets of all 41 local governments to ensure compliance with local budget law and is responsible for oversight of its 27 member taxing districts.

The review and oversight includes checking to see that budgets are balanced, property tax revenue projections are reasonable, and that the budget processes comply with state and local budget laws. TSCC staff works closely with the county assessor's office as a double check that property tax levies are requested and calculated accurately. These efforts reduce violations of local budget law, especially if the error results in a property tax levy that exceeds authority.

In addition to its legally mandated oversight role, the TSCC offers training and consulting services to member jurisdictions. Recent examples include: two TSCC budget training workshops, budget law training at the Spring and Fall Oregon Government Finance Officers Association conference, 11 budget hearings, and five tax measure hearings. TSCC staff is also active state-wide on budget and property tax issues in both a practitioner role and a legislative advisory role.

The Commission considers the citizens to be its primary customers and seeks to make the financial affairs of local governments more transparent and accountable to those citizens. Funding for the TSCC comes from two sources: member districts, the share of which is calculated by statutory formula, and the state's County Assessment Function Funding Assistance (CAFFA) Grant.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Provide training and advisory services to member jurisdictions	50	60	85	80
Outcome	Reduce number of objections and recommendations in certification letters	9	10	10	10
Output	Public Hearings Conducted	14	15	15	15

### Performance Measures Descriptions

## Legal / Contractual Obligation

ORS 294.625 (1) The Commission has jurisdiction over all municipal corporations principally located in Multnomah County with populations exceeding 200,000 and are subject to local budget law. (12 Districts)

ORS 294.625 (2) The Commission has jurisdiction over all municipal corporations principally located in Multnomah County with populations not exceeding 200,000 that are subject to local budget law and have not formally opted out of TSCC's jurisdiction. (29 Districts of which 12 have opted out). The number of non-members has declined recently as three districts have rejoined TSCC in the last three years.

Jurisdiction includes: holding hearings for large districts; reviewing and certifying all budgets for member districts; and compiling and publishing an annual report including all budget, property tax and indebtedness information by district.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$331,827	\$0	\$340,930	\$0
Contractual Services	\$4,930	\$0	\$3,800	\$0
Materials & Supplies	\$15,830	\$0	\$16,620	\$0
Internal Services	\$2,109	\$0	\$3,990	\$0
<b>Total GF/non-GF</b>	<b>\$354,696</b>	<b>\$0</b>	<b>\$365,340</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$354,696</b>		<b>\$365,340</b>	
<b>Program FTE</b>	2.00	0.00	2.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10006-19 Tax Supervising and Conservation Commission

**Department:** Nondepartmental      **Program Contact:** Julie Sullivan-Springhetti  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Communications Office connects people in Multnomah County to their government and County employees to one another. We do this by providing accurate, timely and responsive information on County services, employees and news. Staff chronicle, curate and disseminate the work of the Board of County Commissioners and County departments. The Office enables citizens to express their needs and ideas by conducting public engagement, providing public records and working effectively with media. The Office also provides emergency and crisis communications.

### Program Summary

Communications staff create accessible materials to engage and inform the public through writing, photography, video, audio recordings and graphic design. The Office's overarching value is: "All are welcome here." The understanding is that everyone in Multnomah County and beyond is valued and should have access to services. With that in mind, all our communication strives to provide representation, accessibility and content that is inclusive. All stories, photos, video and graphic design have sensitive and respectful representations of our diverse community and workforce. We are constantly striving to accurately depict the staff, programs, clients, neighborhoods and partners we serve. Accessibility is key to every design, print, broadcast and online product. The effort to reach a full audience drives decisions from language translation, to font size, to video formats. To assure inclusiveness, we begin every task asking: 'Who is most affected?,' 'Who needs to know?' and 'Who is being left out?' This lens helps us include more diverse voices, challenge our assumptions and be a stronger bridge to the community.

The Office creates and maintains more than 20 websites and amplifies that information on the County's main social media accounts: Facebook, Twitter, Instagram. The Office conducts all media relations and media training. Staff create photos, videos and news stories for multco.us and for use by news organizations ranging from culturally specific newspapers to national and international television networks. The Office works 24/7 to monitor and develop emergency health and safety communications for the public and employees. They support County leadership by developing position statements, op-eds and news releases. Using strategic communications, the Communications staff proactively anticipate issues and advise elected and department leaders and staff on critical concerns. The Office develops public education campaigns and convenes public meetings. The staff receive and complete public records requests. The Office also connects all County employees to one another through the weekly Wednesday Wire newsletter. Staff develops a cohesive voice, style and brand for the organization and maintains those through constant interaction across departments. Key objectives for 2020:

- Increase access to County services by increasing public awareness of programs and initiatives.
- Increase connections to populations with low use of existing communication channels.
- Support Workforce Equity through a comprehensive website, glossary, news, surveys and other engagement.
- Increase professionalism and public confidence in County employees through training on media, social media, photography and design standards.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of news stories generated by the office in all media -- TV, print, radio, County website and blogs	1,260	1,700	1,720	1,725
Outcome	Number of multi-media videos/projects produced by the office	44	50	50	52
Output	Number of Twitter users for the County	27,594	28,000	31,000	31,500
Output	Number of Facebook followers for the County	3,700	3,800	5,100	5,150

### Performance Measures Descriptions

The performance measure 1 captures traditional media, while 3 and 4 capture social media reach. The multi-media projects capture the number of videos produced and figures have been adjusted based on the capacity of one full-time staff member dedicated to video.

## Legal / Contractual Obligation

Meet the spirit and intent of Oregon's public records law ORS 192.410 to 192.505, which governs public bodies and custodians of public records.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,438,507	\$0	\$1,513,764	\$0
Contractual Services	\$10,870	\$0	\$11,310	\$0
Materials & Supplies	\$29,782	\$0	\$28,948	\$0
Internal Services	\$158,271	\$0	\$167,778	\$0
<b>Total GF/non-GF</b>	<b>\$1,637,430</b>	<b>\$0</b>	<b>\$1,721,800</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,637,430</b>		<b>\$1,721,800</b>	
<b>Program FTE</b>	11.00	0.00	11.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10007-19 Communications Office

**Department:** Nondepartmental      **Program Contact:** Jenny Madkour  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The mission of the Office of County Attorney is to provide the highest quality and cost effective legal advice and representation. The Office reviews and advises on the legal aspects of County government operation, defends claims against the County and employees acting in their official capacity, and assists with Federal, State, and County legal requirements. The Office houses the County's Privacy Officer and related Privacy Program. The County Attorney collaborates with risk management, provides legal training and advice before legal issues become legal problems.

**Program Summary**

The Office of County Attorney prepares and reviews legal documents including contracts, Ordinances, Resolutions, Board Orders, Executive Rules, Administrative Procedures, and others. It provides legal advice and counsel to the Board of County Commissioners, the Chair, the Sheriff, the Auditor, the District Attorney, County Departments, Offices, Advisory Boards, Districts, Commissions and Committees. It prepares formal written opinions deemed necessary by the County Attorney regarding significant interpretations of federal and state laws, the Charter, County Code and other legal requirements. The Office controls and supervises all civil actions and legal proceedings where the County is a party or has a legal interest. The Office represents and defends any legal action, matter or proceeding in any court or tribunal and as requested by the Board.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Attorney Direct Service Hours	26,448	24,000	24,000	24,500
Outcome	Attorney time dedicated to direct client services	92%	91.5%	92%	92%
Input	Number of tort claims received	127	120	113	120

**Performance Measures Descriptions**

The number of attorney direct service hours represents attorney time dedicated to litigation, legal consultation, legal document preparation and review, and client training. Direct service hours exclude time spent on professional development and administrative tasks. A tort claim is a notice of intent to bring a lawsuit for damages against the County or its employees. Upward and downward trends in these claims indicates future workload and is used for risk management.

## Legal / Contractual Obligation

Multnomah County Code Chapter 25 established the Office of County Attorney and charges the County Attorney to be the Chief Legal Officer of the County.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$4,962,671	\$0	\$5,327,780
Contractual Services	\$0	\$35,000	\$0	\$272,401
Materials & Supplies	\$0	\$238,851	\$0	\$225,310
Internal Services	\$0	\$615,178	\$0	\$677,039
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,851,700</b>	<b>\$0</b>	<b>\$6,502,530</b>
<b>Program Total:</b>	<b>\$5,851,700</b>		<b>\$6,502,530</b>	
<b>Program FTE</b>	0.00	25.80	0.00	26.00

Program Revenues				
Other / Miscellaneous	\$0	\$5,851,700	\$0	\$6,502,530
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,851,700</b>	<b>\$0</b>	<b>\$6,502,530</b>

## Explanation of Revenues

Funding for the Office of County Attorney is generated through a portion of the liability insurance rate on County payroll expenses.

## Significant Program Changes

Last Year this program was: FY 2019: 10008-19 County Attorney's Office



**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The central purpose of Multnomah County's Local Public Safety Coordinating Council (LPSCC) is to coordinate the public safety plans, policies, operations, and strategies of local government agencies to improve the local public safety system's cost-effectiveness and responsiveness to the needs of the community. Since 1995, LPSCC has convened leaders from local governments; public safety, social service and education agencies; private service providers and local communities throughout the County to collaborate on and improve public safety system outcomes.

**Program Summary**

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities" (ORS 423.560). To carry out this mission, LPSCC's Executive Committee meets monthly to share information, identify issues and problems affecting public safety, and oversee development of new plans, policies, and strategies. The Executive Committee is co-chaired by Multnomah County Chair Deborah Kafoury and City of Portland Mayor Ted Wheeler.

LPSCC and its partners collaborate on the development of (a) solutions to problems in the intergovernmental operations of the public safety system, (b) coordinated policies to improve that system and (c) evidence-based strategies that address issues important to community safety. The Council directs the work of several subcommittees and smaller working groups that focus on the most critical issues within the justice system. Examples include: the Youth and Gang Violence Steering Committee, coordination between the public safety and mental health systems, decreasing Racial and Ethnic Disparities, and overseeing the Justice Reinvestment Program (House Bill 3194 from 2013). It also oversees the operation of Decision Support System-Justice (DSS-J), the County's public safety data warehouse, which is a repository for public safety related data.

In FY 2020, LPSCC will fund the following staff: a full-time Executive Director, who directs and coordinates inter-agency public safety policy discussions; a full-time Research Project Manager, who performs and manages cross-agency data and research projects, a full-time temporary Project Manager (grant funded and noted in 10009B), and a full-time Executive Assistant, who provides organizational and communications support. In addition, to support implementation of the MacArthur Foundation's Safety + Justice Challenge (SJC), LPSCC funds three Limited-Duration Assignment staff; a data analyst, a project manager, and a community engagement specialist.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of LPSCC Executive Committee and Subcommittee Meetings	180	150	160	170
Outcome	Average percentage of statutorily mandated LPSCC representatives present at Executive Committee meeting	68	70	65	65
Output	Number of policy recommendations made to County Commissioners	10	10	10	10

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities" (ORS 423.560). In FY 2010, Multnomah County's Board of Commissioners transferred responsibility for the administration of DSS-J to the County's LPSCC, which agreed to oversee the development and maintenance of DSS-J and ensure data accuracy and security through a Policy Committee.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$41,796	\$619,141	\$0	\$695,847
Contractual Services	\$0	\$21,000	\$0	\$38,500
Materials & Supplies	\$0	\$118,437	\$0	\$126,639
Internal Services	\$687,204	\$33,599	\$743,880	\$57,494
<b>Total GF/non-GF</b>	<b>\$729,000</b>	<b>\$792,177</b>	<b>\$743,880</b>	<b>\$918,480</b>
<b>Program Total:</b>	<b>\$1,521,177</b>		<b>\$1,662,360</b>	
<b>Program FTE</b>	0.00	3.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$552,177	\$0	\$584,480
Other / Miscellaneous	\$0	\$240,000	\$0	\$304,000
Beginning Working Capital	\$0	\$0	\$0	\$30,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$792,177</b>	<b>\$0</b>	<b>\$918,480</b>

## Explanation of Revenues

State Department of Corrections through SB 1145 - \$584,480  
 MacArthur Foundation funds are used to implement the Safety + Justice Challenge - \$179,000  
 MacArthur Community Engagement Project - \$125,000

## Significant Program Changes

**Last Year this program was:** FY 2019: 10009A-19 Local Public Safety Coordinating Council

LPSCC was the recipient of the MacArthur SJC Community Engagement Grant. This grant is intended to support efforts to engage the community to guide our SJC jail-reduction work. With these supplemental funds, Multnomah County will hire a limited duration, community engagement specialist to host community meetings, develop an advisory board for the Diane Wade House, and expand existing community engagement efforts such as the judicial listening sessions.

**Department:** Nondepartmental                      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Existing Operating Program                      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The central purpose of Multnomah County's Local Public Safety Coordinating Council (LPSCC) is to coordinate the public safety plans, policies, operations, and strategies of local government agencies to improve the local public safety system's cost-effectiveness and responsiveness to the needs of the community. This program offer is specifically for the justice reinvestment funds allocated from HB 3194 (2013) and HB 3078 (2015).

**Program Summary**

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities" (ORS 423.560). To carry out this mission, LPSCC's Executive Committee meets monthly to share information, identify issues and problems affecting public safety and oversee development of new plans, policies, and strategies. The Executive Committee is co-chaired by Multnomah County Chair Deborah Kafoury and City of Portland Mayor Ted Wheeler.

LPSCC and its partners collaborate on the development of (a) solutions to problems in the intergovernmental operations of the public safety system, (b) coordinated policies to improve that system and (c) evidence-based strategies that address issues important to community safety. The Council directs the work of several subcommittees and smaller working groups that focus on the most critical issues within the justice system, including implementation of HB 3194/3078 (Multnomah County Justice Reinvestment Program and services to victims of crime, as directed by 3194/3078 and the Criminal Justice Commission).

This program offer houses the funding for victim's services contracts, part of HB 3194/HB 3078. House Bill 3194 established the Justice Reinvestment Grant Program, which requires 10% of funds be spent on victims services. House Bill 3078 added additional funds to be used for the same victims services programs. The 10% is administered by LPSCC to contract with community-based victims services agencies. The funds must be allocated to underserved populations. As indicated in the rules developed by the Criminal Justice Commission, County LPSCCs are responsible for choosing and contracting with victim's services agencies.

This funding also supports a full time LPSCC Project Manger for the Multnomah County Justice Reinvestment Program.

**Performance Measures**

<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output	Number of contracts executed with community-based victims services agencies*.	3	3	3	3
Outcome	Number of crime victims served with crime victims funding.	449	580	500	500

**Performance Measures Descriptions**

\*Contracts result in services for previously underserved victim populations.

## Legal / Contractual Obligation

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities (ORS 423.560). As part of House bill 3194, counties apply for justice reinvestment grant funds. The State Criminal Justice Commission, which oversees statewide implementation of House Bill 3194, stated these applications "must be submitted by a local public safety coordinating council." Via HB3194, the LPSCC is also charge by the CJC to contract with and allocate funds to victim's services agencies.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$158,690	\$0	\$171,166
Contractual Services	\$0	\$507,366	\$0	\$458,194
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$666,056</b>	<b>\$0</b>	<b>\$629,360</b>
<b>Program Total:</b>	<b>\$666,056</b>		<b>\$629,360</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$666,056	\$0	\$629,360
<b>Total Revenue</b>	<b>\$0</b>	<b>\$666,056</b>	<b>\$0</b>	<b>\$629,360</b>

## Explanation of Revenues

State HB 3194 Criminal Justice Commission (CJC) - \$549,360

## Significant Program Changes

**Last Year this program was:** FY 2019: 10009B-19 HB3194 Justice Reinvestment

FY 2019 included biennial carryover due to the late start up of the program.

**Department:** Nondepartmental      **Program Contact:** Dani Bernstein  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Office of Community Involvement (OCI) was established by County Charter to develop and maintain community involvement programs and procedures for the purpose of facilitating direct communication between the people of Multnomah County and the Board of County Commissioners.

**Program Summary**

The OCI coordinates programs and activities designed to engage people from Multnomah County's diverse communities and support the County's community involvement programs. Programming includes community outreach, supporting county advisory groups, trainings and volunteer recognition. The OCI conducts continual outreach and recruitment to inform communities about opportunities to engage with Multnomah County by attending community events, fostering relationships with community partners and civic leadership programs, and through communications including social media and email.

The OCI maintains a community contact list for communications and sends out a quarterly e-newsletter with opportunities to volunteer on County advisory groups and participate in public input processes. The OCI provides a single point of contact for community members interested in volunteering through information and resources at its physical office, by maintaining lists of committees and other volunteer opportunities, managing inquiry and application processes, referring inquiries from the public to appropriate opportunities and resources, maintaining a database of active and potential volunteers, and facilitating board appointments to the Community Involvement Committee (CIC) and Community Budget Advisory Committees (CBACs). The OCI also hosts an annual volunteer recognition event for all county departments.

The OCI staffs the volunteer members of the CIC, including providing support, training and coordination for CIC meetings. The CIC serves as Multnomah County's advisory body on community engagement and involvement. CIC members engage in an ongoing review of the County's community involvement policies and programs, bring community concerns to County leadership, and assist in facilitating communication between the County and the community.

The OCI manages the CBAC program by leading recruitment to fill vacancies, coordinating CBAC orientation and report submission deadlines, and serving as a resource for county employees who staff CBACs. The OCI also provides staffing and technical and clerical assistance to the County's Central and Non-Departmental CBACs.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of CIC meetings and subcommittee meetings	20	25	3	15
Outcome	Percentage of participants in activities who felt time was well spent	90.5%	90%	90%	90%
Output	Number of community events attended	23	20	20	12
Outcome	Percentage of volunteer positions on CIC and CBACs filled	86%	85%	85%	85%

**Performance Measures Descriptions**

These measures reflect key activities and outcomes for the OCI according to its primary functions.

For performance measure 1, the CIC was on hiatus beginning June 2018 and is anticipated to resume meetings in Spring 2019.

## Legal / Contractual Obligation

Multnomah County Home Rule Charter Chapter 3.75; Resolution 95-245; Multnomah County Code 3.250-3.253, 3.300-3.306, 25.810-25.830. The County Charter states that the commission “shall appropriate sufficient funds for the operation of the office and the committee.”

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$200,544	\$0	\$216,327	\$0
Contractual Services	\$2,000	\$0	\$6,080	\$0
Materials & Supplies	\$16,081	\$0	\$15,530	\$0
Internal Services	\$46,548	\$0	\$48,713	\$0
<b>Total GF/non-GF</b>	<b>\$265,173</b>	<b>\$0</b>	<b>\$286,650</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$265,173</b>		<b>\$286,650</b>	
<b>Program FTE</b>	2.00	0.00	2.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10010-19 Office of Community Involvement

**Department:** Nondepartmental      **Program Contact:** Marina Baker  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Office of the Board Clerk accounts for all functions and expenditures necessary for efficient operation of the Board of County Commissioners, who work on behalf of residents individually and as members of the Board. The Office of the Board Clerk supports the Board as a body by providing those things necessary for the Board to function effectively and collectively and provides information on items brought before the Board and public.

### Program Summary

The Office of the Board Clerk manages all Board meetings, agendas, records, indices and schedules. It maintains and disseminates information pertaining to adopted resolutions, orders, ordinances and proclamations.

Board Clerks act to maintain the integrity of all Multnomah County processes and procedures pertaining to the Board of County Commissioners. They uphold the Board of Commissioners' vision and support its mission in their work.

Board Clerks serve as parliamentarians at all meetings, take minutes, prepare meeting records and notices and provide internal and external customer service, information and referral. They perform responsible clerical and research work associated with the proceedings of the meetings and the Board's actions and records. Board Clerks provide information on upcoming board items, post public notices and schedule the use of meetings space and equipment.

Board Clerks are responsible for notifying internal and external customers of scheduled meetings and cancellations; processing, posting and distributing all agenda submissions and official documents that result from board action and directives and ensuring access for future internal and external inquiries. Board clerks provide members of the public with agendas, notices of public hearings, and access to public records. They provide custody of the records, books and documents of the Board and protect and preserve the official County records both electronically and on paper for perpetuity.

The Office pays for the County's memberships in advocacy organizations including the National Association of Counties, Association of Oregon Counties, and Leader's Round Table.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Total number of Board related documents processed.	7,539	7,500	4,781	5,000
Outcome	Board Meeting Minutes uploaded and available to the public within two weeks.	N/A	N/A	N/A	90%
Outcome	Board adopted resolutions, proclamations, orders and ordinances available to the public within 1 week.	N/A	N/A	N/A	90%

### Performance Measures Descriptions

Board related documents are digital files and include board packets, proclamations, resolutions, orders, ordinances and other related documents. Output of documents processed is lower than previous years due to increased efficiency of documents saved electronically.

## Legal / Contractual Obligation

Commissioners affirm to support the Constitutions of the United States, the State of Oregon, the Multnomah County Home Rule Charter, and Multnomah County Laws. The Board adopts and publishes rules for the conduct of Board meetings, they serve as the governing body for Dunthorpe-Riverdale Sanitary and Service District No. 1; Mid-County Street Lighting Service District No. 14; sit as the County Budget Committee; The Hospital Facilities Authority; Public Contract Review Board; Multnomah County Board of Health and Multnomah County Library District Board.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$286,232	\$0	\$290,493	\$0
Contractual Services	\$31,050	\$0	\$32,300	\$0
Materials & Supplies	\$304,730	\$0	\$323,628	\$0
Internal Services	\$424,348	\$0	\$456,047	\$0
<b>Total GF/non-GF</b>	<b>\$1,046,360</b>	<b>\$0</b>	<b>\$1,102,468</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,046,360</b>		<b>\$1,102,468</b>	
<b>Program FTE</b>	2.00	0.00	2.35	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

\$37,768 one-time-only General Fund

## Significant Program Changes

**Last Year this program was:** FY 2019: 10011-19 Office of the Board Clerk

The 0.35 FTE reflects increased time spent by the Constituent Relations Coordinator on backup Board Clerk training and monthly duties including supporting board meetings, scheduling meeting space and serving as an initial point of contact for the Board's offices. \$37,768 of one-time-only funds for the second of four annual payments toward the full Association of Oregon Counties (AOC) assessment of \$147,070 to repay funds the AOC inappropriately borrowed from the Road Fund.



**Department:** Nondepartmental      **Program Contact:** Christopher Voss  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Multnomah County Emergency Management (MCEM) coordinates disaster preparedness activities in Multnomah County. This includes planning, training, exercise and equipment procurement for staff and departments and coordination with cities, special districts and nongovernmental organizations. MCEM maintains a 24/7 call number to respond to requests from county and city public safety partners and can quickly set up an operations center to respond to county emergencies. MCEM also authors and updates several plans including the County Mitigation Plan and County Emergency Operations.

### Program Summary

The MCEM program focus includes: 1) County general and departmental preparedness, 2) Intergovernmental and regional preparedness, 3) Citizen and community preparedness and resilience and 4) the County's ability to continue critical operations in an emergency situation. MCEM regularly collaborates with local jurisdictions, districts and agencies engaged in emergency planning.

MCEM understands that a resilient community can potentially reduce the burden on limited emergency response capacity in a severe emergency. For that reason, MCEM works with businesses, non-governmental organizations, faith based groups, volunteer organizations and directly with community members to encourage disaster resilience and create a coordinated response to disasters. MCEM fosters citizen preparedness and community resilience through working relationships with a diverse group of community partner organizations.

Program activity is informed by the Emergency Management Performance Grant (EMPG) work agreement, which includes staff training plans, a rigorous disaster exercise schedule, disaster plan management and coordination with volunteer, state and federal partners.

During an emergency, MCEM activates and manages the County Emergency Coordination Center (ECC) which is staffed by employees from various County departments to provide a single location where strategic direction, response coordination and resource support for incident response is carried out.

In a disaster, Emergency Management functions as the state-mandated conduit for obtaining state and federal resources to support local emergency response for the County, cities and districts, and it coordinates emergency and disaster declarations.

After a disaster, Emergency Management coordinates with state and federal agencies that provide post-disaster assistance and also guides the community recovery process.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Annual exercise performance objectives successfully tested.	100%	100%	100%	100%
Outcome	Oregon Emergency Management requirements met for annual performance grant.	100%	100%	100%	100%

### Performance Measures Descriptions

Output: Annual exercise of Emergency Coordination Center and evaluation of performance of established objectives in an After Action Report (AAR). Outcome: There are 8 eligible funding areas, each with multiple planning activities, in the Emergency Performance Grant (EMPG). This annual measurement covers activities for a competent emergency management program.

## Legal / Contractual Obligation

ORS 401.305 requires Multnomah County to establish an emergency management program and Multnomah County Code Chapter 25.410 establishes the County's Office of Emergency Management.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,031,154	\$266,404	\$1,174,434	\$283,457
Contractual Services	\$129,084	\$80,000	\$109,900	\$290,000
Materials & Supplies	\$129,277	\$13,400	\$43,307	\$103,612
Internal Services	\$501,155	\$7,267	\$515,119	\$51,301
<b>Total GF/non-GF</b>	<b>\$1,790,670</b>	<b>\$367,071</b>	<b>\$1,842,760</b>	<b>\$728,370</b>
<b>Program Total:</b>	<b>\$2,157,741</b>		<b>\$2,571,130</b>	
<b>Program FTE</b>	7.06	1.94	7.30	1.70

Program Revenues				
Intergovernmental	\$0	\$367,071	\$0	\$728,370
<b>Total Revenue</b>	<b>\$0</b>	<b>\$367,071</b>	<b>\$0</b>	<b>\$728,370</b>

## Explanation of Revenues

\$305,170 - Emergency Management Performance Grant (EMPG)  
\$82,400 - Regional Disaster Preparedness Organization (RDPO) JIT Training Grant  
\$76,800 - State of Oregon Homeland Security Grant  
\$245,000 - Catastrophic Planning/Continuity of Government grant  
\$19,000 - Hazard Mitigation Grant Program

## Significant Program Changes

Last Year this program was: FY 2019: 10012A-19 Office of Emergency Management

**Department:** Nondepartmental      **Program Contact:** Christopher Voss  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Office of Emergency Management works closely with key partners to plan, train, exercise and provide an equitable response to emergencies throughout the County. The process begins with an analysis of hazards and the creation of specific programs to reduce or eliminate the impact of those hazards. The Office also coordinates multi-disciplinary responses to disasters where traditional responders, such as fire and police, need to work closely with human service and public works agencies. This program offer will maintain the current programs and services supported by the office.

**Program Summary**

This program offer restores funding to maintain critical programs and operations within the Office of Emergency Management. This includes the Office's educational and preparedness programs, which included 56 training events in 2018 for 2,258 attendees and coordination for 4,400 volunteer and intern hours that supported emergency activations and emergencies in 2018.

This program offer will also allow the office to maintain certain programs and projects including: county membership in the Regional Disaster Preparedness Organization; Emergency Operations Center systems, which allow us to share information and resource requests across the region and with the State; emergency communication and notification systems, which provides redundant communication after a disaster and also allows the County to send alerts to both County employees and the community via hard line, e-mail, and cell phones; and provides the Office with minimal funding to support the County's response costs during smaller events, which can include blankets during winter shelter operations, call center costs for supporting emergencies, transportation costs, as well as security and cleaning services.

Lastly, this program offer also allows the office to maintain current funding for translation of preparedness materials and the printing of operational plans and training materials.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output					
Outcome					

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$25,000	\$0
Materials & Supplies	\$0	\$0	\$59,250	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$84,250</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$84,250</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Jetson Black

**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

The Office of Government Relations represents the Board of Commissioners and county departments before the United State Congress, the Oregon Legislature and local governing bodies to advance Multnomah County's annual state and federal legislative agenda. This function is vital in protecting the interests of Multnomah County.

**Program Summary**

The Office of Government Relations manages the legislative agenda set by the Board of Commissioners and facilitates interdepartmental cooperation on intergovernmental efforts.

The Director manages budget and compliance issues, manages federal government relations, and together with the Deputy Director serves as the state lobbyist for the county, leads stakeholder and coalition meetings and provides regular updates to the Board of Commissioners, departments and other staff.

The Policy Manager provides analysis on key policy issues and research to support action on county priorities. The Senior Legislative Coordinator is responsible for tracking state and federal legislation and working with county department staff on legislative coordination.

The Senior Grant Coordinator works across departments and systems to increase the county's capacity to secure, track, and successfully implement competitive grants aligned with the County's mission and values.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Develop and pass a comprehensive legislative agenda	1	1	1	1
Outcome	Provide an annual report that details bill outcomes and progress on county priorities	1	1	1	1
Output	Number of trainings, planning groups, and presentations to increase county-wide competitive grant capacity	24	24	24	24

**Performance Measures Descriptions**

The adoption of the legislative agenda is the culmination of a broad process of broad consultation with employees, departments, elected officials, advocacy organizations and community groups. The annual report provides transparency and identifies both positive and negative results. Planning groups, trainings and presentations ensures broad access to the knowledge, systems and resources necessary for submitting successful grants.

## Legal / Contractual Obligation

All government relations activities shall be consistent with federal laws and policies, State of Oregon statutes, the Multnomah County Home Rule Charter and Multnomah County Laws.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$859,643	\$0	\$871,599	\$0
Contractual Services	\$117,900	\$0	\$122,700	\$0
Materials & Supplies	\$30,453	\$0	\$38,531	\$0
Internal Services	\$62,154	\$0	\$74,460	\$0
<b>Total GF/non-GF</b>	<b>\$1,070,150</b>	<b>\$0</b>	<b>\$1,107,290</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,070,150</b>		<b>\$1,107,290</b>	
<b>Program FTE</b>	5.00	0.00	5.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10016-19 Government Relations Office

**Department:** Nondepartmental      **Program Contact:** Ben Duncan  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Office of Diversity and Equity (ODE) is a team of professional resource experts and a partner in advancing equity by designing and delivering tangible resources, expertise, best and promising practices, technical support, data and data analysis. ODE works to advance transformational change at the county and develops empowering tools for internal and external communities.

**Program Summary**

ODE provides leadership and resources for advancing organizational equity and inclusion change efforts that support the business of the county.

ODE works with and within departments to lead, support and complement equity and social justice work throughout the County. Projects and resources include: Civil Rights policy development and compliance, Workforce Equity Strategic Plan implementation, policy analysis, Equity and Empowerment Lens technical assistance and consultation, research and best practices for data collection and analysis, training on equity practice and issues, and participates in regional and national networks. ODE is represented as a Steering Committee jurisdiction for the National Governing Alliance for Racial Equity, and planning partner for the NW Public Employee Diversity Conference.

This offer funds FTE for the ongoing roll-out and evaluation of the Workforce Equity Strategic Plan, application of the Equity and Empowerment Lens with a Racial Justice focus; technical assistance, training, research, development and guidance on policy advancing equity; staffing and leadership development support for the Multnomah Youth Commission; coordination of the College to County Program, and coordination of Employee Resource Groups

This offer also ensures compliance with federal statutes related to Americans with Disabilities, Affirmative Action/Equal Employment Opportunity, and discrimination through Title VI administration.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Employee Resource Groups managed and coordinated	9	9	9	9
Outcome	percentage of Workforce Equity Strategic Plan performance measures met	N/A	N/A	N/A	100%
Output	number of college to county placement	38	n/a	37	40

**Performance Measures Descriptions**

For performance measure 2, ODE has shifted focus on the implementation of the Workforce Equity Strategic Plan performance measures, which will reflect a multi-year outcome of having 100% of performance targets met through the life of the strategic plan. performance measure aligns with WESP goal of 50 college to county positions by 2022

## Legal / Contractual Obligation

Title II, Title VI administration for the County  
Affirmative Action, Equal Employment Opportunity  
Administers discrimination complaint/grievance processes

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$854,763	\$0	\$899,943	\$0
Contractual Services	\$20,700	\$0	\$21,530	\$0
Materials & Supplies	\$39,210	\$0	\$39,918	\$0
Internal Services	\$118,279	\$0	\$126,579	\$0
<b>Total GF/non-GF</b>	<b>\$1,032,952</b>	<b>\$0</b>	<b>\$1,087,970</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,032,952</b>		<b>\$1,087,970</b>	
<b>Program FTE</b>	6.00	0.00	6.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2019: 10017A-19 Office of Diversity and Equity



**Department:** Nondepartmental      **Program Contact:** Ben Duncan  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Multnomah Youth Commission, the official youth policy body for Multnomah County is a group of 37 young people, ages 13- 21, that strives to provide a voice for youth in the County's work. In addition to its advisory role within local government, the MYC works to improve the community through service projects. The work of MYC is guided by "Our Bill of Rights: Children + Youth," the nation's first Bill of Rights written by and for young people and adopted by a local government.

**Program Summary**

The Multnomah Youth Commission (MYC) serves the County in several ways. The MYC advises and makes recommendations on policies and programs that impact youth in Multnomah County by engaging with all levels of the organization through committee work, Elected Official Liaison Program, and training and technical assistance for community organizations and government agencies. Through a youth development program and youth policy body, MYC uses authentic youth engagement practices and tools to build the capacity of youth to participate in high-level policy advocacy to ensure that young people form relationships with caring adults, build skills, exercise leadership, and help their communities as they develop into healthy, productive adults. The MYC works with youth and adults throughout our community to change the way violence is viewed and dealt with through the Youth Against Violence Committee and the Rob Ingram Youth Against Violence project mini-grants. These projects aim to empower youth to take lead and work together to address issues most important to their communities, while highlighting and sharing ideas and experiences regarding violence, and building youth-led solutions. All MYC work is guided by "Our Bill of Rights: Children + Youth", the nation's first bill of rights written by and for youth. The MYC is made up of a diverse group of youth dedicated to equity and justice, developing into a nationally recognized youth development program that incorporates participatory action research, policy creation and advocacy, and Youth-Adult Partnership as its foundational underpinnings.

The Office of Diversity and Equity provides leadership and resources for advancing organizational equity and inclusion change efforts. ODE works in collaboration with departments and offices and serves and as equity, inclusion and social justice resource at Multnomah County. The Multnomah Youth Commission (MYC) sits within the Office of Diversity and Equity.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Youth Commission Meetings held	N/A	22	22	22
Outcome	Youth-Led policies impacted and/or advocated for	N/A	N/A	9	12
Output	Number of partnerships established	N/A	N/A	7	10

**Performance Measures Descriptions**

The outcome measure has shifted to reflect the primary role and responsibility of the Multnomah Youth Commission as the official youth policy body for Multnomah County and the City of Portland. This includes both the role of building partnerships and the impact on policies.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$120,185	\$0	\$130,827	\$0
Materials & Supplies	\$0	\$0	\$10,003	\$0
<b>Total GF/non-GF</b>	<b>\$120,185</b>	<b>\$0</b>	<b>\$140,830</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$120,185</b>		<b>\$140,830</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10017B-19 Multnomah Youth Commission Support

**Manager**

**Department:** Nondepartmental **Program Contact:** Ben Duncan

**Program Offer Type:** Innovative/New Program **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The Workforce Equity Strategic Plan (WESP) Project Manager, housed in the Office of Diversity and Equity, will support the Chief Diversity and Equity Officer in the countywide implementation of the WESP. The WESP focuses on four areas: Organizational Culture, Promotion and Professional Development, Retention, and Recruitment and Pipeline Programs.

**Program Summary**

Workforce equity demands that the County identify and address structural and policy barriers to equal employment opportunity faced by our employees and communities because of their race, ethnicity, national origin, disability, gender and gender identity, sexual orientation and other protected classes.

In April 2018, the Board adopted the countywide Workforce Equity Strategic Plan that established minimum standards, timelines and metrics and amended the plan in January 2019 with additional systemic goals and initiatives.

The Workforce Equity Strategic Plan Project Manager will play a lead role in developing and aligning project requirements, plans and timelines, working with stakeholders across departments and throughout the organization to ensure collaboration and consistent practice. The Project Manager will support the WESP Committee, track progress and function as a central hub for WESP questions and concerns.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Coordinate Workforce Equity Committee meetings	N/A	N/A	3	6
Outcome	WESP departmental performance measures met.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Performance measures for WESP implementation and this position will continue to develop.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$166,657	\$0	\$155,051	\$0
Contractual Services	\$0	\$0	\$3,000	\$0
Materials & Supplies	\$0	\$0	\$12,000	\$0
Internal Services	\$0	\$0	\$25,000	\$0
<b>Total GF/non-GF</b>	<b>\$166,657</b>	<b>\$0</b>	<b>\$195,051</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$166,657</b>		<b>\$195,051</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 72000C-19 Workforce Strategic Equity Plan

**Department:** Nondepartmental      **Program Contact:** Ben Duncan  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds two positions in a new Civil Rights Unit in the Office of Diversity and Equity, building capacity to meet expanded responsibilities in the Workforce Equity Strategic Plan (WESP). The unit will advance workforce equity by developing, implementing and monitoring federally required Affirmative Action and Equal Employment requirements, supporting countywide best practices in recruitment, hiring, promotion and termination decisions, and ADA accommodation. The unit will also develop and deliver compliance-related trainings and strengthen WESP-related policies.

**Program Summary**

The Civil Rights Unit within the Office of Diversity and Equity consists of three positions that will be responsible for compliance, exit interviews, policy development, training and consultation and analysis of key hiring, promotion and termination practices and decisions. These three positions are the Civil Rights Administrator, Civil Rights Coordinator (AA/EEO Specialist), and the Equity Specialist for Employees with Disabilities. The Civil Rights Administrator position is currently funded within 10017A - Office of Diversity and Equity. This program offer funds the other two positions.

The Civil Rights Coordinator (AA/EEO Specialist) provides support and additional capacity to the Civil Rights Administrator in executing WESP-related objectives and ensuring regulatory compliance. This position is responsible for ensuring submission and maintenance of all reporting, including: the County's Affirmative Action and Equal Employment Opportunity Plans (EEO-4 report), Vets 4212 report annually, and Title VI reporting in consultation with departmental partners.

The Equity Specialist for Employees with Disabilities works to increase awareness and streamline the formal ADA accommodation process and works to educate, clearly communicate, strengthen and implement policies that support employees with their disabilities in all work spaces. The position will also develop work plans supporting the recommendations in the "Equity and Accommodations for Employees with Disabilities" report (2019), with an emphasis on promoting universal design and other practices that help destigmatize disabilities, and supports Americans with Disability Act policy, practice, and related complaints.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of hires, promotions and terminations analyzed, including prior review of trial service probations	N/A	N/A	N/A	120
Outcome	Percent of exit interviews for voluntary terminations	N/A	N/A	N/A	50%

**Performance Measures Descriptions**

Performance measure 1: Based on estimates from yearly averages (involuntary terminations, including trial service terminations = 66 per year, promotions into management = 56 per year)

## Legal / Contractual Obligation

Americans with Disabilities Act and Title VI Compliance  
Affirmative Action, Equal Employment Opportunity

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$277,356	\$0
Contractual Services	\$0	\$0	\$6,000	\$0
Materials & Supplies	\$0	\$0	\$24,000	\$0
Internal Services	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$357,356</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$357,356</b>	
<b>Program FTE</b>	0.00	0.00	2.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Multnomah County Office of Sustainability was established in 2010 to help plan, implement and coordinate the County's environmental sustainability programs. The Office of Sustainability's mission is to work with County Departments and the community to promote programs and policies that lead to a more equitable, prosperous, and environmentally sound Multnomah County. We envision a Multnomah County that is: Equitable, Livable, Healthy, Resilient, and Low-Carbon.

### Program Summary

The Office of Sustainability works with the community and County departments to develop unique partnerships that help make Multnomah County a better place to live, work, and do business. The Office of Sustainability is not only committed to a healthy planet but also firmly roots our work in Multnomah County's mission to protect the most vulnerable in our community. This value shapes the way we approach sustainability, an approach based on achieving social, economic, and environmental justice.

Major focus areas for FY 2020 include, implementation of the 2015 Climate Action Plan, implementation of the Commercial Building Property Assessed Clean Energy program (PropertyFit), planting trees in low-income low tree canopy neighborhoods in Gresham, advancing the County's ability to engage in Environmental Justice work through the development of the Board adopted Environmental Justice Snapshot, begin work on the 2020 Climate Action Plan update and supporting a culture of resource-conservation in County operations. The Office of Sustainability will accomplish these goals by working with the County's elected leaders to develop and respond to new policies; by providing technical support to County departments and community organizations; through direct program delivery; and through research, data analysis, and reporting.

Climate Action Plan activities will include implementation of an enterprise-wide tracking and accountability tool meant to capture the County's work on the more than 79 County specific actions covered in the plan. The overall purpose of the plan and these activities is to promote a low carbon and resilient community. The office will also work to develop policies and procedures that the County can advocate for or implement that will advance the goals of the plan, for example, developing a low emissions fleet strategy.

The Office of Sustainability will also work to implement the Board's commitment to 100% renewable energy by 2050 through a partnership with business and community to develop sound strategies that will decarbonize our economy and build wealth and autonomy in our communities. The Office will root our work in the principles of environmental justice by working with the Board and community partners to develop and help to implement an environmental justice policy.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Servings of fresh, culturally appropriate produce donated, by pounds and types of food grown.	9748	10,000	0	0
Outcome	Decrease in community wide greenhouse gas emissions over 1990 levels based on trend line analysis.	21%	22%	21%	22%
Output	Number of volunteer hours contributed to Office of Sustainability events or programs.	878	800	250	250
Output	Number of unique County employees engaged with programming offered by the Office of Sustainability.	1569	1,200	1100	1200

### Performance Measures Descriptions

1) Because of transitioning the program to community control the Office will no longer report on this metric. 2) The Office of Sustainability implements BCC adopted Climate Action Plan that calls for Countywide greenhouse gas emissions reduction of 80% over 1990 levels by the year 2050. 3) Most volunteer hours have been generated through the Farm program, without that program, the number of volunteer hours will decrease. 4) The Office seeks to create a culture of conservation through employee engagement.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$630,005	\$17,000	\$643,854	\$17,000
Contractual Services	\$5,700	\$126,000	\$10,930	\$83,000
Materials & Supplies	\$29,810	\$0	\$35,063	\$0
Internal Services	\$65,175	\$0	\$72,683	\$0
<b>Total GF/non-GF</b>	<b>\$730,690</b>	<b>\$143,000</b>	<b>\$762,530</b>	<b>\$100,000</b>
<b>Program Total:</b>	<b>\$873,690</b>		<b>\$862,530</b>	
<b>Program FTE</b>	5.00	0.00	5.00	0.00

Program Revenues				
Intergovernmental	\$0	\$143,000	\$0	\$100,000
Other / Miscellaneous	\$0	\$0	\$5,000	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$143,000</b>	<b>\$5,000</b>	<b>\$100,000</b>

Explanation of Revenues

\$100,000 - East Multnomah Soil & Water Conservation District Green Gresham/Healthy Gresham Tree Planting Grant (2nd of 3 Years)  
 \$5,000 - General Fund - Energy Trust Incentive Rebates

Significant Program Changes

Last Year this program was: FY 2019: 10018-19 Office of Sustainability

In FY 2020 the Office of Sustainability will no longer directly manage the CROPS program and farm. Instead, the Office is transitioning the farm and associated assets into community control. The Urban Agronomist (Program Specialist) position will be eliminated. The Office will add a Program Technician position to support the implementation of the Climate Action Plan and related policy areas. Other focus areas will include the Green Gresham/Healthy Gresham tree planting grant in partnership with the City of Gresham and Friends of Trees. Tree planting will occur in underserved neighborhoods, including Rockwood and Wilkes East. Another area of increased activity will be a focus on developing an analysis of Environmental Justice issues in the community by developing a Multnomah County Environmental Justice snapshot and advancing equity goals through the 2020 CAP update.





Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$50,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was:

This is a new out of target program offer funded with one-time-only General Funds.

**Department:** Nondepartmental      **Program Contact:** Christian Elkin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Regional Arts & Culture Council (RACC) provides contract services to Multnomah County and its residents. Formerly a county bureau (the Metropolitan Arts Commission), RACC became an independent 501(c)(3) organization in 1995 in order to leverage support from other regional government partners and private donors, ultimately investing much more in arts and culture than the County alone can afford. These investments create vibrant neighborhoods, enhance our children's education, and fuel the creative economy with measurable economic benefits for Multnomah County.

**Program Summary**

RACC plays a vital role in the county's economic and community development efforts. Specifically, RACC provides services in five key areas: (1) Through Advocacy, RACC helps build support and resource for arts and culture. (2) RACC Grants provide artists and arts organizations with the base financial support they need to continue serving our community. (3) RACC's nationally acclaimed Public Art program, including the Multnomah County 2% for Art Ordinance, integrates a wide range of art into public spaces. (4) RACC provides other Community Services including workshops for artists, consulting for arts organizations, and a variety of printed and electronic resources; (5) RACC helps K-8 schools integrate the arts into the standard curriculum, and supports art and music teachers that are funded by Portland's arts tax; and (6) RACC invests in arts-related programming that supports vulnerable populations and marginalized communities in Multnomah County, including low-income Oregonians, veterans, East County residents, seniors and people experiencing homelessness.

Arts and culture activities add measurable value to our region's economy and to our quality of life. Artists and arts organizations bring residents together for shared cultural experiences that stimulate creativity which in turn supports more innovative businesses and a richer educational experience for our children. A vibrant arts community serves as a magnet for young creatives, and Multnomah County's investment in the arts contributes to the competitive advantage we have over other regions competing to attract sustainable businesses and an innovative, well-educated workforce. Multnomah County is home to the vast majority of the region's artists and arts and culture organizations, which together generate more than \$294 million for the local economy and \$12.5 million for local government coffers every year.

Proposed program allocations for FY 2020 County dollars include investments in the following RACC programs: \$244,800 for grants and technical assistance services for artists and arts organizations, \$31,275 for arts education (including The Right Brain Initiative), \$5,000 for advocacy programs including Work for Art, and \$18,925 for general management and sustaining services such as accounting and information technology/web services. RACC receives separate funding from Multnomah County to fund public art projects through the county's percent-for-art ordinance.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Dollars leveraged from other sources	\$8,933,731	\$11 Million	\$11 Million	\$11 Million
Outcome	Multnomah County children engaged in creative learning	9,642	9,750	9,750	9,750
Output	# served by RACC-funded projects (total attendance)	3.5 Million	3.75 Million	3.75 Million	3.75 Million
Outcome	Improvement in reading and math scores	2.5 times	2.5 times	2.5 times	2.5 times

**Performance Measures Descriptions**

\*Evaluation data reveals that as schools work with The Right Brain Initiative, students reading and math scores increase at least 2.5 times more than the average annual rate of increase. This growth is even greater for English Language Learners, whose scores increased 10 times more after schools partnered with Right Brain.

## Legal / Contractual Obligation

RACC operates as a steward of Multnomah County investments in arts and culture as per contract #440000704 which expires on June 30, 2019.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$300,000	\$0	\$300,000	\$0
<b>Total GF/non-GF</b>	<b>\$300,000</b>	<b>\$0</b>	<b>\$300,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$300,000</b>		<b>\$300,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 10020-19 Regional Arts & Culture Council

Three years ago, Multnomah County funding for RACC was increased by \$130,000 to help RACC provide significantly more grants and services for artists & arts organizations in underrepresented communities including residents of East County, communities of color, low-income Oregonians, and other marginalized populations. This program offer maintains those investments.



## Legal / Contractual Obligation

ORS 1.185 reads: "County to provide courtrooms, offices and jury rooms."

(1) The county in which a circuit court is located or holds court shall:

(a) Provide suitable and sufficient courtrooms, offices and jury rooms for the court, the judges, other officers and employees of the court and juries in attendance upon the court, and provide maintenance and utilities for those courtrooms, offices and jury rooms.

(b) Pay expenses of the court in the county other than those expenses required by law to be paid by the state.

(2) Except as provided in subsection (1) of this section, all supplies, materials, equipment and other property necessary for the operation of the circuit courts shall be provided by the state under ORS 1.187. [Formerly 1.165]

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$1,026,772	\$0	\$1,005,000	\$0
Materials & Supplies	\$185,005	\$0	\$84,979	\$0
Internal Services	\$8,692,685	\$414,993	\$8,777,173	\$414,993
<b>Total GF/non-GF</b>	<b>\$9,904,462</b>	<b>\$414,993</b>	<b>\$9,867,152</b>	<b>\$414,993</b>
<b>Program Total:</b>	<b>\$10,319,455</b>		<b>\$10,282,145</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Fees, Permits & Charges	\$995,000	\$0	\$1,000,000	\$0
<b>Total Revenue</b>	<b>\$995,000</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>

## Explanation of Revenues

Operating courtrooms is a General Fund obligation of the County. The Multnomah Law Library pass-through payment is fully supported by state-mandated court filing fees.

Debt service on the East County Courts is offset by a rebate received under the Build America Bonds program. Debt service costs were \$414,993 per year (net) from FY 2012 through FY 2020, and \$1.7 million per year from FY 2020 through FY 2030.

## Significant Program Changes

**Last Year this program was:** FY 2019: 10021-19 State Mandated Expenses

In FY 2020, the program includes the \$3.65 million debt service payment for the new Downtown State Courthouse.



## Legal / Contractual Obligation

The program is mandated under terms of the IGAs with Gresham, Troutdale, Fairview, and Wood Village. The county is obligated to transfer 25% of the revenue associated with the first 0.6% BIT increment.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$8,889,833	\$0	\$9,952,155	\$0
<b>Total GF/non-GF</b>	<b>\$8,889,833</b>	<b>\$0</b>	<b>\$9,952,155</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$8,889,833</b>		<b>\$9,952,155</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$205,807	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$205,807</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

The BIT pass-through is 25% of the first 0.6% of BIT collections.

## Significant Program Changes

Last Year this program was: FY 2019: 10022-19 Pass-Through Payments to East County Cities



**Department:** Nondepartmental      **Program Contact:** Mark Campbell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Oregon Historical Society (OHS) is a private not-for-profit entity founded in 1898. Since 1899, it has received appropriations from 1) state government (except 2002-6) in recognition of its operation of the state history museum and a large Oregon history research library; 2) Multnomah County (\$335k per year, 1999-2003) as a participant in the county library levy; and 3) Multnomah County special purpose levy 26-174 in May, 2016 that renewed levy support at the rate of \$0.05 per thousand of assessed value and renewal following the expiration of the initial levy.

**Program Summary**

OHS operates the Oregon History Museum, the Davies Family Research Library, and educational programs for adults, families and school groups (and also serves as the Multnomah County history repository). After nearly a decade of cuts in appropriations, programs, and service hours, the levy funding (which started in 2011) has provided basic operational support, as well as funding to underwrite the improved hours of service in the library, free admission to residents of Multnomah County and all Oregon school groups, improved collections development and care, and new and exciting programming. OHS is committed to serving the diverse communities of the region and the state, and reflects that commitment in every aspect of its operations.

Four east county historical societies of Fairview-Rockwood-Wilkes (renamed East County Historical Organization – ECHO), Gresham, Troutdale and Crown Point Country will together receive \$150,000 per year from the levy proceeds. The levy allocates the balance, estimated at \$3.3 million in FY 2019-20, to the Oregon Historical Society for its programs and operations.

The levy has provided basic operational support and has certainly increased OHS's public services. The library has been open 32 hours a week since the July 2011 levy funding went into effect and will continue to be open 32 hours a week during the duration of the second levy and will continue to serve additional patrons. Due to the levy funding, the increased public programs have reached more Oregonians than ever and will continue to focus on programs to reach all corners of Oregon with the passage of the second levy. The levy provided funds to preserve, maintain and display its vast number of collections and the passage of the second levy will continue OHS' ability to enhance collections care and display more of Oregon's treasures.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Multnomah County citizens admitted free of charge	29,171	27,177	27,177	27,500
Outcome	Improved library hours per week	32	32	32	32
Output	Increased number of public programs	253	250	250	250
Quality	Care of Collections through additional curator/registrar	3	1	1	1

**Performance Measures Descriptions**

In 2018, the Racing to Change exhibit curated by the Oregon Black Pioneers was a huge success, along with Meier and Frank's Santa Land drawing 7% more Multnomah County resident visits from the previous year. Due to levy funding, public programs continue to increase in number as well as attendance. Four "Family Day" events were launched and these events drew an increasing number of attendees - from around 300 for the first program to approximately 1,000 for the last program.

## Legal / Contractual Obligation

Measure 26-174 provides the Oregon Historical Society with a five-year property tax levy at the rate of \$0.05 per thousand dollars of assessed value. Four east county historical societies (Fairview-Rockwood-Wilkes, Gresham, Troutdale, and Crown Point Country) will together receive \$150,000 per year from the levy proceeds.

This levy will continue through FY 2020-21.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$3,233,321	\$0	\$3,453,288
Internal Services	\$0	\$7,500	\$0	\$7,500
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,240,821</b>	<b>\$0</b>	<b>\$3,460,788</b>
<b>Program Total:</b>	<b>\$3,240,821</b>		<b>\$3,460,788</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$0	\$3,221,571	\$0	\$3,382,788
Interest	\$0	\$3,000	\$0	\$3,000
Beginning Working Capital	\$0	\$16,250	\$0	\$75,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,240,821</b>	<b>\$0</b>	<b>\$3,460,788</b>

## Explanation of Revenues

This is a dedicated local option property tax levy collected by Multnomah County on behalf of the Oregon Historical Society (OHS). OHS receives no other County funding.

## Significant Program Changes

Last Year this program was: FY 2019: 10023-19 OHS Local Option Levy

**Department:** Nondepartmental **Program Contact:** Mike Jaspin

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer distributes revenues received from property taxes associated with railroad cars to local school districts. This is a statutory responsibility of Oregon counties (ORS 308.505 to ORS 308.665) and these revenues are dedicated to a County School Fund. It also includes revenues dedicated to the County School Fund received from the sale of timber cut on federal forest land and the Secure Rural Schools (SRS) program. Federal legislation governing the SRS payments has sunset several times, and has not been reauthorized for FY 2018.

### Program Summary

Since 1908, all counties in Oregon had received payments from the US government from revenue generated by the sale of timber cut on federal forest lands. State law specified how the revenue was to be allocated.

The federal law authorizing federal timber payments to counties, PL 106-393, sunset as of September 30, 2006. It was reauthorized by Congress for one year in 2007, and was renewed in 2008 for a four-year period, during which time the amount received declined each year. FY 2012 was to have been the last year in this 4-year extension. Congress reauthorized this legislation for one year in FY 2013, and again in FY 2014.

In April of 2015, Congress once again reauthorized the Secure Rural Schools program, but for two years. Payments are retroactive for the County's FY 2015 budget and will provide funds in FY 2016.

The law was not reauthorized for FY 2017, and timber payments will be governed by the 1908 Act as amended. If reauthorization occurs before September 30th, 2018, FY 2018 funds could be paid retroactively. The law has not been reauthorized for FY 2019, and our assumption is that it will not be reauthorized in the future.

The remaining revenue is from the County's portion of the ad valorem tax that is assessed on the value of rail cars as outlined by state statute.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output		N/A	N/A	N/A	N/A
Outcome		N/A	N/A	N/A	N/A

### Performance Measures Descriptions

The County School Fund provides a very small amount of the total revenue available to schools in Multnomah County. Arguably, this amount is not large enough to contribute meaningfully toward student academic achievement.

## Legal / Contractual Obligation

ORS 328.005-035 outlines the requirement to establish a County School Fund. The apportionment of revenue from the sale of timber on federal forest lands is described in ORS 294.060, which states: "...moneys received by each county...shall be divided 75 percent to the Road Fund and 25 percent to the school fund of the County."

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$80,300	\$0	\$80,300
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$80,300</b>	<b>\$0</b>	<b>\$80,300</b>
<b>Program Total:</b>	<b>\$80,300</b>		<b>\$80,300</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$80,000	\$0	\$80,000
Interest	\$0	\$100	\$0	\$100
Beginning Working Capital	\$0	\$200	\$0	\$200
<b>Total Revenue</b>	<b>\$0</b>	<b>\$80,300</b>	<b>\$0</b>	<b>\$80,300</b>

## Explanation of Revenues

The County School Fund is credited with 25% of the revenue received from the statewide assessment of railroad cars apportioned to each County. Revenues have averaged \$15,000-\$20,000 over the past several years.

## Significant Program Changes

Last Year this program was: FY 2019: 10024-19 County School Fund

**Department:** Nondepartmental      **Program Contact:** Mark Campbell  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

This program offer budgets the revenue and expenditures associated with the County's commitment to fund the Oregon Convention Center and the Visitors Development Initiative. This program operates under intergovernmental agreements (IGAs) between Multnomah County, the City of Portland, and Metro. The program accounts for proceeds of the Transient Lodging Tax and Motor Vehicle Rental Tax that are passed through to Metro for operation of the Oregon Convention Center and other tourism related entities.

### Program Summary

This program accounts for a portion of taxes collected from area hotels, motels, and vehicle rental agencies. The Transient Lodging Tax has supported the Oregon Convention Center since 1986. The tax is set at 11.5% on all hotel and motel room rentals in Multnomah County. Cities retain 5% of the tax generated within their boundaries. Another 1% supports regional tourism promotion. The remaining 5.5% supports programs associated with the Oregon Convention Center, the Regional Arts & Culture Council (RACC), and the Visitors Development Board. The Motor Vehicle Rental Tax was increased by the Board of County Commissioners in April, 2000. This 2.5% increment is entirely dedicated to support the activities noted above.

This program supports the Oregon Convention Center which hosts programs, conferences, and events that bring visitors and business groups to Portland. The tourism and travel industry is among the leading private sector employers in Oregon. Large conventions generate significant activity for local hotels, restaurants, and retail establishments. A report prepared in 2018 by Crossroads Consulting Services documents the dollar impact of the visitors facilities managed by Metro. The report estimates the economic impact at just a little more than \$745 million per year.

The Visitors Facilities Intergovernmental Agreement (VFIGA) was amended in FY 2014 and it established a source of funding for Multnomah County "Visitor Facilities and Operations Support". This funding supports operations and capital improvements related to the established purposes of the agreement. The VFIGA supports regional visitor facilities and visitor industry development in the Portland-Multnomah County area. The agreement is between the City of Portland, Multnomah County, and Metro. The fund allocates \$750,000 annually to Multnomah County and this amount will grow to \$1 million annually beginning in FY 2022.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Impact (\$ in millions) of Convention Center Visitors to County Economy	508	770	570	587
Outcome	Number of Employees in Travel/Tourism Industry (Est.)	4,740	7,700	5,200	5,355

### Performance Measures Descriptions

The Oregon Convention Center (OCC) generates significant economic activity to metropolitan Portland and the State. Multnomah County accounts for more than 2/3rds of tourism related activity. Travel/tourism accounts for approximately 10% of metropolitan area employment. Metro provides data analysis on total annual spending in millions of dollars (output) which is estimated to support the total number of people employed (outcome) in the travel/tourism industry.

## Legal / Contractual Obligation

This program is mandated by IGAs that dictate how the revenues received in the Special Excise Tax Fund are allocated.

There is no discretion in allocating the revenue - all receipts are turned over per County Code and pursuant to terms specified in the IGAs.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$48,228,593	\$0	\$44,094,044
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$48,228,593</b>	<b>\$0</b>	<b>\$44,094,044</b>
<b>Program Total:</b>	<b>\$48,228,593</b>		<b>\$44,094,044</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Taxes	\$0	\$48,182,465	\$0	\$44,053,663
Interest	\$0	\$8,000	\$0	\$3,000
Beginning Working Capital	\$0	\$38,128	\$0	\$37,381
<b>Total Revenue</b>	<b>\$0</b>	<b>\$48,228,593</b>	<b>\$0</b>	<b>\$44,094,044</b>

## Explanation of Revenues

The Transient Lodging Tax was originally established in 1972. A supplemental countywide tax of 3% was adopted in February 1986 and is dedicated primarily to operations of the Oregon Convention Center. The County adopted an additional tax of 2.5% that is dedicated to the Visitors Development Initiative.

The Motor Vehicle Rental Tax was originally established in 1976. The tax was increased to 12.5% in April 2000, with the additional 2.5% dedicated to the Visitors Development Initiative.

## Significant Program Changes

Last Year this program was: FY 2019: 10025-19 Convention Center Fund

**Department:** Nondepartmental                      **Program Contact:** Mark Campbell  
**Program Offer Type:** Existing Operating Program                      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer accounts for principal and interest payments on various full faith and credit obligation bonds and intergovernmental agreements that were entered into in order to finance various capital improvements or capital acquisitions.

**Program Summary**

Multnomah County is currently making payments on the following obligations:

- Series 2010B (\$15 million) - Full Faith & Credit
- Oregon Investment Transportation Bank (OTIB) (\$3.2 million) - Intergovernmental Loan
- Series 2012 (\$128 million) - Full Faith & Credit
- Series 2014 Refunding (\$22.5 million) - Full Faith & Credit
- Series 2017 (\$164.4 million) - Full Faith & Credit

The outstanding debt issues have funded a number of capital improvements and acquisitions. These include, among others, purchase of the Multnomah, McCoy, and Mead buildings, construction of the East County Courthouse and the new Multnomah County Courthouse, the Sellwood Bridge replacement project, the new Health Department Headquarters building, and the implementation of a new ERP system. All binding obligations were approved by the Board of County Commissioners.

A new debt issues is planned for FY 2020 which will support the Burnside Bridge replacement project. Funding will provide for completion of the National Environmental Policy Act (NEPA) phase of the project.

Multnomah County's credit is rated AAA by Moody's Investors Services and AAA by Standard & Poor's - both represent the highest rating awarded for governmental debt. The firms cited Multnomah County's strong budget management, low debt, moderate pension burden, adequate reserves and large and growing tax base from a strong economy.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Moody's Rating of Aa1 or Better	1	1	1	1
Outcome	Debt Service Payments Made as Scheduled	100%	100%	100%	100%

**Performance Measures Descriptions**

Maintaining an investment grade bond rating limits the amount the County might otherwise have to pay towards annual debt service. In 2017, Moody's and Standard & Poor's upgraded all Multnomah County full faith and credit debt to Aaa and AAA, respectively. (1)-indicates Moody's Aa1 (or better) rating, (0)-represents a rating lower than Aa1.

All principal and interest payments are made on time in order to maintain an investment grade rating on the bond issue. Multnomah County has never defaulted on a debt payment.

## Legal / Contractual Obligation

Principal and interest on the full faith and credit obligations and intergovernmental agreements are a binding debt obligation of the County. All debt issues and refundings were approved by various resolutions adopted by the Board of County Commissioners.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$3,000	\$0	\$3,000
Debt Service	\$0	\$31,115,185	\$0	\$32,304,766
Cash Transfers	\$0	\$2,826,830	\$0	\$0
Unappropriated & Contingency	\$0	\$1,186,234	\$0	\$4,872,926
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$35,131,249</b>	<b>\$0</b>	<b>\$37,180,692</b>
<b>Program Total:</b>	<b>\$35,131,249</b>		<b>\$37,180,692</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$298,895	\$0	\$298,895
Other / Miscellaneous	\$0	\$28,263,430	\$0	\$30,856,471
Financing Sources	\$0	\$786,209	\$0	\$0
Interest	\$0	\$20,000	\$0	\$20,000
Beginning Working Capital	\$0	\$5,762,715	\$0	\$6,005,326
<b>Total Revenue</b>	<b>\$0</b>	<b>\$35,131,249</b>	<b>\$0</b>	<b>\$37,180,692</b>

## Explanation of Revenues

Debt service payments are collected from departments through internal service reimbursements and passed through to the Capital Debt Retirement Fund.

Per House Bill 4093, a District Court surcharge on certain traffic and parking fines will support the Central Courthouse capital construction project.

## Significant Program Changes

Last Year this program was: FY 2019: 10026-19 Capital Debt Retirement Fund



**Department:** Nondepartmental      **Program Contact:** Jeff Renfro  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The County’s program for the Neighborhood Prosperity Initiative provides financial support to a program administered by Prosper Portland that seeks to bring economic growth to several local communities that frequently have not experienced the same level of economic prosperity as other Portland areas.

**Program Summary**

This program is the investment by the County in Prosper Portland’s Neighborhood Prosperity Initiative (NPI), an effort to use urban renewal to support economic development opportunities in six low-income, historically disadvantaged communities at the neighborhood scale. In a departure from the staff-centric model used in other urban renewal areas, the NPI utilizes grants, training, and financial support to empower community organizations in each of the six neighborhoods to plan and implement community-identified projects to improve the local commercial district.

The six organizations selected by Prosper Portland – Cully Boulevard Alliance, Division Midway Alliance for Community Improvement, Historic Parkrose, Jade District, Our 42nd Avenue, and The Rosewood Initiative – represent areas that have experienced lagging commercial investments, a higher poverty rate than city-wide, and high concentrations of businesses that are minority-owned or that serve only the local neighborhoods.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output		N/A	N/A	N/A	N/A
Outcome	Payments made as scheduled	1	1	1	1

**Performance Measures Descriptions**

Making payments on time ensures the NPI communities have access to funds when needed. 1=yes; 2=no

## Legal / Contractual Obligation

Pursuant to an Intergovernmental Agreement with Prosper Portland dated July 12, 2012, the County has agreed to support the six NPI districts by paying an amount equal to revenues the County receives pursuant to ORS 457.470(4) in connection with each district. This obligation continues until 2022 or until certain funding limits have been reached.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$370,000	\$0	\$500,000	\$0
<b>Total GF/non-GF</b>	<b>\$370,000</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$370,000</b>		<b>\$500,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

## Explanation of Revenues

These payments made from the County's General Fund.

## Significant Program Changes

Last Year this program was: FY 2019: 10027-19 Neighborhood Prosperity Initiative



## Legal / Contractual Obligation

Principal and interest on the PERS Pension Obligation Bond are a binding debt obligation. The County passed Resolution No. 99-218 on November 4, 1999 authorizing the issuance of up to \$200,000,000 of bonds as authorized by state statute.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$25,010,450	\$0	\$25,461,450
Debt Service	\$0	\$23,849,460	\$0	\$25,195,000
Unappropriated & Contingency	\$0	\$26,032,583	\$0	\$12,869,187
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$74,892,493</b>	<b>\$0</b>	<b>\$63,525,637</b>
<b>Program Total:</b>	<b>\$74,892,493</b>		<b>\$63,525,637</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$27,700,931	\$0	\$25,257,070
Financing Sources	\$0	\$0	\$0	\$10,054,826
Interest	\$0	\$467,244	\$0	\$553,211
Beginning Working Capital	\$0	\$46,724,318	\$0	\$27,660,530
<b>Total Revenue</b>	<b>\$0</b>	<b>\$74,892,493</b>	<b>\$0</b>	<b>\$63,525,637</b>

## Explanation of Revenues

Interest earnings on the fund balance and service charges are assessed to departments as a percentage of payroll. In FY 2020, departments will pay 6.50% of payroll costs toward the retirement of the Pension Obligation Bonds.

Revenue from Comcast's settlement of a tax dispute with the State of Oregon is being used to fund another side account. The County's share of the revenue is \$10.1 million of a total \$155 million settlement.

## Significant Program Changes

**Last Year this program was:** FY 2019: 10028-19 PERS Pension Bond Sinking Fund

The County has established three "side accounts" with PERS using reserves that have accumulated in the fund. A fourth \$25 million payment will be made in FY 2020. When fully amortized, these side accounts will provide rate relief of up to 3% of payroll.

Budgeted expenses for FY 2020 also include \$450,000 to account for the County's obligations to members of the Oregon Public Service Retirement Program (OPSRP) who belong to labor unions covered by collective bargaining agreements.

**Department:** Nondepartmental      **Program Contact:** Raffaele Timarchi  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Workforce development opportunities for marginalized youth are critical for them to successfully transition to adulthood and into economic self-sufficiency. This program offer ensures training and job placement for those who face barriers to employment, and would benefit from work experience.

**Program Summary**

This program supports key interventions in the lives of high-risk youth to deter student dropouts, reduce recidivism rates, and create economic opportunities by connecting low-income and disadvantaged youth to meaningful work in career pathways. Participants receive work-readiness training, job coaching, and professional networking opportunities to assist their transition to financial independence.

SummerWorks enables youth ages 16 to 24 to gain valuable work experience at Multnomah County or in partnership with external work sites that support the County's mission through an 180-hour paid internship, and is part of a regional workforce development plan.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of participating youth	500	500	540	540
Outcome	Percentage of youth who complete training and internship hours	N/A	N/A	N/A	85%
Outcome	Number of youth employed in County departments or sponsored programs	N/A	N/A	N/A	100

**Performance Measures Descriptions**

Performance measures 2 & 3 are new for FY 2020.

**Legal / Contractual Obligation**

None

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$221,395	\$0	\$0	\$123,048
Contractual Services	\$46,050	\$1,540,950	\$0	\$1,503,360
Materials & Supplies	\$28,000	\$0	\$0	\$23,097
Internal Services	\$1,800	\$0	\$0	\$495
<b>Total GF/non-GF</b>	<b>\$297,245</b>	<b>\$1,540,950</b>	<b>\$0</b>	<b>\$1,650,000</b>
<b>Program Total:</b>	<b>\$1,838,195</b>		<b>\$1,650,000</b>	
<b>Program FTE</b>	0.85	0.00	0.00	1.00

<b>Program Revenues</b>				
Beginning Working Capital	\$50,000	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$50,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

Multnomah County Video Lottery Funds - \$1,650,000

**Significant Program Changes****Last Year this program was:** FY 2019: 10029A-19 SummerWorks Internship Program

In FY 2019, the SummerWorks Internship Program was comprised of three program offers:

- 10029A - SummerWorks Internship Program, which funded 540 program slots and included \$50,000 one-time-only
- 10029C - SummerWorks Additional 60 Slots, which funded 60 program slots
- 10029D - SummerWorks - High Risk Youth, which funded 50 program slots on a one-time-only basis

For FY 2020, this program, now known as the Youth Opportunity and Workforce Development Program, has been consolidated into a single program offer in an effort to better align program funding and operational capacity.

**Department:** Nondepartmental      **Program Contact:** Lori Stegmann  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Multnomah County Complete Count Committee and Regional Census Planning work will increase engagement and participation in the 2020 U.S. Census. Coordination of outreach and messaging across local governmental partners in the Portland Metro Area is key in supporting the trust, knowledge, and expertise of community based partners. This effort will be run out of the District 4 office under the leadership of Commissioner Lori Stegmann.

**Program Summary**

Census population data sets a baseline for regional analysis, growth and service allocation. It impacts the distribution of federal funds for major programs such as transportation, education, health services and housing. Communities rely on census statistics to plan for a variety of needs including new roads, schools, nutrition and emergency services.

Each year, the federal government distributes hundreds of billions of dollars to states and communities based on Census Bureau data. In 2016, Oregon received \$13,452,034,877 through 55 federal spending programs guided by data derived from the 2010 Census.

Communities we don't count well are often some of our most vulnerable populations. Multnomah County's Complete Count Committee seeks to engage our natural networks and service touch points across departments, programming, and partnerships. Strategies will educate and motivate respondents about the census; develop community level partnerships to get out the count; implement best practices to encourage participation among specific populations; encourage the hiring of local, trusted census enumerators; and make information and resources available to respondents filling out their census forms on the internet, a new option in 2020. A key piece tied to the success of this work is to engage organizations embedded within and led by community.

Program activities will include outreach at events, community meetings, service-based outreach, house meetings, door-to-door canvassing and partnerships with culturally specific media.

The 2020 Census will impact funding decisions for the next decade. This data informs policy, program and service decisions as they reflect how Multnomah County is changing. Engagement and involvement of our community based organizations, especially those who are embedded within and led by populations we don't count well, is a critical piece of this complete count effort.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of community information and planning sessions	N/A	N/A	N/A	20
Outcome	Increased participation in the 2020 U.S. Census in specific census tracts and focus population subgroups	N/A	N/A	N/A	TBD
Output	Number of individuals engaged in the development of strategic census efforts	N/A	N/A	N/A	500

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$200,000	\$0
Materials & Supplies	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$250,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was:



**Department:** Nondepartmental      **Program Contact:** Marissa Madrigal  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Under the direction of the County’s Chief Operating Officer, the Complaints Investigation Unit will investigate discrimination and harassment complaints made by County employees. The creation of a centralized unit will end departmental management of those investigations and allow for countywide coordination and tracking of the investigations and themes. The unit’s creation is one of the recommendations made by the Jemmott Rollins Group to support the success of Multnomah County’s Workforce Equity Strategic Plan.

**Program Summary**

The unit will employ experienced investigators that have multicultural competency, are knowledgeable in trauma informed care, and practice conflict resolution skills. The investigators will view complaints, processes, and proposed actions through the Diversity Equity Inclusion Framework adopted by the County. The investigators will also meet with department and County leadership on a regular basis to discuss investigations and themes.

In addition to conducting investigations, the Complaints Investigation Unit will:

- Create standardized investigation procedures to help employees have the same experience throughout the organization.
- Train HR staff and managers on best practices for conducting non-protected class investigations that departments are responsible for.
- Provide guidance, best practices, and examples of how HR and managers should apply County personnel rules in relation to protect class complaints.
- Track protected class complaints and report key themes to County leadership.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Centrally investigate discrimination and harassment complaints filed by County employees (except for MCSO)	0	0	150	150
Outcome	Employee discrimination and harassment investigations are completed within 60 days.	0	0	75	150

**Performance Measures Descriptions**

The purpose of the unit will be to conduct all of the discrimination and harassment complaints in the county with the exception of MCSO. A goal of the unit will be to complete the investigations within 60 days.

## Legal / Contractual Obligation

The Complaints Investigation Unit will be responsible for identifying potential violations of state and federal employment laws, county personnel rules and collective bargaining agreements.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$1,096,564	\$0
Contractual Services	\$0	\$0	\$18,000	\$0
Materials & Supplies	\$0	\$0	\$72,000	\$0
Internal Services	\$0	\$0	\$150,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,336,564</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,336,564</b>	
<b>Program FTE</b>	0.00	0.00	6.00	0.00

Program Revenues				
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

No revenues will be generated from this program offer.

## Significant Program Changes

**Last Year this program was:**

This is a new program offer.

**Department:** Nondepartmental

**Program Contact:** Marc Jolin

**Program Offer Type:** Administration

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

This offer supports operations for the Joint City-County Office of Homeless Services (JOHS). This office is in the third year of operation. It serves four primary functions: (1) support for community-wide homelessness planning efforts through A Home for Everyone; (2) contracting City, County, and certain and state and federal funds to non-profit providers delivering a full range of homeless services to multiple priority populations; (3) overseeing the development and operations of emergency shelter capacity; and (4) serving as the Continuum of Care "Lead Agency".

**Program Summary**

Homelessness is an ongoing crisis in the City of Portland and Multnomah County. In the last several years, our community has come together and responded to the crisis with an unprecedented level of coordination and investment guided by the vision, values, and priorities of A Home for Everyone, our community's ending homelessness initiative. In 2016, in response to the call from A Home for Everyone to increase alignment, coordination, and outcome accountability, the City of Portland and Multnomah County consolidated their respective ending homelessness investments into a single entity, the Joint Office of Homeless Services. This program funds the operations of the Joint Office of Homeless Services, which is specifically tasked with:

- (1) Leading community planning related to homelessness, by supporting A Home for Everyone, including its work groups, coordinating board and executive committee, as well as the leadership teams of the multiple population-specific systems of care (adults, youth, families, DV);
- (2) Implementing AHFE and City & County priority homelessness strategies through the execution, administration, and monitoring of contracts for services with approximately 40 non-profits using City, County, State and Federal funds, and through ongoing system quality improvement, reporting and evaluation;
- (3) As the U.S Department of Housing and Urban Development's designated local Continuum of Care (CoC) "Lead Agency," leading local CoC implementation, including the community's annual CoC renewal application, applications for new funding, ongoing system performance measure monitoring and reporting, and street and shelter counts; and
- (4) Leading the planning and implementation process for creating a range of year-round, seasonal, and severe weather emergency shelters, including site selection, developing the sites, programming for the sites, and community engagement related to shelters.

The programs funded by the JOHS are anticipated to provide assistance to more than 30,000 people in Portland and Multnomah County who are or are at imminent risk of experiencing homelessness.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Lead community-based budget recommendation development	1	1	1	1
Outcome	Present budget recommendations to AHFE Executive Committee	1	1	1	1
Outcome	Percentage of financial reports submitted to the satisfaction of the grantor*	100%	99%	99%	99%
Output	Number of AHFE System-Level Quarterly Reports presented to the AHFE Executive Committee**	N/A	N/A	N/A	4

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by a five year Intergovernmental Agreement between Multnomah County and the City of Portland executed on June 23, 2016.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$1,222,723	\$288,893	\$1,366,101	\$418,406
Materials & Supplies	\$96,000	\$14,978	\$77,000	\$7,308
Internal Services	\$181,760	\$130,986	\$206,599	\$164,331
<b>Total GF/non-GF</b>	<b>\$1,500,483</b>	<b>\$434,857</b>	<b>\$1,649,700</b>	<b>\$590,045</b>
<b>Program Total:</b>	<b>\$1,935,340</b>		<b>\$2,239,745</b>	
<b>Program FTE</b>	7.93	3.07	8.17	3.83

Program Revenues				
Intergovernmental	\$0	\$1,179,678	\$0	\$590,045
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,179,678</b>	<b>\$0</b>	<b>\$590,045</b>

## Explanation of Revenues

City of Portland General Fund - \$456,600  
 HUD Continuum of Care Planning Grant (COC Planning) - \$90,020  
 City of Portland Housing Bureau HOPWA - \$43,425

## Significant Program Changes

**Last Year this program was:** FY 2019: 10050A-19 Joint Office of Homeless Services Administration & Operations

City of Portland and Multnomah County General funds that were previously contracted funds, are being reallocated into direct staffing to support the ongoing system-wide programming work of JOHS. We expect any reductions in household placements will be offset by improvements in the overall system support and service coordination resulting from more appropriate system staffing.

<b>Department:</b>	Nondepartmental	<b>Program Contact:</b>	Marc Jolin
<b>Program Offer Type:</b>	Innovative/New Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>			
<b>Program Characteristics:</b>			

**Executive Summary**

The Joint Office of Homeless Services (JOHS) seeks to add a data position that is critical to the success of its efforts to coordinate county-wide initiatives addressing homelessness, and to build the public’s understanding and engagement in the causes and solutions to homelessness.

**Program Summary**

A data position will support the additional workload created by the expanded homeless services system. Quality data analysis and reporting is essential to the effective use of JOHS resources. JOHS is seeking to sustain this capacity while continuing to work with the Portland Housing Bureau (PHB) and the Department of County Human Services (DCHS) to conduct a thorough review of how homeless system data needs are met across the City and County.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output					
Outcome					

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$0	\$0	\$103,726	\$0
Materials & Supplies	\$0	\$0	\$674	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$104,400</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$104,400</b>	
<b>Program FTE</b>	0.00	0.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

\$52,400 funded with Multnomah County One-time-only General Funds

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Improving system coordination and access is one of the core strategies of A Home for Everyone. This program funds an array of support services needed to make homeless services easier to access and more effective. These services support systems of care across populations as well as specific sub-populations (adults, families, youth, Veterans and domestic violence survivors). These supports include training, information and referral services, coordinated entry, landlord recruitment, and other similar services.

**Program Summary**

The effectiveness of homeless services depends on the services funded through this program. These services include:

- **Access:** Equitable and efficient access to services is an essential commitment of A Home for Everyone. This includes information about services in a variety of formats to reach diverse populations, and coordinated entry assessment to connect people to appropriate services. Programs supported in this area include telephone, online and print information and referral; and coordinated entry assessment.
- **Mobile Navigation Services:** Mobile navigation staff work in collaboration with public safety and public space management personnel to provide services that are responsive to people living in unsanctioned camps. This includes connecting individuals with information and resources to accelerate their transition to shelter or housing options, as well as other services such as transportation assistance or health care.
- **Partnership Development:** Ending homelessness is a community-wide effort requiring partnerships that leverage resources in other systems and in the private sector. Programs supported in this area foster such partnerships and include services to recruit and support landlords to make units available for households exiting homelessness, and coordination between these landlords and service providers.
- **Point-In-Time Count:** In order to receive HUD funding, communities must conduct an annual point-in-time count of people sleeping in homeless shelters and a biennial point-in-time count of people sleeping in places not meant for human habitation (i.e. tents, cars, etc.). The sheltered and unsheltered count is a community-wide effort involving more than two dozen organizations. The funding requested provides the necessary administrative support, communication, partner coordination, volunteer recruitment and management, and data entry and evaluation.
- **System Planning, Evaluation & Support:** A key role of the Joint Office is to conduct system planning and evaluation, and to otherwise support A Home for Everyone's work to end homelessness at the community and population-specific level. This includes planning and evaluation related to Coordinated Entry, Permanent Supportive Housing expansion and cross-system alignment, as well as regular evaluation and reporting on system outcomes. This also includes staffing A Home for Everyone workgroups, and coordinating system-wide and population-specific trainings for nonprofit staff. The funding requested supports staff to lead this work.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Shelter and housing service requests	43,972	35,000	45,000	35,000
Outcome	Information and Referral calls answered within 5 minutes	1.82	4 minutes	<4 minutes	4 minutes
Outcome	Number of people staying in encampments placed into emergency shelter	N/A*	N/A*	40	120

**Performance Measures Descriptions**

\*This outcome is connected to the newly funded Navigation Team, which started operating in February 2019.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$14,275	\$437,109	\$44,065	\$555,871
Contractual Services	\$360,220	\$1,045,910	\$374,600	\$1,123,699
Materials & Supplies	\$0	\$0	\$0	\$3,895
<b>Total GF/non-GF</b>	<b>\$374,495</b>	<b>\$1,483,019</b>	<b>\$418,665</b>	<b>\$1,683,465</b>
<b>Program Total:</b>	<b>\$1,857,514</b>		<b>\$2,102,130</b>	
<b>Program FTE</b>	0.10	3.90	0.55	4.45

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,045,910	\$0	\$1,683,465
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,045,910</b>	<b>\$0</b>	<b>\$1,683,465</b>

Explanation of Revenues

City of Portland General Fund - \$1,151,740  
 HUD COC Planning Grant - \$465,800  
 Emergency Solutions Grant - \$65,925

Significant Program Changes

Last Year this program was: FY 2019: 10051-19 System Support, Access, & Coordination



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10052E  
**Program Characteristics:**

### Executive Summary

A Home for Everyone has prioritized the expansion of emergency shelter for all populations, and the largest unmet need continues to be for adult households without children. The basic safety of people experiencing homelessness requires funding for a full range of emergency night and day shelter services, including shelter for specific populations and associated emergency services expenses. This program will fund these critical safety services for men and women, including Veterans, in the coming year.

### Program Summary

Although they do not end a person's homelessness, emergency shelter and associated emergency services are vital to protecting the basic health and safety of individuals and families while they are experiencing homelessness, particularly those with disabling conditions and older adults. Day and night shelters are also critical locations for people to learn about and access the services they need to find permanent housing, acquire an income, and receive health-related services. Most adult shelters have priority access for women, Veterans, those with disabilities and those ages 55 and older. This program offer includes the following:

- 24/7 shelter: 24/7 shelter programs for women, men, and couples (including Veteran-specific programming). Shelters are low-barrier and operate 24/7 365. Funds are contracted to nonprofit providers to pay the operating expenses for shelter, including maintenance, staffing, materials/supplies, and on-site services.
- Day shelter: Day shelters serve a dual purpose of providing a safe place to be out of the elements during the day and a vital point of access to the services needed to end homelessness. Day shelters function as resource centers, bringing together numerous partners at one location to offer an array of services, including employment, health care, and education.
- UNITY/SPMI shelter beds: Shelter space and programming of the equivalent of 30 short-term shelter beds for individuals discharging from the Unity Center for Behavioral Health or regularly accessing other crisis mental health services in the community. Connecting these individuals to appropriate shelter will provide a safe space to maintain psychiatric stability through mental health support services and a transition to on-going behavioral health treatment and other essential services and supports. Funds will help pay shelter operating expenses including rent, staffing, materials/supplies, and on-site services.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Year-round emergency shelter beds	560	570	570	590
Outcome	Number of people served in year-round emergency shelter beds	2,510	4,070*	2,000	2,000

### Performance Measures Descriptions

\*FY19 purchased was projected based on an aggregation of unique individuals served in each shelter. This yielded duplication, as some people were served in multiple shelters during the year. This offer uses a more accurate measure for FY18 actual, FY19 projected and FY20 of the unique individuals served across all 570 beds.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$168,764	\$110,347	\$129,179	\$104,545
Contractual Services	\$966,866	\$5,252,646	\$0	\$6,617,490
Materials & Supplies	\$0	\$318,198	\$151	\$34,703
Internal Services	\$0	\$279,894	\$0	\$649,207
<b>Total GF/non-GF</b>	<b>\$1,135,630</b>	<b>\$5,961,085</b>	<b>\$129,330</b>	<b>\$7,405,945</b>
<b>Program Total:</b>	<b>\$7,096,715</b>		<b>\$7,535,275</b>	
<b>Program FTE</b>	1.50	0.50	1.10	0.90

Program Revenues				
Intergovernmental	\$0	\$5,677,974	\$0	\$5,789,325
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,677,974</b>	<b>\$0</b>	<b>\$5,789,325</b>

Explanation of Revenues

City of Portland General Fund - \$5,311,150  
 Multnomah County Video Lottery Funds - \$1,616,620  
 Emergency Solutions Grant (ESG) - \$478,175

Significant Program Changes

Last Year this program was: FY 2019: 10052A-19 Safety off the Streets - Adult Shelter

In FY 2020, two new shelter sites will open to serve homeless adults, including men, women, and couples. Combined these will provide 220 beds of year-round 24/7 high quality shelter. Fully funding this expansion requires the purchase of program 10052E.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone (AHFE) has prioritized maintaining year-round shelter, particularly for people who are more vulnerable on the street such as women, seniors and people with disabilities. This program offer maintains essential funding for 336 beds of year-round 24/7 emergency shelter for women, including the Gresham Women's Shelter, a Domestic Violence (DV) informed low-barrier shelter that opened Fall 2016.

**Program Summary**

A January 2015 Point-in-Time count found 566 women living on the streets. The AHFE Executive Committee increased local investment in shelter for women, and two years later the 2017 count showed a nearly 17% decrease. While good news, there were still 471 unsheltered women on a given night in Multnomah County, which requires ongoing commitment to prioritize shelter and housing resources for this population.

While it does not end a person's homelessness, emergency shelter is vital to protecting the basic health and safety of individuals while they are experiencing homelessness. This program funds 336 emergency shelter beds for women. Funds are contracted to nonprofit providers to pay the operating expenses for shelter, including maintenance, staffing, materials and supplies, and on-site services.

These beds include the Gresham Women's Shelter, which opened in the Fall of 2016 with 90 year-round, 24/7 emergency shelter beds. It is the first publicly funded year-round shelter for adults in Gresham. The shelter is DV-informed and designed to alleviate the pressure points in the DV system while providing homeless women with emergency shelter options. This shelter partners with 211, The Gateway Center, and Call to Safety to screen for eligibility and coordinate intake.

In addition to providing a safe place to stay, these shelters are essential locations for women to learn about and access the services they need to find permanent housing, acquire an income, and receive health-related services. Services are delivered through contractors that adhere to A Home for Everyone's Community Guidelines for shelter, which includes delivering services in accordance with the principles of assertive engagement and trauma-informed care.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of year-round emergency shelter beds	330	330	336	336
Outcome	People served in year-round emergency shelter beds*	2,113	3,310	1,750	1,750

**Performance Measures Descriptions**

\*FY19 Purchased Outcomes were based on FY17 outcomes, that were much higher than anticipated. The rapid shelter turnover in FY17 was anomalous and we are returning to rates more similar to previous years. We are also seeing longer shelter stays because of an increasingly high need population in shelter and continuing difficulties finding permanent housing.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$142,830	\$3,428,510	\$148,550	\$3,485,310
Materials & Supplies	\$90,000	\$0	\$14,840	\$78,230
<b>Total GF/non-GF</b>	<b>\$232,830</b>	<b>\$3,428,510</b>	<b>\$163,390</b>	<b>\$3,563,540</b>
<b>Program Total:</b>	<b>\$3,661,340</b>		<b>\$3,726,930</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,428,510	\$0	\$3,485,310
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,428,510</b>	<b>\$0</b>	<b>\$3,485,310</b>

Explanation of Revenues

City of Portland General Fund - \$2,686,800  
 State Homeless Assistance Program (SHAP) - \$290,420  
 State of Oregon Emergency Housing Assistance (EHA) - \$508,090  
 Multnomah County Video Lottery Funds - \$78,230

Significant Program Changes

Last Year this program was: FY 2019: 10052B-19 Safety off the Streets - Women's Shelter

**Department:** Nondepartmental **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 10050B  
**Program Characteristics:**

**Executive Summary**

In the last Point-in-Time Homeless Count (2017), nearly 1,700 people were counted sleeping outside on the streets or other public spaces - 40% of those counted. While there was an increase in the number of people staying in year-round emergency shelters from the previous year, there remain long waiting lists for existing shelters. And for some people experiencing homelessness, alternative shelter spaces, including open space pop-up shelter, better meet their needs.

**Program Summary**

Alternative shelter spaces provide a safe space to sleep and access resources for those who are not currently served by traditional shelters. People using these alternative shelters will have improved access to services with the goal of moving in to permanent housing as quickly as possible. The Alternative Shelter Program will bring enhanced services and supports to existing alternative shelters such as the beds at Kenton Women's Village, allow for relocating existing alternative shelters to new locations, and support the creation of additional alternative shelter options.

This program will improve the alternative shelter quality and organizational capacity at existing alternative shelters. It will also offer system navigation and support services to alternative shelter sites to assist with transitions to permanent housing.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of people served annually*	78	134	100	130
Outcome	Percentage of people using sites to transition to permanent housing**	NA	35%	35%	35%

**Performance Measures Descriptions**

\*Target based on Kenton Women's Village and Dignity Village. Other program components do not have established targets.

\*\*Based on Kenton Women's Village transitions. Other program components do not have established targets.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$0	\$772,630	\$0	\$387,540
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$772,630</b>	<b>\$0</b>	<b>\$387,540</b>
<b>Program Total:</b>	<b>\$772,630</b>		<b>\$387,540</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$772,630	\$0	\$387,540
<b>Total Revenue</b>	<b>\$0</b>	<b>\$772,630</b>	<b>\$0</b>	<b>\$387,540</b>

Explanation of Revenues

City of Portland General Fund - \$387,540

Significant Program Changes

**Last Year this program was:** FY 2019: 10052A-19 Safety off the Streets - Adult Shelter

In FY 2019, this program offer included \$300,000 of one-time-only capital to assist with the expense of relocating one or more the current alternative shelter sites to new locations. Additionally, the Vehicle Pilot Project that was part of this offer in FY 19 was eliminated as part of the City of Portland's 1% General Fund reductions.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10055A&B, 10054D  
**Program Characteristics:**

### Executive Summary

Through A Home for Everyone, the community has recognized that, while it does not end a person's homelessness, providing emergency shelter is vital to the safety and stability of homeless families and other vulnerable populations. This offer supports hundreds of beds of emergency shelter for families with children. The beds are located in north and east Portland and are operated year-round, 24 hours a day, 7 days a week.

### Program Summary

This program provides year-round, 24/7 access to shelter for homeless families. Families seeking shelter are screened and referred by the Coordinated Access Shelter Intake Line. Once a family is at shelter, they receive a range of on-site services to assist them in accessing permanent housing. Specifically, families receive housing placement assistance through the Homeless Family System of Care (HFSC) and on-site Diversion resources.

The family shelter system leverages federal, state and local resources as well as faith-based and non-profit partnerships. There is also a rich history of volunteerism in the shelters. These relationships expand activities for children living in the shelter, as well as increase culturally-specific services and neighborhood involvement.

School-aged children staying in shelter are provided a stable place to be and are connected with transportation to their local school. Through this offer, healthy and engaging activities will be available in the shelter and off-site for times when kids are not in school, including evenings, spring break and summer break.

A significant majority of year-round family shelter beds will be relocating to improved facilities/sites in late FY19 and early FY20. At that point all year-round shelter capacity will be provided in shelters that offer private rooms to each family.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Year-round emergency shelter beds	280	270	270	270
Outcome	Number of unduplicated individuals served	1,312*	922	650**	750
Output	Number of youth engaged in activities annually	400	400	400	400

### Performance Measures Descriptions

\*This was a high number due to our community's no turn-away policy still being in place for a portion of FY 18

\*\*This FY19 estimate is significantly lower than purchased due to longer shelter stays for families and temporary capacity reductions as facilities transition. FY20 is projected based on continued increases in lengths of stay but full system capacity.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$0	\$44,308	\$0
Contractual Services	\$884,960	\$1,444,790	\$937,180	\$1,356,900
Materials & Supplies	\$0	\$0	\$192	\$0
<b>Total GF/non-GF</b>	<b>\$884,960</b>	<b>\$1,444,790</b>	<b>\$981,680</b>	<b>\$1,356,900</b>
<b>Program Total:</b>	<b>\$2,329,750</b>		<b>\$2,338,580</b>	
<b>Program FTE</b>	0.00	0.00	0.32	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,444,790	\$0	\$1,356,900
Beginning Working Capital	\$100,000	\$0	\$104,000	\$0
<b>Total Revenue</b>	<b>\$100,000</b>	<b>\$1,444,790</b>	<b>\$104,000</b>	<b>\$1,356,900</b>

**Explanation of Revenues**

State of Oregon Emergency Housing Assistance (EHA) - \$321,310  
 State of Oregon Emergency Solutions Grant (ESG)- \$118,000  
 State Homeless Assistance Program (SHAP) - \$712,300  
 City of Portland General Fund - \$205,290  
 Multnomah County Tax Title - \$104,000

**Significant Program Changes**

**Last Year this program was:** FY 2019: 10052D-19 Safety off the Streets - Family Shelter

Combines the following FY 2019 program offers: 10052D and 10052E - Youth Shelter Activities.





**Program #10052E - Safety off the Streets - Expanded Adult Shelter Operations** 6/27/2019

**Department:** Nondepartmental **Program Contact:** Marc Jolin  
**Program Offer Type:** Innovative/New Program **Program Offer Stage:** As Adopted  
**Related Programs:** 10052A  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone has prioritized the expansion of emergency shelter for all populations, and the largest unmet need continues to be for adult households without children. The basic safety of people experiencing homelessness requires funding for a full range of emergency night and day shelter services, including shelter for specific populations and associated emergency services expenses.

**Program Summary**

In the last Point-in-Time Homeless Count (2017), nearly 1,700 people were counted sleeping outside on the streets or other public spaces - 40% of those counted. While there was an increase in the number of people staying in year-round emergency shelters from the previous year, there remain long waiting lists for existing shelters.

Two new, high quality purpose-built 24/7 shelters are scheduled to open in 2019, substantially improving the quality of programming offered to adult shelter participants in our community. One of these shelters will be in SE Portland, focused on women and couples, with priorities for women, people with disabilities and veterans. The other shelter will be a downtown, referral-based program that focuses on chronically homeless adults who were previously living in encampments.

The significant majority of operating funds for these shelters will come from reallocating funding from two temporary adult shelters. However, these temporary shelters offer 20 fewer beds, and 75 of those beds are night-time only which results in lower operating costs. The added beds, added hours, and enhanced programming at the two new shelters will require the additional funding requested in this offer.

<b>Performance Measures</b>					
<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY18 Actual</b>	<b>FY19 Purchased</b>	<b>FY19 Estimate</b>	<b>FY20 Offer</b>
Output					
Outcome					

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$250,000	\$250,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$250,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$500,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$250,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>

Explanation of Revenues

City of Portland General Fund - \$250,000  
 Multnomah County General Fund - \$250,000

Significant Program Changes

Last Year this program was:

This is a shared commitment between the City and County.

<b>Department:</b>	Nondepartmental	<b>Program Contact:</b>	Marc Jolin
<b>Program Offer Type:</b>	Existing Operating Program	<b>Program Offer Stage:</b>	As Adopted
<b>Related Programs:</b>	10052H		
<b>Program Characteristics:</b>			

### Executive Summary

A Home for Everyone has prioritized expanding shelter for vulnerable populations. Domestic violence emergency shelters provide immediate safety and offer crisis intervention support to survivors and children fleeing domestic violence or experiencing homelessness as a result of a recent incident of intimate partner violence. These shelters provide year-round beds and are accessed by hundreds of survivors annually, 83% identifying as people of color.

### Program Summary

Domestic violence (DV) is a significant contributing factor to homelessness and housing instability. Nearly four in ten women who experience domestic violence will become homeless as a result. Additionally, leaving an abusive relationship is often the most dangerous time, and survivors are frequently navigating multiple complex systems, such as child welfare, the civil legal system, and immigration. Access to a confidential emergency shelter and trauma-informed, survivor-driven services is critical for survivors seeking to establish safety for themselves and their children.

This offer supports confidential, domestic violence shelter beds, as well as crisis intervention services that are vital to protecting the health and safety of individuals and children fleeing domestic violence. Funds support shelter operation costs, staffing, limited client assistance, and wrap-around support services at four DV emergency shelters. Services include intensive DV advocacy and support, safety planning, provision of basic needs, co-advocacy within DV continuum service providers, and information and referrals to community-based services and housing programs.

This offer supports four shelters in two models: facility-based emergency shelter and master-leased units. Three facility-based confidential shelters offer 24-hour security and staff seven days a week. A fourth shelter utilizes four scattered site master-leased apartments to provide safety and wrap-around crisis intervention services for survivors. These scattered site units allow multi-generational and/or larger families directly impacted by DV to access services. All four shelters offer a 90-day length of stay with the possibility for extension and jointly serve more than 100 individuals per night. To ensure that survivors who are at greater danger are prioritized for these confidential shelter beds, all shelters use a coordinated triage system and a common, locally-developed screening tool (Safety and Stabilization Assessment) to articulate survivors' needs and match survivors with available shelter space.

Additionally, this program supports emergency vouchers that are used to assist survivors in staying safe when shelter beds are full, act as a bridge voucher to housing when survivors are homeless and in the process of attaining a permanent housing placement, and finally as a respite for women and children who are unable to safely stay in the shelters. This funding provides 7 additional safe "year-round equivalent" beds for the DV system.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of year-round confidential emergency shelter beds + year-round equivalent emergency voucher beds*	147	138	147	147
Outcome	Number of individuals receiving emergency shelter services*	471	484	484	484
Outcome	Number of individuals served with domestic violence emergency vouchers**	270	183	231	183

### Performance Measures Descriptions

\*In FY 2018, 30 shelter beds were added to the system. These additional 30 beds were fully incorporated by mid-FY 2019.

\*\*In FY 2019, we anticipated measuring the "number of individuals served with DV emergency vouchers". Current data reflects outcomes for households served. A conversion was applied to convert households into individuals to meet the measure.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$25,891	\$0	\$44,490
Contractual Services	\$956,620	\$520,190	\$856,720	\$586,150
Materials & Supplies	\$0	\$0	\$0	\$480
Internal Services	\$0	\$0	\$0	\$1,190
<b>Total GF/non-GF</b>	<b>\$956,620</b>	<b>\$546,081</b>	<b>\$856,720</b>	<b>\$632,310</b>
<b>Program Total:</b>	<b>\$1,502,701</b>		<b>\$1,489,030</b>	
<b>Program FTE</b>	0.00	0.42	0.00	0.40

<b>Program Revenues</b>				
Intergovernmental	\$0	\$520,190	\$0	\$632,310
<b>Total Revenue</b>	<b>\$0</b>	<b>\$520,190</b>	<b>\$0</b>	<b>\$632,310</b>

Explanation of Revenues

State of Oregon Homeless Assistance Program (SHAP) - \$587,100  
 City of Portland General Fund - \$45,210

Significant Program Changes

**Last Year this program was:** FY 2019: 10052F-19 Safety off the Streets - Domestic Violence Shelter

When combined with 10052H, the Domestic Violence Emergency motel voucher program is fully funded.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Reinforcing our community value that no one should be forced to sleep outside, this program continues funding the Homeless Youth Continuum's Access Center that provides low-barrier, immediate access to 60 crisis and short-term shelter options, day programs, and 24 hour coordinated access to screening, crisis and basic needs services for youth in Multnomah County. Through the Access Center, shelter and day programs, linkages are provided to a continuum of services and supports for the youth population.

### Program Summary

The Homeless Youth Continuum (HYC) is a highly collaborative and coordinated system comprised of four non-profit agencies, including a culturally specific agency, that provides a continuum of screening, crisis intervention, safety services, shelter, assertive engagement, housing, education, employment, pregnancy and parenting support, and health services to youth up to age 25.

Homeless youth are particularly vulnerable as they attempt to survive on the streets. Over 30% of homeless youth have prior involvement in Department of Human Services (DHS) or the Juvenile Justice system, and a significant number have experienced complex trauma. Ensuring a 24-hour safety net for these youth is critical to addressing basic needs and providing linkage to longer term care options within the HYC.

The Access Center is co-located with the shelter programs and provides centralized screening via mobile and stationary staff who make eligibility determinations and refer youth to HYC programs or other appropriate systems of care. Emergency shelter is provided through a downtown-located facility with capacity for 60 people, except in winter when capacity increases to 70. All youth residing in shelter have access to meals, hygiene, information/referral, and assertive engagement (case management) services.

Day Programs are available at two locations and offer meals, hygiene, access to computers, transportation, assessment for service needs, and provide opportunities for further engagement in system services. An average of 200 youth participate in Day Programs on a daily basis.

The HYC service model is based on an assertive engagement practice that follows the principles of Positive Youth Development, and ensures services are client directed, strength-based, non-judgmental and offer relational continuity. Services are integrated with public safety and other service systems, ensuring joint planning and coordination in addressing the needs of this population.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth screened via the Access Center	554	700	600	600
Outcome	Number of youth provided with Safety Services	1,100	1,200	1,200	1,200
Output	Number of shelter bed nights	21,584*	22,500	22,500	22,500
Output	Number of youth served in crisis and short-term shelter*	664	650	650	650

### Performance Measures Descriptions

\* Not all winter shelter expansion beds were utilized from November - March, 2018 due to a milder winter season and not all beds were at 100% capacity every night of the year. Shelter was at a 92% average capacity over this time span.

\*\*In FY 2017 and FY 2018, the number of youth served in shelter was under-target due to longer lengths of stay in shelter (and therefore fewer youth served) caused by a lack of affordable housing options in which to place youth. Average length of stay was 86 days in crisis and short term shelter combined.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$1,486,780	\$236,240	\$1,500,810	\$245,690
<b>Total GF/non-GF</b>	<b>\$1,486,780</b>	<b>\$236,240</b>	<b>\$1,500,810</b>	<b>\$245,690</b>
<b>Program Total:</b>	<b>\$1,723,020</b>		<b>\$1,746,500</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$236,240	\$0	\$245,690
<b>Total Revenue</b>	<b>\$0</b>	<b>\$236,240</b>	<b>\$0</b>	<b>\$245,690</b>

Explanation of Revenues

City of Portland General Fund - \$245,690

Significant Program Changes

Last Year this program was: FY 2019: 10052G-19 Safety off the Streets - Youth Shelter

**Department:** Nondepartmental **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 10052F  
**Program Characteristics:**

### Executive Summary

A Home for Everyone has prioritized expanding shelter for vulnerable populations including the use of emergency motel vouchers when shelter beds are not available. Domestic violence emergency shelters provide immediate safety and offer crisis intervention support to survivors and children fleeing domestic violence or experiencing homelessness as a result of a recent incident of intimate partner violence.

### Program Summary

This program restores the current funding level support for emergency vouchers. Emergency vouchers are used to assist survivors in staying safe when shelter beds are full, act as a bridge voucher to housing when survivors are experiencing homelessness or fleeing and in the process of attaining a permanent housing placement, and finally as a respite for women and children who are unable to safely stay in the shelters. This funding restores 7 safe "year-round equivalent" emergency beds for the DV system.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Year-round equivalent DV emergency voucher beds, that are part of the DV system's emergency shelter capacity.	7	8	7	7
Outcome	Number of individuals served with domestic violence emergency vouchers*	247	167	212	167

### Performance Measures Descriptions

\*In FY 2019, we anticipated measuring the "number of individuals served with DV emergency vouchers". Current data reflects outcomes for households served. A conversion was applied to convert households into individuals to meet the measure.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$93,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$93,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$93,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10052F-19 Safety off the Streets - Domestic Violence Shelter

When combined with 10052F, the Domestic Violence Emergency motel voucher program is fully funded.



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Even with significant expansion of year-round emergency shelter, the urgent need persists for expanded winter and severe weather shelter capacity. This program funds additional beds of winter shelter for adults and families, expanded winter shelter for Veterans and youth, as well as severe weather services across the County.

**Program Summary**

This program funds winter shelter and severe weather shelter capacity.

- **Temporary/Winter Shelter:** People with disabilities, older adults and those in poor health are particularly at risk in cold winter conditions. In FY 2019, JOHS opened additional winter shelter beds for adults, youth, Veterans, and families. These beds have all been fully utilized. This program will allow similar capacity to be created next winter.
- **Severe Weather Shelter:** In the event of severe weather that significantly elevates the risk to people sleeping unsheltered in our community, additional shelter capacity is created that remains in place for the duration of the severe weather event. The JOHS invests in base funding for severe weather warming centers, through contracted nonprofit agencies, that opens as needed during the course of the year. In addition, the JOHS invests in expanded shelter capacity to ensure that no one is turned away from shelter. The winter storms of 2016-2017 demonstrated the need to have a reliable funded system of additional severe weather shelter in East County. This program includes severe weather capacity in several sites throughout the County, provided by contracted nonprofit partners.
- **Emergency assistance:** This program also funds an array of services associated with ensuring basic safety, including staffing, flexible funding for material needs, transportation and outreach coordination, as well as extended information and referral services during winter months.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of adult temporary/winter shelter beds*	225	225	225	225
Outcome	Percentage of unsheltered who seek and receive shelter during a declared severe weather event	100%	100%	100%	100%
Output	Number of winter shelter beds for families	N/A	75	75	75
Output	Winter shelter beds for youth	10	10	10	10

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$666,030	\$1,103,360	\$1,194,650	\$1,097,980
<b>Total GF/non-GF</b>	<b>\$666,030</b>	<b>\$1,103,360</b>	<b>\$1,194,650</b>	<b>\$1,097,980</b>
<b>Program Total:</b>	<b>\$1,769,390</b>		<b>\$2,292,630</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$856,490	\$0	\$1,097,980
Beginning Working Capital	\$0	\$0	\$545,000	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$856,490</b>	<b>\$545,000</b>	<b>\$1,097,980</b>

**Explanation of Revenues**

City of Portland General Fund - \$1,097,980  
 Multnomah County Tax Title Funds - \$545,000

**Significant Program Changes**

**Last Year this program was:** FY 2019: 10052I-19 Safety off the Streets - Winter Shelter/Severe Weather

Through the use of Tax Title Funding and community partnerships, the JOHS has committed to providing 75 beds of Family Shelter during the winter season. This program now accounts for all of the funding for severe weather and temporary shelters some of which existed in program 10052A in FY 2019.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10053M  
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized a range of highly effective housing placement and retention strategies in order to significantly reduce homelessness among vulnerable adult households and respond to increases in homeless women. This program supports existing programming to house and retain hundreds of men and women experiencing homelessness through limited duration rental assistance, mobile housing placement and retention support staffing.

### Program Summary

For the majority of people experiencing homelessness, returning to permanent housing requires a combination of limited duration, flexible rent assistance, housing placement and retention support staffing, and access to income acquisition assistance. This housing placement and retention strategy, often referred to as “rapid rehousing” is a recognized best practice and critical element of the housing placement strategies prioritized through A Home for Everyone to significantly decrease homelessness among vulnerable adults in Multnomah County.

In the 2017 Multnomah County Point in Time Count, 471 adult women were counted sleeping outside and women were one of the fastest growing groups within the overall homeless population (16.7% increase between 2015-17). In response to this growing unmet need, the JOHS increased prevention, housing placement, and shelter resources to reduce unsheltered homelessness among women. The count also revealed that women of color are disproportionately represented in the unsheltered and sheltered population. Therefore, the direction of the AHFE Executive Committee was not only to reduce homelessness among adult women, but more specifically to decrease racial disparities among homeless women.

This program continues a range of existing housing placement and retention strategies developed and coordinated through A Home for Everyone, including key elements of the housing placement capacity expansion initiated during FY 2017. These investments in rapid rehousing programs for adult households leverage significant federal, state and local resources to support the efforts of people experiencing homelessness to secure and retain permanent housing. Services are delivered by a range of skilled nonprofit partners and directed to communities of color, women, and other vulnerable adults experiencing homelessness. They include flexible rent assistance and housing placement and retention staffing accessed through:

- Culturally-specific service providers serving Multnomah County’s communities of color
- Shelters, day centers and street outreach programs, including targeted outreach in Gresham and East County
- The countywide Short Term Rent Assistance program that consolidates multiple federal, state and local funding streams into aligned eviction prevention and rapid rehousing delivered through 19 non-profit partners

Through these investments, hundreds of people will move into permanent housing and receive the housing placement, retention, and income acquisition supports they need to retain their housing. Based on current data, more than 45% of the people housed are expected to be people of color.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households placed or retained in permanent housing through the STRA program	869	580	600	600
Outcome	Percentage of households retaining housing at 6 months post-exit*	88%	80%	85%	80%
Output	Number of households placed or retained in permanent housing with sources other than STRA program	1,232	600**	1,100	1,100

### Performance Measures Descriptions

\*In addition to the non-STRA programs in this program offer, reported retention rate includes results for the entire STRA program, as opposed to only STRA recipients funded through JOHS.

\*\*Original current year purchased number (600) was due to a mathematical error.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$101,558	\$0	\$110,326
Contractual Services	\$864,710	\$3,326,486	\$22,900	\$4,026,990
Materials & Supplies	\$0	\$0	\$0	\$54
<b>Total GF/non-GF</b>	<b>\$864,710</b>	<b>\$3,428,044</b>	<b>\$22,900</b>	<b>\$4,137,370</b>
<b>Program Total:</b>	<b>\$4,292,754</b>		<b>\$4,160,270</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,106,366	\$0	\$3,482,450
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,106,366</b>	<b>\$0</b>	<b>\$3,482,450</b>

Explanation of Revenues

City of Portland General Fund - \$3,372,070  
 HUD Continuum of Care Planning Grant - \$110,380  
 Multnomah County Video Lottery Funds - \$654,920

Significant Program Changes

**Last Year this program was:** FY 2019: 10053A-19 Housing Placement & Retention - Adults Only Households

\$150,000 of County General Funds, previously contracted funds, are being reallocated into JOHS staffing to support the ongoing system-wide programming work. The JOHS expects any reductions in household placements will be offset by improvements in the overall system support and service coordination resulting from more appropriate system staffing.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10053K, 10053L  
**Program Characteristics:**

**Executive Summary**

The Homeless Family System of Care (HFSC) works collaboratively as a leadership/direct service team to address the unique needs of homeless families in Multnomah County. The Mobile Housing Team (MHT) will maintain its current capacity to house hundreds of families, and provide housing placement, ongoing support and flexible rent assistance and retention to the community's most vulnerable homeless families. MHT is a collaboration of Multnomah County and seven homeless service providers, the majority culturally specific agencies.

**Program Summary**

The Homeless Family System of Care (HFSC) is the primary coordinated effort to assist families experiencing homelessness to make a rapid and sustainable transition back into permanent housing. It is a collaboration of agency leaders and direct service staff that practice shared budgeting, leveraging of resources, shared accountability, case consultation and ongoing process improvement. The system has shared values that include the practice of assertive engagement, using an equity lens to assure racial and social justice, and a shared belief that all homeless families should be housed. The majority of agencies in the collaborative are culturally-specific providers.

This program offer continues housing placement/retention services, including short- to medium-term flexible rent assistance (0-12 months) and client assistance for families experiencing homelessness. Eligible families may be living in shelter, doubled-up, experiencing domestic violence, living on the streets or in cars, or other places not meant for human habitation. A broad definition of homelessness allows us to equitably serve families that are most vulnerable in a variety of living situations. In FY 2018, 78% of the families served through MHT identified as being from communities of color, achieving the A Home for Everyone goal of improving access and outcomes for these communities.

Homeless families access the system through Coordinated Access staff, who screen families for immediate safety and overall vulnerability. Because many more families are seeking housing assistance than MHT is resourced to provide, families are prioritized based on vulnerability, housing opportunity and provider capacity.

This program leverages federal and state funding including U.S. Department of Housing and Urban Development grants. The system collaborates with the Department of Human Services (DHS), which provides a full-time DHS staff who is an integrated member of the team and provides eligibility assistance and benefits acquisition.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households newly placed or retained in housing	621	600*	800	640
Outcome	Percentage of households retaining housing at 12 months post-exit**	90%	80%	80%	80%

**Performance Measures Descriptions**

\*FY19 purchase number changed due to a change in the measure from Households newly placed to Households newly placed or retained.

\*\*These percentages are based on the retention rate for households who were successfully contacted via follow-up.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$33,199	\$94,490	\$101,324	\$94,153
Contractual Services	\$3,811,710	\$991,920	\$3,606,870	\$1,100,270
Materials & Supplies	\$0	\$0	\$4,606	\$0
Internal Services	\$0	\$0	\$0	\$2,487
<b>Total GF/non-GF</b>	<b>\$3,844,909</b>	<b>\$1,086,410</b>	<b>\$3,712,800</b>	<b>\$1,196,910</b>
<b>Program Total:</b>	<b>\$4,931,319</b>		<b>\$4,909,710</b>	
<b>Program FTE</b>	0.26	0.74	1.00	0.68

<b>Program Revenues</b>				
Intergovernmental	\$0	\$991,920	\$0	\$1,196,910
Beginning Working Capital	\$0	\$0	\$364,000	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$991,920</b>	<b>\$364,000</b>	<b>\$1,196,910</b>

Explanation of Revenues

City of Portland General Fund - \$1,100,270  
 Emergency Housing Assistance (EHA) - \$96,640  
 Multnomah County Tax Title Funds -\$364,000

Significant Program Changes

**Last Year this program was:** FY 2019: 10053C-19 Housing Placement & Retention - Homeless Families

When combined with 10053K, rent assistance for the Mobile Housing Team is fully funded. This funding includes \$75,000 of one-time-only Multnomah County General Funds.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized a range of highly effective housing placement and retention strategies focused on placing people directly from shelter in order to significantly reduce homelessness among vulnerable adult households. This program houses and retains men and women experiencing homelessness through limited duration rental assistance, mobile housing placement and retention support staffing, as well as culturally-specific services. All services are delivered through skilled nonprofit partners including culturally-specific providers.

### Program Summary

For the majority of people experiencing homelessness, returning to permanent housing requires a combination of limited duration, highly flexible rent assistance, housing placement and retention support staffing, as well as income assistance. This housing placement and retention strategy, often referred to as “rapid rehousing” is a recognized national best practice and critical element of the housing placement strategies prioritized through A Home for Everyone to significantly decrease homelessness among those who are highly vulnerable in Multnomah County.

This program offer uses the range of existing housing placement and retention strategies developed and coordinated through A Home for Everyone, including key elements of the housing placement capacity expansion. These investments in rapid rehousing programs support the efforts of people experiencing homelessness to secure and retain permanent housing.

Services are delivered by highly skilled nonprofit partners and targeted to communities of color, women, and other vulnerable adults experiencing homelessness. They include flexible rent assistance and housing placement and retention staffing accessed through:

- Emergency shelters and day centers; and
- Multi-agency mobile in-reach teams that include staff from culturally-specific, domestic violence, and behavioral health providers to assist adults in emergency shelters to more quickly exit shelter and return to housing.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of people placed or retained in permanent housing (existing)*	223	200	200	200
Outcome	Percentage of households retaining housing at 6 months post-exit (existing)**	78%	80%	85%	80%
Output	Number of people placed or retained in permanent housing (new expansion)	N/A	85	200	207
Outcome	Percentage of households retaining housing at 6 months post-exit (new expansion)**	n/a	80%	80%	80%

### Performance Measures Descriptions

\*Measure 1 includes ongoing in-reach programs that serve homeless adults at shelters and other sites. Measure 3 & 4 reflect an expansion of effort in FY 2019 to assist adults -- particularly long-term shelter stayers -- in moving to permanent housing.

\*\*These percentages are based on the retention rate for households who were successfully contacted via follow-up.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$213,990	\$2,766,390	\$67,780	\$2,429,705
<b>Total GF/non-GF</b>	<b>\$213,990</b>	<b>\$2,766,390</b>	<b>\$67,780</b>	<b>\$2,429,705</b>
<b>Program Total:</b>	<b>\$2,980,380</b>		<b>\$2,497,485</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,986,510	\$0	\$2,429,705
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,986,510</b>	<b>\$0</b>	<b>\$2,429,705</b>

Explanation of Revenues

City of Portland General Fund - \$2,429,705

Significant Program Changes

**Last Year this program was:** FY 2019: 10053D-19 Housing Placement & Retention - Placement out of Shelter

\$185,000 of City General Funds, previously contracted funds, are being reallocated to JOHS staffing to support the ongoing system-wide programming work. We expect any reductions in household placements will be offset by improvements in the overall system support and service coordination resulting from more appropriate system staffing.

This program includes reductions to the nonprofits who provide housing placement, and housing retention staffing and rental assistance available to the more the 1,000 adults who are sleeping in facility-based and other alternative shelter settings.



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone prioritizes addressing the intersection of homelessness and domestic and sexual violence. Many survivors must leave their home to be safe, while others face eviction due to problems created by an abusive partner's behavior. Rapid re-housing is a nationally recognized best practice to address homelessness for individuals fleeing domestic violence who are in need of financial assistance and support. This program provides housing and support services to more than 550 individuals of whom 85% identify as people of color.

**Program Summary**

Rapid re-housing programs provide advocacy support and financial assistance to help survivors and their children quickly establish safe, permanent housing after fleeing domestic violence (DV). Providers assist survivors with safety planning, reducing barriers to safe housing, identifying housing options, advocating with landlords, providing flexible financial assistance for housing placement and retention, and connecting survivors to community resources. This program supports:

- Rapid rehousing housing placements and support services, including advocacy, case management, client assistance, rent assistance and safety planning. Additionally, participants receive support for housing retention through the provision of vocational, educational, and financial management training to help increase their economic stability.
- Domestic Violence Housing Advocacy at culturally-specific domestic violence programs, providing rapid re-housing services, as well as eviction prevention for survivors who can safely remain in their homes.
- Shared housing for survivors and their children through democratically run homes. Funding assists with move-in costs, rent assistance, and short-term needs, and participants have access to case management, economic empowerment services, and advocacy support.
- Mobile DV Community Advocacy at non-traditional DV services settings, connecting survivors in need of DV specific services with safety planning, barrier removal, flexible client assistance, and referrals to DV housing programs and other community resources.
- Shelter to Stabilization Advocacy co-located at domestic violence emergency shelters, to assist survivors with barrier removal to employment and housing, client assistance for short-term needs, and referrals to housing programs and community resources.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of participants served	987	550	600	650
Outcome	Percentage of participants who will exit to permanent housing	89%	85%	85%	85%

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$46,078	\$13,312	\$66,736	\$122,589
Contractual Services	\$1,633,084	\$838,630	\$1,699,780	\$988,726
Materials & Supplies	\$0	\$0	\$269	\$17,955
<b>Total GF/non-GF</b>	<b>\$1,679,162</b>	<b>\$851,942</b>	<b>\$1,766,785</b>	<b>\$1,129,270</b>
<b>Program Total:</b>	<b>\$2,531,104</b>		<b>\$2,896,055</b>	
<b>Program FTE</b>	0.45	0.13	0.60	1.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$838,630	\$0	\$1,129,270
<b>Total Revenue</b>	<b>\$0</b>	<b>\$838,630</b>	<b>\$0</b>	<b>\$1,129,270</b>

**Explanation of Revenues**

Department of Justice Office of Violence Against Women (OVW) - \$333,000  
 Housing & Urban Development Horizons Domestic Violence - \$671,000  
 City of Portland General Fund - \$44,970  
 HUD Continuum of Care Planning Grant - \$80,300

**Significant Program Changes**

**Last Year this program was:** FY 2019: 10053E-19 Housing Placement & Retention - Domestic Violence

Through the HUD Continuum of Care Grant, the JOHS was awarded a 1.00 Domestic Violence Coordinated Access Coordinator to strengthen and support the Domestic Violence System of Care.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone (AHFE) has prioritized a range of effective housing placement and retention strategies in order to reduce homelessness among highly vulnerable adult households including seniors. This program supports existing programming coordinated through AHFE, including rent assistance, housing placement and retention, and supportive services to provide stability for seniors experiencing or at risk of homelessness.

**Program Summary**

In the 2017 Point In Time Count, nearly 20% (816) of those counted were 55 and older. There was a 14.5% increase from 2015 in adults ages 55 to 69 experiencing homelessness on the night of the count. In addition, 44 of those counted were 70 and older, a nearly 50% increase from 2015.

For the majority of seniors experiencing homelessness, returning to permanent housing requires a combination of limited duration, highly flexible rent assistance, housing placement, retention support staffing, and benefits acquisition assistance. This housing placement and retention strategy, often referred to as “rapid rehousing” is a recognized national best practice and critical element of the housing placement strategies prioritized through A Home for Everyone to significantly decrease homelessness among highly vulnerable adults experiencing homelessness throughout Multnomah County.

This program continues housing placement and retention strategies developed and coordinated through A Home for Everyone, specifically targeted to meet the permanent housing needs of seniors. These targeted investments highly leverage other federal, state and local resources including Medicaid, affordable housing units and permanent rental subsidies to support the needs of seniors experiencing homelessness. Services are delivered by a highly skilled nonprofit partner that provides flexible rent assistance and housing placement and retention staffing to assist seniors experiencing or at risk of homelessness into other leveraged permanent housing resources.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of seniors placed into permanent housing or prevented from eviction	647*	400	500*	400
Outcome	Percentage of senior households retaining housing 12 months post-exit	84%	80%	80%	80%

**Performance Measures Descriptions**

\*Outcomes exceeded original projections due to one time increases in rent assistance that we do not foresee being able to provide in FY20.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$585,270	\$0	\$608,690
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$585,270</b>	<b>\$0</b>	<b>\$608,690</b>
<b>Program Total:</b>	<b>\$585,270</b>		<b>\$608,690</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$585,270	\$0	\$608,690
<b>Total Revenue</b>	<b>\$0</b>	<b>\$585,270</b>	<b>\$0</b>	<b>\$608,690</b>

Explanation of Revenues

City of Portland General Fund - \$608,690

Significant Program Changes

Last Year this program was: FY 2019: 10053G-19 Housing Placement & Retention - Medical/Aging

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone partners have prioritized permanent housing placement for vulnerable populations, including homeless youth. The Homeless Youth Continuum, through this program and program 10052G, maintains existing capacity to provide services essential to achieving successful housing and developmental outcomes for homeless youth, including case management, recovery-oriented services, peer mentorship, health and parenting resources, as well as housing placement/retention.

**Program Summary**

The Homeless Youth Continuum (HYC) is a highly collaborative and coordinated system comprised of four non-profit agencies, including a culturally-specific agency, that provides a continuum of screening, crisis intervention, safety services, shelter, assertive engagement, housing, education, employment, pregnancy and parenting support, and health services to homeless youth up to age 25. This program maintains current capacity to provide essential housing and developmental supports for youth, including Assertive Engagement, Parenting Education, Recovery Oriented Supports & Engagement (ROSE), and housing placement and retention supports. Services include:

- **Assertive Engagement (case management):** These services are fundamental to moving youth into independence by providing access, assessment, transition planning and support by staff that are relationship-focused, mobile, and operate throughout Multnomah County. AE staff provide linkage to education, employment, health, mental health and addictions treatment, housing services, and provide follow up care upon exit from programs.
- **Parenting Support:** Over the last four years, HYC has seen a 25% increase in the number of youth accessing services who are pregnant and parenting. With supports on-site and at mobile locations, HYC can provide both culturally appropriate services and meet the developmental needs of pregnant and parenting youth. Housing placement funds are provided to house youth in appropriate housing options.
- **Recovery Oriented Supports & Engagement (ROSE):** For the majority of youth served, access to mental health and addiction recovery support services is essential to their housing and developmental success. 93% of youth served have either addiction or mental health issues, with 53% reporting co-occurring issues. The ROSE program provides certified staff and peer mentors who engage homeless youth in recovery supports, conduct assessments, and connect youth to formal treatment programs, provide follow up care, on-going support in group settings, and healthy recreation alternatives.
- **Housing:** Programs provide a range of developmentally appropriate housing options. Many homeless youth lack rental histories or have other barriers to finding safe, stable housing. Housing options include onsite housing with 24 hour staffing, scattered site housing, rapid re-housing, shared, and group housing. Youth can access the options that best fit their needs and can move within the types of housing as needed. Housing navigators help youth search for best fit housing and provide retention supports.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of youth receiving recovery support services	768	700	700	700
Outcome	Percentage of youth households retaining housing at 6 months post-exit	88%	75%	75%	75%
Output	Number of youth receiving pregnancy and parenting supports	132	120	120	120
Output	Number of youth newly placed or retained in transitional or permanent housing	534	460	460	460

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$128,537	\$0	\$139,383	\$0
Contractual Services	\$2,607,780	\$1,702,639	\$2,713,630	\$1,731,470
Materials & Supplies	\$0	\$0	\$117	\$690
<b>Total GF/non-GF</b>	<b>\$2,736,317</b>	<b>\$1,702,639</b>	<b>\$2,853,130</b>	<b>\$1,732,160</b>
<b>Program Total:</b>	<b>\$4,438,956</b>		<b>\$4,585,290</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,702,639	\$0	\$1,732,160
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,702,639</b>	<b>\$0</b>	<b>\$1,732,160</b>

Explanation of Revenues

Housing & Urban Development Homesafe - \$490,900  
 Housing & Urban Development Horizons Youth - \$207,400  
 Housing & Urban Development Pathways Housing for Youth with Mental Health - \$46,800  
 Housing & Urban Development Pathways Youth Housing - \$22,400  
 State of Oregon Emergency Housing Assistance (EHA) - \$215,160  
 City of Portland General Fund - \$749,500

Significant Program Changes

Last Year this program was: FY 2019: 10053H-19 Housing Placement & Retention - Youth Services

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone's "A Home for Every Veteran" initiative successfully created a system capable of offering permanent housing to more than 600 homeless Veterans during last fiscal year. This program offer will ensure that we continue to leverage federal HUD and VA resources, as well as State EHA funds, to meet the short-term rent assistance and barrier mitigation needs of Veterans who become homeless in our community. This program will help more than 200 Veteran households end or prevent their homelessness.

**Program Summary**

In January 2015, the County Chair and Portland's Mayor joined the national "Mayors' Challenge to End Veteran Homelessness" and Portland was chosen to participate in the federal 25 Cities Initiative to End Veteran Homelessness. In order to achieve a functional end to Veteran homelessness, our community was required to build a system that could offer permanent housing to at least as many Veterans as are expected to become homeless in Multnomah County during a single year. Based on a point-in-time count conducted in January 2015, that number was estimated at 690. As of the end of December 2015, we had successfully housed 695 Veterans and by the end of 2016 more than 1,300 Veterans had returned to permanent housing. As a result of our efforts, Portland was the first West Coast city certified by the U.S. Interagency Council on Homelessness as having effectively ended Veteran homelessness.

The capacity to house this number of Veterans depends, to a significant extent, on federal funding in the form of Veterans Affairs Supportive Housing (VASH) and Supportive Services for Veteran Families (SSVF). It also relies on a commitment of 50 Housing Choice Vouchers and 50 subsidized housing units by Home Forward. While we anticipate that federal funding will remain available in FY 2020, these federal funds are not enough to help Veterans move into housing if they have significant barriers or lack security deposit funds. The federal funds also have limitations on eviction prevention assistance, and eligibility restrictions that limit who among homeless Veterans can be served.

The flexible rent assistance and barrier mitigation funds available through this program offer allow nonprofit organizations to assist Veterans with an array of housing services. This includes security deposits, helping with utility/past property debts, limited term rent assistance, legal fees and moving fees.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households placed or retained in housing	216	175	215	215
Outcome	Percentage of households retaining housing 12 months post-exit or post-subsidy*	80%	75%	70%	70%

**Performance Measures Descriptions**

\*These percentages are based on the retention rate for households who were successfully contacted via follow-up.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$190,670	\$695,526	\$198,300	\$663,630
Materials & Supplies	\$0	\$0	\$0	\$150
<b>Total GF/non-GF</b>	<b>\$190,670</b>	<b>\$695,526</b>	<b>\$198,300</b>	<b>\$663,780</b>
<b>Program Total:</b>	<b>\$886,196</b>		<b>\$862,080</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$695,526	\$0	\$663,780
<b>Total Revenue</b>	<b>\$0</b>	<b>\$695,526</b>	<b>\$0</b>	<b>\$663,780</b>

Explanation of Revenues

State of Oregon Emergency Housing Assistance (EHA Veterans) - \$72,200  
 City of Portland General Fund - \$591,580

Significant Program Changes

Last Year this program was: FY 2019: 10053J-19 Housing Placement & Retention - Veterans



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10053C, 10053L  
**Program Characteristics:**

**Executive Summary**

The Homeless Family System of Care (HFSC) works collaboratively as a leadership and direct service team to address the unique needs of homeless families in Multnomah County. When combined with program 10053C and 10053L, the Mobile Housing Team (MHT) will maintain its current capacity to provide housing placement, ongoing support and flexible rental assistance to our community’s most vulnerable homeless families. MHT is a collaboration of Multnomah County and nine homeless service providers, a majority of whom are culturally specific agencies.

**Program Summary**

The HFSC assists families experiencing homelessness to make a rapid and sustainable transition back into permanent housing. It is a collaboration of agency leaders and direct service staff that practice shared budgeting, leveraging of resources, shared accountability, case consultation and ongoing process improvement. The system has shared values that include the practice of assertive engagement, using an equity lens to assure racial and social justice and a shared belief that all homeless families should be housed. The majority of agencies in the collaborative are culturally-specific providers. Homeless families access the system through a coordinated entry process that first screens them for immediate safety and then for overall vulnerability. Because many more families are seeking housing assistance than MHT is resourced to provide, families are prioritized based on vulnerability, housing opportunity and provider capacity.

When combined with 10053C and 10053L, MHT currently has capacity to serve 750 families with housing placement/retention services per year using short-medium term flexible rental assistance (0-12 months) and client assistance. Eligible families may be living in shelter, doubled up, experiencing domestic violence, living on the streets, in cars or places not meant for habitation. A broad definition of homelessness allows us to equitably serve families that are most vulnerable in a variety of living situations. 78% of the families served through MHT identified as being from communities of color, achieving the system goal of improving access and outcomes for these communities. This program leverages federal and state funding including a number of HUD grants.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households newly placed or retained in housing	N/A	N/A	N/A	44
Outcome	Percentage of households retaining housing at 12 months post-exit*	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

\*These percentages are based on the retention rate for households who were successfully contacted via follow-up.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$270,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$270,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$270,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10053C-19 Housing Placement & Retention - Homeless Families

When combined with programs 10053C and 10053L, the family system rent assistance is fully funded.

**Department:** Nondepartmental **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 10053C, 10053K  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

The Homeless Family System of Care (HFSC) works collaboratively as a leadership and direct service team to address the unique needs of homeless families in Multnomah County. When combined with program 10053C and 10053K, the Mobile Housing Team (MHT) will maintain its current capacity to provide housing placement, ongoing support and flexible rental assistance to our community's most vulnerable homeless families. MHT is a collaboration of Multnomah County and nine homeless service providers a majority of whom are culturally specific agencies.

### Program Summary

The HFSC assists families experiencing homelessness to make a rapid and sustainable transition back into permanent housing. It is a collaboration of agency leaders and direct service staff that practice shared budgeting, leveraging of resources, shared accountability, case consultation and ongoing process improvement. The system has shared values that include the practice of assertive engagement, using an equity lens to assure racial and social justice and a shared belief that all homeless families should be housed. The majority of agencies in the collaborative are culturally-specific providers. Homeless families access the system through a coordinated entry process that first screens them for immediate safety and then for overall vulnerability. Because many more families are seeking housing assistance than MHT is resourced to provide, families are prioritized based on vulnerability, housing opportunity and provider capacity.

When combined with 10053C and 10053K, MHT currently has capacity to provide 750 families with housing placement/retention services per year using short-medium term flexible rental assistance (0-12 months) and client assistance. Eligible families may be living in shelter, doubled up, experiencing domestic violence, living on the streets, in cars or places not meant for habitation. A broad definition of homelessness allows us to equitably serve families that are most vulnerable in a variety of living situations. 78% of the families served through MHT identified as being from communities of color, achieving the system goal of improving access and outcomes for these communities. This program leverages federal and state funding including a number of HUD grants.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of households newly placed or retained in housing	N/A	N/A	N/A	68
Outcome	Percentage of households retaining housing at 12 months, post-exit*	N/A	N/A	N/A	80%

### Performance Measures Descriptions

\*This percentage is based on the percentage of households who were confirmed to be successfully housed at 12 months.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$420,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$420,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$420,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10053C-19 Housing Placement & Retention - Homeless Families

This program was funded with one-time-only funding in FY 2019. When combined with programs 10053C and 10053K, the family system rent assistance is fully funded.

**Department:** Nondepartmental **Program Contact:** Marc Jolin

**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized a range of highly effective housing placement and retention strategies in order to significantly reduce homelessness among vulnerable adult households and respond to increases in homeless women. This program supports existing programming to house and retain hundreds of men and women experiencing homelessness through limited duration rental assistance, mobile housing placement and retention support staffing, as well as culturally-specific services.

### Program Summary

The Gresham Community Volunteer Corp. engages individuals, who are transitioning from homelessness and addiction, in volunteer opportunities. The program works to build marketable skills for those individuals experiencing homelessness, while also providing avenues for participants to engage with the community. Over a three-month period, participants volunteer for 60 hours of mentored work experiences, learning new skills, improving work habits and preparing themselves for permanent employment.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of individuals served	N/A	50	92	80
Outcome	Total hours participants are engaged in volunteer opportunities in the community	N/A	800	830	1,000

### Performance Measures Descriptions

The number of individuals served is increasing due to people participating in the Project Reset, a fine forgiveness program. The Volunteer Corp. is working to increase community volunteering opportunities specifically opportunities for communities of color. The volunteer hours are expected to increase commensurately.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$50,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10053A-19 Housing Placement & Retention - Adults Only Households

This program was funded with one-time-only funding in FY 2019.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized supportive housing programs to meet the needs of adults and families experiencing homelessness who are in recovery or who have significant disabilities. This program continues highly effective limited duration housing with intensive attached services, as well as permanently affordable rent assistance and longer-term wrap around support services that will lead to more people assisted in moving into and retaining permanent housing. These housing strategies are nationally recognized best practices, and leverage other state, local and federal resources.

### Program Summary

The City of Portland and Multnomah County have adopted a plan to create 2,000 units of supportive housing by 2027, and the Executive Committee of A Home for Everyone (AHFE) has adopted complimentary recommendations to significantly reduce: (a) unmet need for permanent housing, especially among people experiencing chronic homelessness, (b) the over-representation of people of color among the homeless population, and (c) unsheltered homelessness among women, Veterans and people with severe and persistent mental illness. Among AHFE priority populations are adults in the early stages of recovery from an alcohol or drug addiction and other adults with significant disabilities. This program offer continues and expands supportive housing in alignment with these priorities.

Supportive housing is for those who would not be successful in their housing without additional supportive services, and for whom services would be less effective without stable housing. Permanent supportive housing serves those with long-term disabilities, including chronic health conditions, mental illness and addictions, who usually have long-term or cyclical homelessness in their background. Transitional supportive housing serves those who require a level of intensives services, but not necessarily permanently and are at high risk of becoming chronically homeless.

This program supports a range of supportive housing for highly vulnerable disabled adults and families. Offering a combination of deeply affordable housing and appropriate ongoing support services has proven locally and nationally to be the most effective and cost effective way to end the homelessness of this population. In some cases, funding is used to provide only the support services because rent assistance is provided through federal grant sources. In other cases, funding supports long-term support services commitments coupled to deeply affordable housing units financed with Portland Housing Bond or other affordable housing development capital resources managed through the Portland Housing Bureau. In other cases, funds support primarily the long term rental subsidy needs of program participants, and support services are leveraged through other systems, such as the health care system. Finally, there are programs where local funds provide both the rental assistance and the bulk of the support services because of the unique needs of the subpopulation served by the program and/or the absence of other sources of support.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of people newly placed into or retained in permanent housing	1,562	1,310*	1,400	1,400
Outcome	Percentage of households retaining housing at 6 months post-exit	86%	90%	85%	85%
Output	Number of people served in transitional housing	289	280	280	280

### Performance Measures Descriptions

\*Reduced from 1,590 (the original purchased number for FY19) because that number included transitional housing, which is now its own measure.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$0	\$0	\$0	\$117,310
Contractual Services	\$1,347,840	\$6,336,370	\$1,471,540	\$6,096,630
<b>Total GF/non-GF</b>	<b>\$1,347,840</b>	<b>\$6,336,370</b>	<b>\$1,471,540</b>	<b>\$6,213,940</b>
<b>Program Total:</b>	<b>\$7,684,210</b>		<b>\$7,685,480</b>	
<b>Program FTE</b>	0.00	0.00	0.00	1.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$6,336,370	\$0	\$6,213,940
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,336,370</b>	<b>\$0</b>	<b>\$6,213,940</b>

**Explanation of Revenues**

City of Portland General Fund - \$6,213,940

**Significant Program Changes**

**Last Year this program was:** FY 2019: 10054A-19 Supportive Housing

The Coordinated Housing Assessment Team (CHAT) is proposed to be reduced as part of the City of Portland's General Fund reductions. CHAT is tasked with reaching out to and engaging chronically homeless people, who often do not physically show up at other partner agencies and are not already engaged in services, in order to assess them for permanent supportive housing and other services, see program 10059. In FY 2019 Supportive Housing Program Offers were split out for new investments. In FY 2020, Supportive Housing for Chronically Homeless #10054E was consolidated into the Supportive Housing 10054A Program Offer.



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized a range of supported housing programs to meet the needs of hundreds of adults experiencing homelessness who are disabled by mental illness or medical conditions including HIV/AIDS. This offer continues highly effective permanently affordable rent assistance and longer-term wrap around support services that will assist people to access or retain permanent housing. These supportive housing strategies are nationally recognized best practices, and local funds are coordinated through AHFE to highly leverage other state, local and federal resources.

### Program Summary

On any given night, there are nearly 1,300 individuals who have been homeless for more than a year and are living with one or more severe disabilities. These individuals are considered chronically homeless. This program provides continued support for permanent supportive housing (PSH) for adults who are disabled by a variety of medical/mental health conditions, including HIV/AIDS. The program continues a range of housing placement and retention strategies developed and coordinated through A Home for Everyone, each specifically targeted to meet the needs of chronically homeless individuals. These targeted investments highly leverage other federal, state and local resources including the U.S. Department of Housing and Urban Development's Housing Opportunities for Persons with AIDS (HOPWA) and Continuum of Care (CoC) programs, Medicaid, affordable housing units and permanent rental subsidies to support the needs of vulnerable adults experiencing homelessness to secure and retain permanent housing.

Permanent Supportive Housing (PSH) programs are our community's most effective response to chronic homelessness. Offering a combination of permanently affordable housing and ongoing support services has proven locally and nationally to be the most effective and cost effective strategy. This program offer supports a range of PSH programs for highly vulnerable adult households disabled by mental illness and/or or serious health conditions, including HIV/AIDS. In some cases, funding is used only to provide match for a HUD CoC or HOPWA grant. In other cases, funds support primarily the long term rental subsidy needs of program participants, and support services are leveraged through other systems.

Services are delivered by skilled nonprofit partners that provide housing, intensive case management and support services for chronically homeless adults who have a combination of diagnoses including chemical dependency, mental illness, cognitive and/or physical disabilities, and/or chronic medical conditions. Other specific activities include, intensive street engagement staffing working in collaboration with Portland Police Bureau Neighborhood Response Team officers to provide housing placement and retention for people with mental illnesses; mental health street outreach coupled with flexible housing placement and permanent rental assistance subsidies; supportive service staffing to support facility-based permanent supportive housing for people with mental illnesses; facility- and tenant-based supportive housing rental assistance and staffing for those who are exiting the Unity Center or for people living with HIV/AIDS.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of people newly placed into or retained in permanent housing	736	650*	900	800
Outcome	Percentage of households retaining housing at 6 months post-exit	78%	80%	77%	80%

### Performance Measures Descriptions

\*The purchased number for prior years included transitional housing. Measures now include only people placed or retained in permanent housing.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$50,000	\$4,714,821	\$82,000	\$4,696,815
Internal Services	\$0	\$207,804	\$0	\$210,000
<b>Total GF/non-GF</b>	<b>\$50,000</b>	<b>\$4,922,625</b>	<b>\$82,000</b>	<b>\$4,906,815</b>
<b>Program Total:</b>	<b>\$4,972,625</b>		<b>\$4,988,815</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,922,625	\$0	\$4,156,815
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,922,625</b>	<b>\$0</b>	<b>\$4,156,815</b>

Explanation of Revenues

City of Portland General Fund - \$2,602,840  
 Federal Housing for Persons Living with AIDS (HOPWA) - \$187,000  
 City of Portland Housing Bureau HOPWA - \$1,366,975  
 Multnomah County Supportive Housing Fund - \$750,000

Significant Program Changes

**Last Year this program was:** FY 2019: 10054B-19 Supportive Housing - Mental Health/Medical Supportive Housing  
 \$750,000 of County General Fund is budgeted in the Supportive Housing Fund (1521). Although shown in the program as "Other Funds" this funding is from County discretionary resources.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

A Home for Everyone (AHFE) has prioritized supported housing programs to meet the needs of homeless adults who are in recovery or have significant disabilities. This program continues the local long-term voucher program that is narrowly tailored to households with fixed incomes, to improve housing stability and reduce rent burden, including many households who reside in tax credit or other regulated affordable housing.

### Program Summary

Rents in some tax credit or other regulated affordable housing exceed what people on long-term disability or with other very low incomes are able to afford. This program supports a local investment in a long-term rent subsidy pilot that complements the federally-funded Housing Choice Voucher program and our local Short Term Rent Assistance (STRA) program. The program leverages support from Meyer Memorial Trust. The local long-term voucher functions more flexibly than the federal voucher program, and provides increasingly necessary ongoing rental assistance to people whose limited income otherwise excludes them entirely from the rental market.

This project is testing the long-term local voucher concept by using it in a very specific circumstance – assisting people who are seniors or living with disabilities with limited fixed incomes and significant rent burdens (typically receiving income of less than \$800 per month, and prior to subsidy pay more than 70% of that income to rent) to afford the rents in Low Income Housing Tax Credit (LIHTC) units. Those units have rents that are restricted but they are not tied to tenant income, so they are increasingly out of reach for the target group in this pilot project. Some assisted households also reside in moderately-priced private market units. The funds make it possible for people in the target population to afford the rent (at 30% of their income). In doing so, this program would leverage the income that the target group is deriving from their federal benefits and the inventory of publicly funded affordable housing.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Provide vouchers for SSI households seeking rent-restricted affordable housing units.	NA	45	50	55
Outcome	Percent of households who remain housed 12 months after entry*	NA	NA	NA	90%

### Performance Measures Descriptions

\*Pilot program in FY 2019; outcome measures not yet available.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$362,260	\$0	\$376,760	\$138,240
<b>Total GF/non-GF</b>	<b>\$362,260</b>	<b>\$0</b>	<b>\$376,760</b>	<b>\$138,240</b>
<b>Program Total:</b>	<b>\$362,260</b>		<b>\$515,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$138,240
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$138,240</b>

Explanation of Revenues

City of Portland General Fund - \$138,240

Significant Program Changes

Last Year this program was: FY 2019: 10054C-19 Supportive Housing - Local Long Term Rental Vouchers

The voucher program was increased by 10 vouchers.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone (AHFE) has prioritized supportive housing programs to meet the needs of families with long-term experiences of homelessness and at least one family member who has a significant disability. This program creates longer-term rent assistance and wrap around support services to help move families from family shelters into permanent housing. Supportive housing strategies are nationally recognized best practices and can leverage existing market-rate and new affordable housing.

**Program Summary**

The Executive Committee of A Home for Everyone (AHFE) adopted a set of recommendations to significantly reduce: (a) unmet need for permanent housing, (b) the over-representation of people of color among the homeless population, and (c) unsheltered homelessness among women, Veterans and people with severe and persistent mental illness. Within AHFE priority populations are families with long-term experiences of homelessness and at least one family member who has a significant disability.

Between 2015 and 2017, the number of people in chronically homeless families in emergency shelter increased by more than 30%. Other families experiencing homelessness also face multiple barriers to housing and will require long-term assistance to gain and retain housing. These families are disproportionately families of color, are among some of the hardest to house, and are the longest-term stayers in our family shelters. This program expands supportive housing resources to serve these families, offering them access to permanent housing while freeing up scarce and expensive shelter capacity for other families.

Offering a combination of longer-term rental support and appropriate ongoing support services has proven to be an effective and cost effective to end homelessness. This program will expand supportive housing programming for highly vulnerable, long-term shelter families with children by providing rental assistance vouchers and wrap-around services. While not a permanent rental subsidy, the 24 month subsidy is long enough to leverage existing market-rate and newly developed or acquired affordable housing and to use progressive engagement strategies to either transition families off of subsidies altogether or, if needed, on to a more permanent subsidy program.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of people in families placed into or retained in permanent housing	N/A	25	30	30
Outcome	Percentage of households retaining housing at 6 months post-exit	N/A	90%	90%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$600,000	\$0	\$624,000	\$0
<b>Total GF/non-GF</b>	<b>\$600,000</b>	<b>\$0</b>	<b>\$624,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$600,000</b>		<b>\$624,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10054D-19 Supportive Housing - Families

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone has identified diversion as a critical strategy to reduce the number of people experiencing street and shelter homelessness in our community. This program continues existing capacity to divert people from homelessness through partnerships with the domestic violence system, the family system, the corrections and healthcare systems, as well as 211info. Together these investments will divert hundreds of men, women and children from street and shelter homelessness.

**Program Summary**

Diversion programs vary by implementation, but have in common the assessment of an individual who is facing living on the streets or in shelter to determine whether they have a housing option they could access with a modest, typically one-time, investment. Diversion is recognized nationally and locally as a critical tool in reducing street and shelter homelessness.

- Family Diversion has been a successful intervention for both preventing families from coming to emergency shelter and moving families out of shelter quickly. All families are surveyed to determine if they have an immediate housing option and, if so, diversion resources are used to help them capitalize on that opportunity.
- Corrections Diversion resources are directed to people leaving incarceration through a partnership with DCJ that offers access to employment, treatment, and housing assistance resources to ensure that they do not become homeless.
- DV Diversion services focus on preventing homelessness and diverting domestic violence survivors and their children from shelters through eviction prevention or housing placement. Diversion services offer flexible, rapid responses that allows survivors to avoid the trauma and safety risks of becoming homeless. These services reach hundreds of survivors annually and serve a diverse population, with 75% identifying as people of color.
- Hospital Diversion partners with the hospital system to provide essential rental assistance and care coordination resources to hospital discharge workers to allow patients to discharge to housing options and not to the streets or shelter.
- Transportation Program diverts individuals from the streets and shelter through one-time transportation assistance to a location where they have a verified housing option. Most commonly this program reunites individuals with family in other communities.
- Benefit Assistance serves homeless and formerly homeless individuals with assistance in securing Supplemental Security Income (SSI), Social Security Disability Income (SSDI), and/or Medicaid and Medicare benefits. A team of disability specialists, and a workflow system with federal and local benefits agencies, streamline and expedite the application process. When individuals are awarded benefits, not only do they have income which helps them pay for housing, they are awarded Medicaid which brings a tremendous amount of resources to the community.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of participants receiving diversion services	2,303	1,830	1,800	1,800
Outcome	% of exits to permanent housing	89%	95%	95%	95%
Output	Number of DV survivors diverted from homelessness	534	500	500	500

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$1,027,710	\$1,466,815	\$1,504,903	\$1,525,500
<b>Total GF/non-GF</b>	<b>\$1,027,710</b>	<b>\$1,466,815</b>	<b>\$1,504,903</b>	<b>\$1,525,500</b>
<b>Program Total:</b>	<b>\$2,494,525</b>		<b>\$3,030,403</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,466,815	\$0	\$1,525,500
Beginning Working Capital	\$370,000	\$0	\$384,800	\$0
<b>Total Revenue</b>	<b>\$370,000</b>	<b>\$1,466,815</b>	<b>\$384,800</b>	<b>\$1,525,500</b>

**Explanation of Revenues**

City of Portland General Fund - \$1,525,500  
 Multnomah County Tax Title Fund - \$384,800

**Significant Program Changes**

**Last Year this program was:** FY 2019: 10055A-19 Diversion Services

This program combines FY 2019 programs 10055A and 10055B. Additionally, \$436,000 for the Benefits Acquisition Program previously funded in DCHS (program 25115) is being combined with this program to consolidate the work and reduce administrative burdens for both the provider and the County.



**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10029A  
**Program Characteristics:**

### Executive Summary

A Home for Everyone partners have prioritized alignment of employment and housing resources to help people who are experiencing or at-risk of homelessness achieve long-term economic and housing stability. This highly effective program connects employment and housing resources for homeless families, youth and communities of color.

### Program Summary

Following recommendations of the A Home For Everyone (AHFE) Workforce & Economic Opportunity Workgroup, this program sustains critical capacity in several targeted employment and housing initiatives, with an emphasis on meeting the needs of families, youth, and communities of color. All programs assist households experiencing homelessness or housing instability by offering a combination of housing assistance and access to a range of workforce supports, provided in a culturally specific or culturally responsive manner. Together, these programs will provide approximately 400 individuals with employment services and 100 households with rent assistance or eviction prevention supports. 75% of the participants served with employment and housing supports will be from communities of color. Programs include:

- Family Employment Services provide capacity to an existing network of six nonprofit employment providers, to connect families to career track employment services, housing resources and community-based support, and to the Employment Opportunity Program (EOP). Participants who are survivors of domestic violence and/or who are eligible for Supplemental Nutrition Assistance Program (SNAP) are prioritized.
- Youth Employment Services expand capacity provided by Homeless Youth Continuum partners to improve employment and housing alignment through pre-readiness support, job training, day labor opportunities and work experiences/internships.
- Equitable Access to Employment, implemented by a culturally-specific provider, supports individuals and families seeking employment and experiencing homelessness to secure employment services.
- Adult Employment Services and Rent Assistance provides capacity through the EOP, and its multiple culturally-specific providers, to offer employment and housing support for adults, including adults in couples or parents with adult children, rent assistance for housing placement, and career coaching and expanded one-stop employment services and resources to serve young adults of color, many of whom are exiting the corrections system.

### Performance Measures

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Individuals receiving employment services and supports*	435	320	400	400
Outcome	Number of employment placements	161*	185	185	185
Outcome	Number of households receiving rent assistance or eviction prevention	83	110	100	100

### Performance Measures Descriptions

\*FY18 was the first full year of funding; original outcomes were baseline targets that are being evaluated as the program evolves.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$100,000	\$1,418,630	\$0	\$1,340,260
<b>Total GF/non-GF</b>	<b>\$100,000</b>	<b>\$1,418,630</b>	<b>\$0</b>	<b>\$1,340,260</b>
<b>Program Total:</b>	<b>\$1,518,630</b>		<b>\$1,340,260</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$889,480	\$0	\$925,100
<b>Total Revenue</b>	<b>\$0</b>	<b>\$889,480</b>	<b>\$0</b>	<b>\$925,100</b>

Explanation of Revenues

City of Portland General Fund - \$925,100  
 Multnomah County Video Lottery Fund - \$415,160

Significant Program Changes

Last Year this program was: FY 2019: 10056A-19 Employment Programs

\$165,180 that funded employment services for youth is being funded through a partnership with the Youth Opportunities and Workforce Development (program 10029A).

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

A Home for Everyone partners have prioritized alignment of employment and housing resources to help people experiencing/at-risk of homelessness achieve long-term housing stability. This provides additional resources to connect employment and housing resources for families, youth, and communities of color. It also help maximize the benefits of employment and housing assistance by ensuring they are appropriately integrated.

**Program Summary**

Following recommendations of the A Home for Everyone (AHFE) Economic Opportunity Workgroup, this program assists households experiencing homelessness or housing instability by combining housing assistance and access to a range of workforce supports, provided in a culturally-specific or culturally-responsive manner. This program offer represents an expansion of rent assistance funding for 50 participants through the Employment Opportunity Program (EOP), that has demonstrated to be a highly effective system's alignment of housing and employment supports.

Employment Services and Rent Assistance provides capacity through the EOP, and its multiple culturally-specific providers, to offer employment and housing support for adults, including adults in couples or parents with adult children, rent assistance for housing placement, eviction prevention, and career coaching; expanded one-stop employment services at an employment express center and dedicated rental assistance funding to serve young adults of color, many of whom are exiting the corrections system.

EOP partners have seen that participants who are homeless or struggling to maintain their housing face many challenges engaging in employment services, and often leave the program without completing their career goals. A recent report commissioned by Meyer Memorial Trust showed that 67% of participants who received rent assistance supports were more likely to obtain career track employment and increased their income at double the rate of those without housing assistance. Housing supports give participants the stability they need to focus on and commit to their career goals, leading to higher wages at program exit and allow them to meet the ever-rising cost of housing in our region.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Individuals receiving housing supports (rent assistance or eviction prevention)	43	55	50	50
Outcome	Individuals remaining in stable housing at 6 months	100%	80%	80%	80%
Outcome	Individuals remaining in stable housing at 12 months	100%	70%	70%	70%

**Performance Measures Descriptions**

\*Majority of the individuals served with housing assistance were provided with eviction prevention assistance.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Contractual Services	\$0	\$0	\$100,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10056B-19 Employment Programs - Expanded Housing Assistance

This program was funded with one-time-only funding in FY 2019.

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:** 10052D, 10052I, 10053C, 10055A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Tax Title Affordable Housing program includes funds for the provision of housing options that are affordable to youth and families with children with 30 percent or lower median family income.

**Program Summary**

Effective January 1, 2016, ORS 275.275 was amended to direct the distribution of proceeds from sales of real property acquired by foreclosure of a delinquent tax lien, net of approved expenses. All net proceeds will be credited to the General Fund for the following purposes: Funds for housing placement and retention support services for youth and families with children; Flexible rental assistance to place youth and families with children into housing; or Funds to develop new low income housing that is affordable to youth and families with children with 30 percent or lower median family income.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output					
Outcome					

**Performance Measures Descriptions**

## Legal / Contractual Obligation

HB 2195, approved by the Oregon Legislature in 2015, amends ORS 275.275, and is effective January 1, 2016. That statute defines the expenses to be paid from proceeds of sales of real property acquired by foreclosure of a delinquent tax lien or by exchange for land originally acquired by foreclosure of delinquent tax liens; and the purposes for which the net proceeds must be used.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Contractual Services	\$3,805,000	\$0	\$2,602,200	\$0
<b>Total GF/non-GF</b>	<b>\$3,805,000</b>	<b>\$0</b>	<b>\$2,602,200</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,805,000</b>		<b>\$2,602,200</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Beginning Working Capital	\$3,805,000	\$0	\$2,602,200	\$0
<b>Total Revenue</b>	<b>\$3,805,000</b>	<b>\$0</b>	<b>\$2,602,200</b>	<b>\$0</b>

## Explanation of Revenues

This program includes \$2.6 million of carryover from FY 2019.

## Significant Program Changes

Last Year this program was: FY 2019: 10057-19 Tax Title Affordable Housing

**Department:** Nondepartmental      **Program Contact:** Marc Jolin  
**Program Offer Type:** Innovative/New Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program offer will provide the needed capital for the JOHS to move forward in developing high quality, year-round shelter capacity for multiple populations in improved facilities, as well as funding to support the establishment of additional temporary/seasonal shelters in the coming fiscal year. These resources will complement funds for shelter capital provided by the City of Portland.

**Program Summary**

Both the City and County are committed to funding and operating long term, high quality, year-round emergency shelters, and to continue providing seasonal temporary shelter during cold weather months. Prior to the formation of the Joint Office, the City and County were faced with an unprecedented housing and homelessness crisis. The Joint Office is guided by the shared values and the common agenda of A Home for Everyone (AHFE). In order to have a lasting impact on the homelessness crisis, a three-pronged, balanced approach was created that included prevention, shelter expansion, as well as housing placement and retention.

Initially, shelter space was sought that could be used immediately to provide safety off the streets for our most vulnerable community members. At the time, it was understood that some of the space would be shorter term, using temporarily vacant space offered by local business owners or in City or County-owned buildings, like the Hansen Building. While there is still a role for temporary seasonal shelter, we are actively working to transition all year-round shelter to higher quality facilities.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output					
Outcome					

**Performance Measures Descriptions**

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Capital Outlay	\$5,000,000	\$1,250,000	\$3,500,000	\$0
<b>Total GF/non-GF</b>	<b>\$5,000,000</b>	<b>\$1,250,000</b>	<b>\$3,500,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$6,250,000</b>		<b>\$3,500,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,250,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,250,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2019: 10058-19 Emergency Shelter Strategic Investment

These funds are being carried over from FY 2019 because the construction projects will not be completed. Due to this timing, this amendment is necessary to re-appropriate the funding in FY 2020 in order to complete the Foster Shelter project. There is no new funding in this program.



**Department:** Overall County

**Program Contact:** Mike Jaspin

**Program Offer Type:** Revenue/Fund Level/Tech

**Program Offer Stage:** As Adopted

**Related Programs:**
**Program Characteristics:**
**Executive Summary**

This program offer budgets a number of "fund level" transactions. These include transfers between funds, fund contingencies, and reserves.

**Program Summary**

This offer includes the following cash transfers:

General Fund to PERS Bond Sinking Fund - \$8,325,664  
 General Fund to IT Capital Fund - \$1,000,000  
 General Fund to IT Capital Fund - \$1,000,000  
 General Fund to Facilities Fund -\$135,000  
 General Fund to Facilities Fund - \$50,000  
 Library Fund to PERS Bond Sinking Fund - \$1,729,162  
 Animal Control Fund to General Fund - \$2,007,300  
 Willamette River Bridge Fund to Burnside Bridge Fund - \$508,779  
 Facilities Management Fund to Capital Improvement Fund - \$313,973  
 Facilities Management Fund to Asset Preservation Fund - \$193,838

A full list of cash transfers in the County's budget can be found in the Summaries section of Volume 1 of the Budget.

This offer accounts for the General Fund contingency, which is established at \$1.5 million. The General Fund contingency also contains \$9.7 million for a Business Income Tax reserve set at 10% of anticipated revenues.

This offer accounts for the 10% General Fund revenue reserve as described in the Financial & Budget Policies. The Risk Fund contingency (\$10.7 million) and unappropriated balance are recorded here.

Video Lottery Fund resources of \$5.2 million and contingency of \$525,311 are recorded in this offer, while expenditures are reported in departmental program offers where they are spent.

Supportive Housing Funds of \$0.75 million are budgeted in contingency pending spending plans.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	% of reserve goal met	100%	100%	100%	100%
Outcome	Moody's Bond Rating	0	0	0	0
Outcome	S&P Global Ratings	1	0	0	0

**Performance Measures Descriptions**

Change in bond rating: (0) = no change, (1) = upgraded rating, (-1) = downgraded rating. On November 17, 2017, S&P upgraded the County's rating from AA+ to AAA. Moody's currently rates the County debt as Aaa.

## Legal / Contractual Obligation

Reserve and contingency accounts reflect prudent financial management of county resources. The reserve has been established at 10% - a level that Moody's Investors Service uses as a benchmark. The goal in developing the reserve policy was to shield the County from fluctuations in revenues available to fund ongoing programs. The policy articulates the conditions under which reserves will be used and outlines a process for replenishing them should they fall below the goal. The General Fund contingency cannot be accessed unless the Board takes affirmative action to transfer it. Conditions under which the the contingency can be used are limited, in most cases, to one-time-only expenditures.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Cash Transfers	\$22,610,152	\$4,525,000	\$10,510,664	\$1,729,162
Unappropriated & Contingency	\$54,028,178	\$65,755,459	\$92,218,936	\$72,287,729
<b>Total GF/non-GF</b>	<b>\$76,638,330</b>	<b>\$70,280,459</b>	<b>\$102,729,600</b>	<b>\$74,016,891</b>
<b>Program Total:</b>	<b>\$146,918,789</b>		<b>\$176,746,491</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$5,125,000	\$0	\$6,982,287
Other / Miscellaneous	\$150,000	\$1,025,000	\$0	\$0
Financing Sources	\$0	\$5,000,000	\$150,000	\$3,000,000
Interest	\$0	\$992,959	\$0	\$1,574,200
Beginning Working Capital	\$250,000	\$60,229,483	\$150,000	\$72,714,527
<b>Total Revenue</b>	<b>\$400,000</b>	<b>\$72,372,442</b>	<b>\$300,000</b>	<b>\$84,271,014</b>

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2019: 95000-19 Fund Level Transactions

No significant changes.



**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Unappropriated & Contingency	\$1,600,108	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$1,600,108</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,600,108</b>		<b>\$0</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$7,082,354	\$0	\$7,322,058	\$750,000
Taxes	\$420,195,483	\$0	\$440,960,208	\$0
Other / Miscellaneous	\$6,653,516	\$0	\$6,979,585	\$0
Interest	\$1,517,310	\$0	\$3,500,000	\$0
Beginning Working Capital	\$76,184,097	\$0	\$102,327,596	\$0
<b>Total Revenue</b>	<b>\$511,632,760</b>	<b>\$0</b>	<b>\$561,089,447</b>	<b>\$750,000</b>

**Explanation of Revenues**

A handful of revenues make up the bulk of the General Fund. These include (in order of size) - property tax, business income taxes, and motor vehicle rental taxes. The property tax is the single largest revenue in the General Fund at approximately two-thirds of ongoing revenue. It is governed by state statute and its' growth is limited by two constitutional measures which have been approved by the Oregon electorate. An explanation of the limitations imposed by Measure 5 and Measure 47/50 can be found in the Summaries section of Volume 1 of the budget document.

A more complete discussion of the forecast and assumptions can be found on the Budget Office website.

**Significant Program Changes**

Last Year this program was: FY 2019: 95001-19 General Fund Revenues