



Public Health Division FY 2023 Proposed Budget

Presented to the
Board of County Commissioners

Multnomah County
June 2, 2022

Located at: www.multco.us/budget

Agenda

- Introduction
- Budget Overview - Approach & Equity
- Budget Overview - Public Health Division
- Service Trends
- New, One-Time-Only, & Backfill General Fund Reallocations
- State/Federal Impacts or Other Policy Issues
- COVID-19 and American Rescue Plan Programs
- FY 2022 Update and FY 2023 Budget
- Questions



Today's Public Health Division



Who We Are

We promote and protect health and prevent disease for the residents and diverse communities in Multnomah County.



Communicable Disease Services (CD) prevents the spread of communicable diseases through outreach, education, and direct health services via the HIV/STD Clinic and community health workers. Some of these services include harm reduction and those provided by Ryan White funding.

Parent, Child, and Family Health (PCFH) programs promote family bonding and parent-child attachment, improved pregnancy and birth outcomes, and the adoption of healthy behaviors during pregnancy and early life.

Prevention and Health Promotion (PHP) uses upstream interventions (communications, programs/initiatives, and policy, system and environmental change strategies), public health science and best practices to address the most pressing community health issues.

Environmental Health Services (EH) programs analyze the environmental and social conditions that come together to impact health, inspect facilities and address disease vectors that negatively impact health.

Community Epidemiology Services works to contain spread of disease through case investigations (identifying close contacts, quarantining) and analyze and interpret data. Program Design and Evaluation Services (PDES) support evaluation work.

Community Partnerships & Capacity Building was created to meet the functional capability “community partnerships” and brings together community health workers, and BIPOC organizations and coalitions. It is intended to build trust and deep connections with community partners.



Public Health Budget Priorities

During these unprecedented times as we fight two pandemics – systemic racism and COVID-19 – we reassert our Division focus areas:

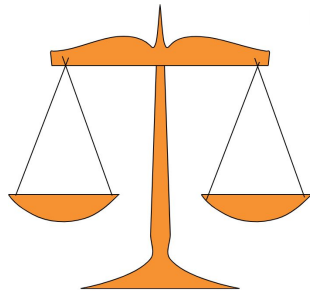
- *Racial equity, supporting cultural strengths and community resilience*
- *Addressing the leading causes of death, disability, years of life lost, with a focus on chronic disease prevention*
- *The unique governmental public health role before, during, and after a pandemic*
- *Policies, strategies, and programs that improve population health and quality of life*



Budget Approach and Applying an Equity Lens

Our Public Health Division Values that guide our budget decision-making include the following:

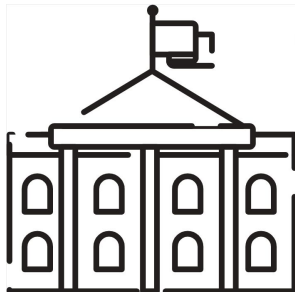
Health Equity and Racial Justice



Community and Place Based Policy



Unique Governmental Public Health Role



Community Partnership

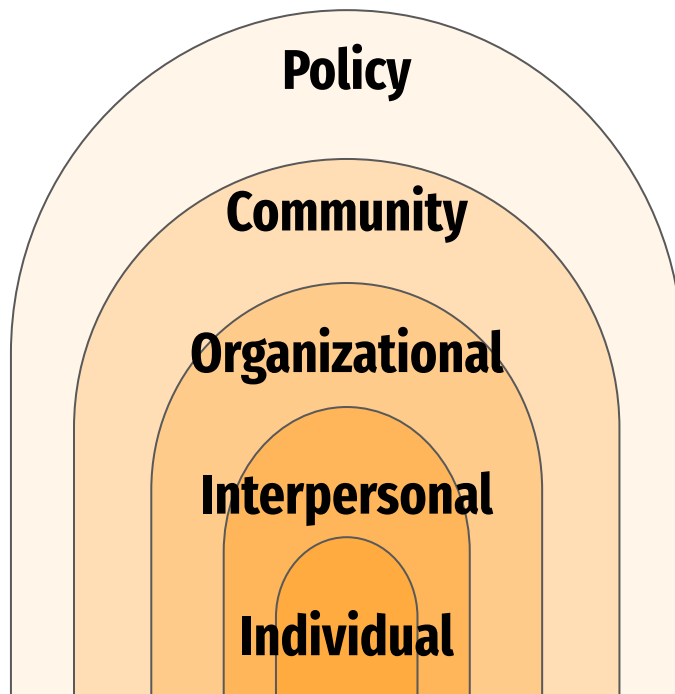


Budget Approach and Applying an Equity Lens

“Injustice anywhere is a threat to justice everywhere.”

- Rev. Dr. Martin Luther King, Jr.

- Social Ecological Model:



- Targeted Universalism:



Image Sources: Elmina B. Sewall Foundation and Saskatoon Health Region Advancing Health Equity



State/Federal Impacts or Other Policy Issues

HB 4052

Recognizes *racism as a public health crisis*

- Directs the Oregon Health Authority to fund culturally and linguistically specific programs to address health inequities for BIPOC communities

Other policy issues

- Long-term funding for core Public Health (PH) functions: ARPA and one-time funds help, but are not the fix.
- Long-term parity for community-based funding: CBOs are key to everyday and emergency PH work.
- Long-term support for local, state and federal change to policies, systems and environments that underpin health outcomes: Chronic disease prevention, environmental determinants and equity work is foundational.
- Continued support for Public Health Modernization.



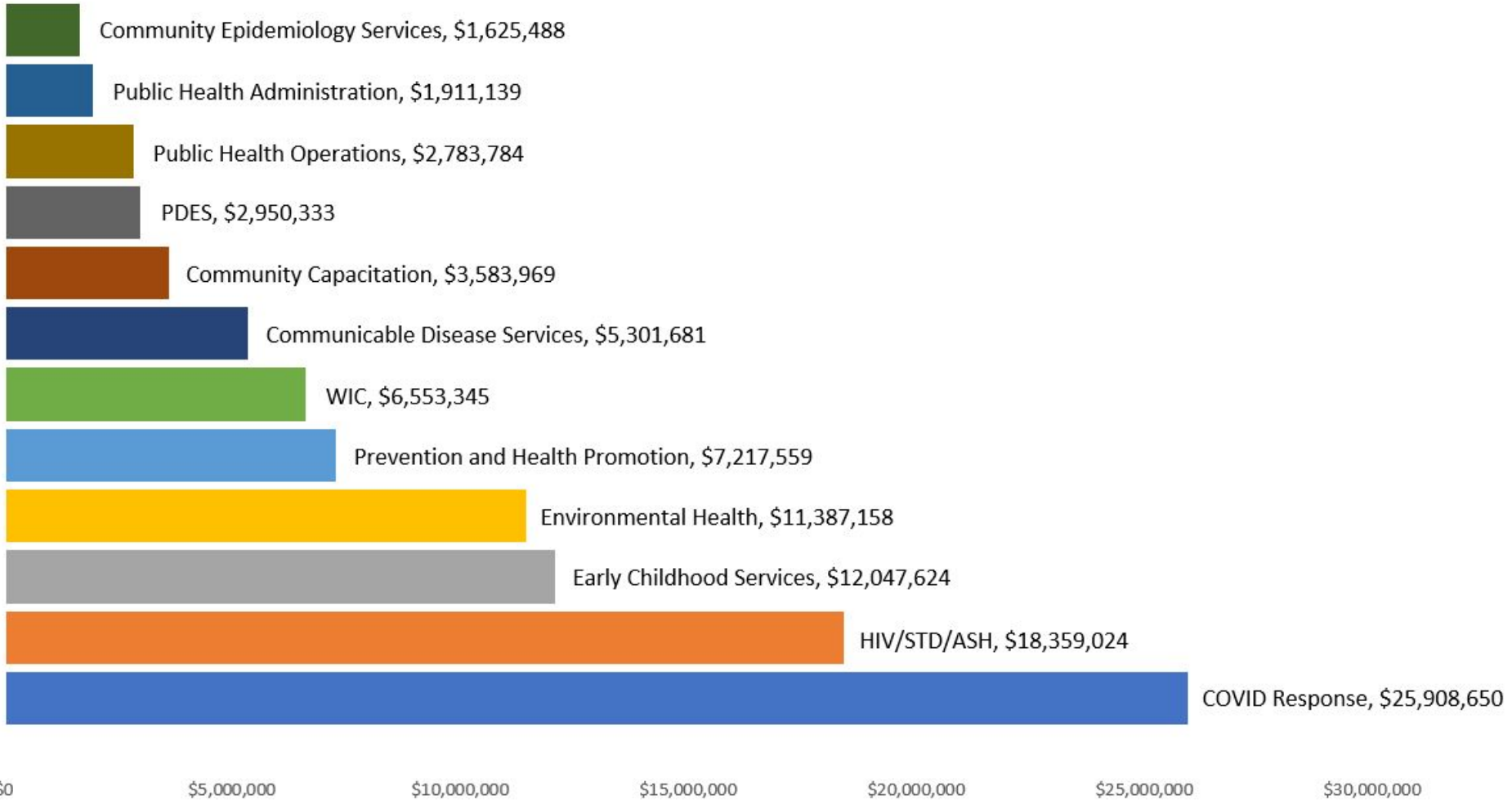
Public Health Advisory Board (MCPHAB)



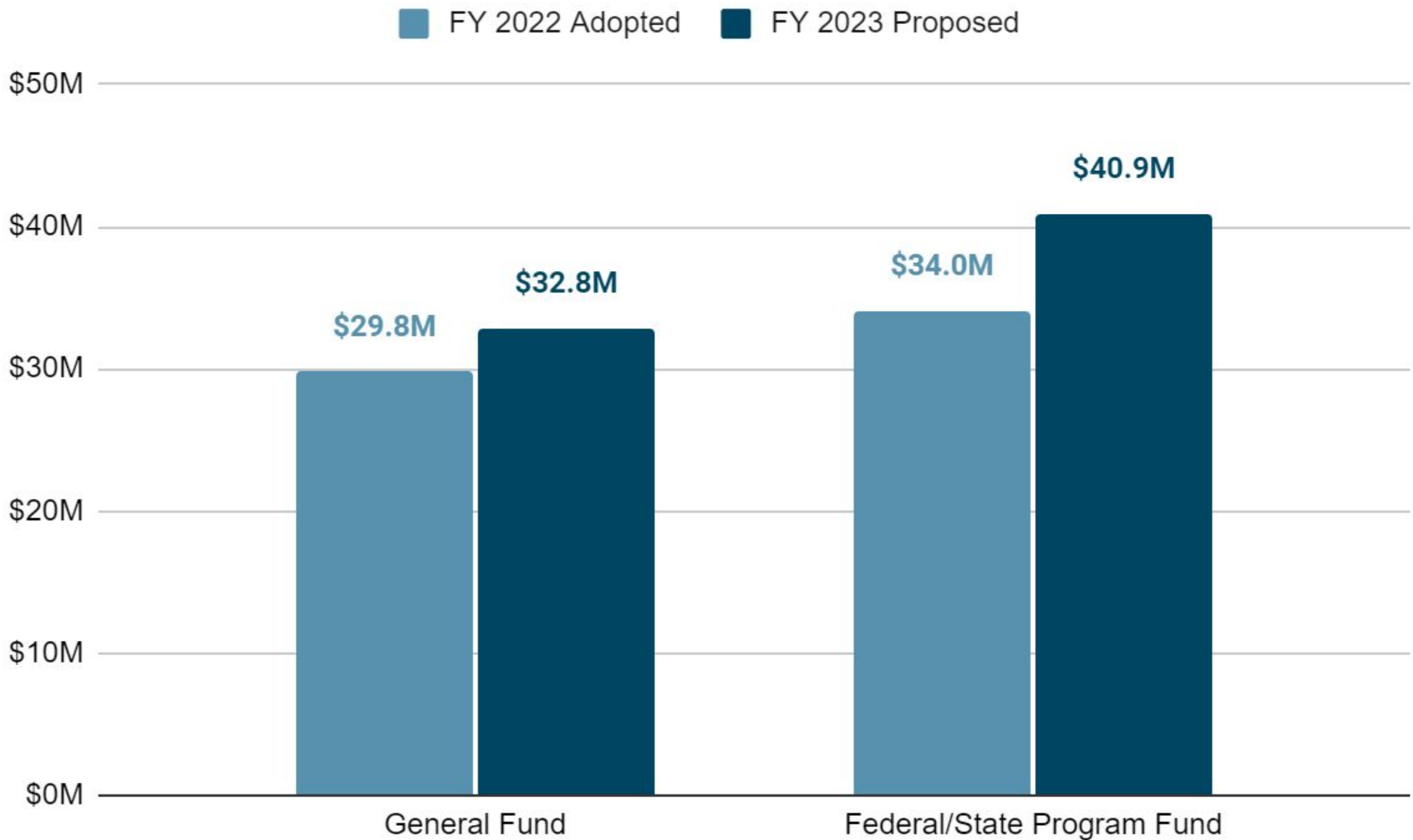
MCPHAB 2019



Public Health Division Budget by Program Area

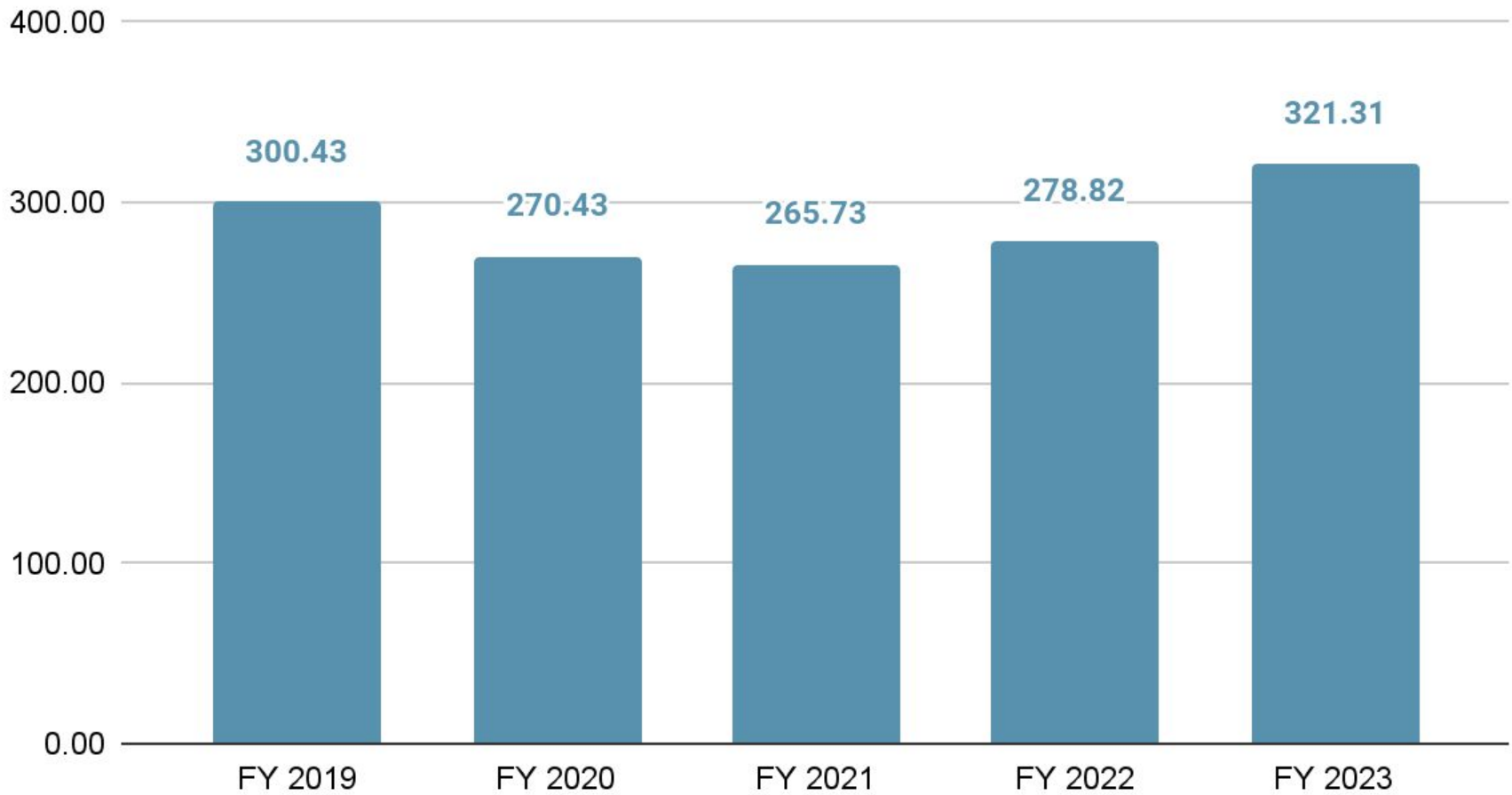


Budget by Fund - \$73,721,104 (Expenditures)

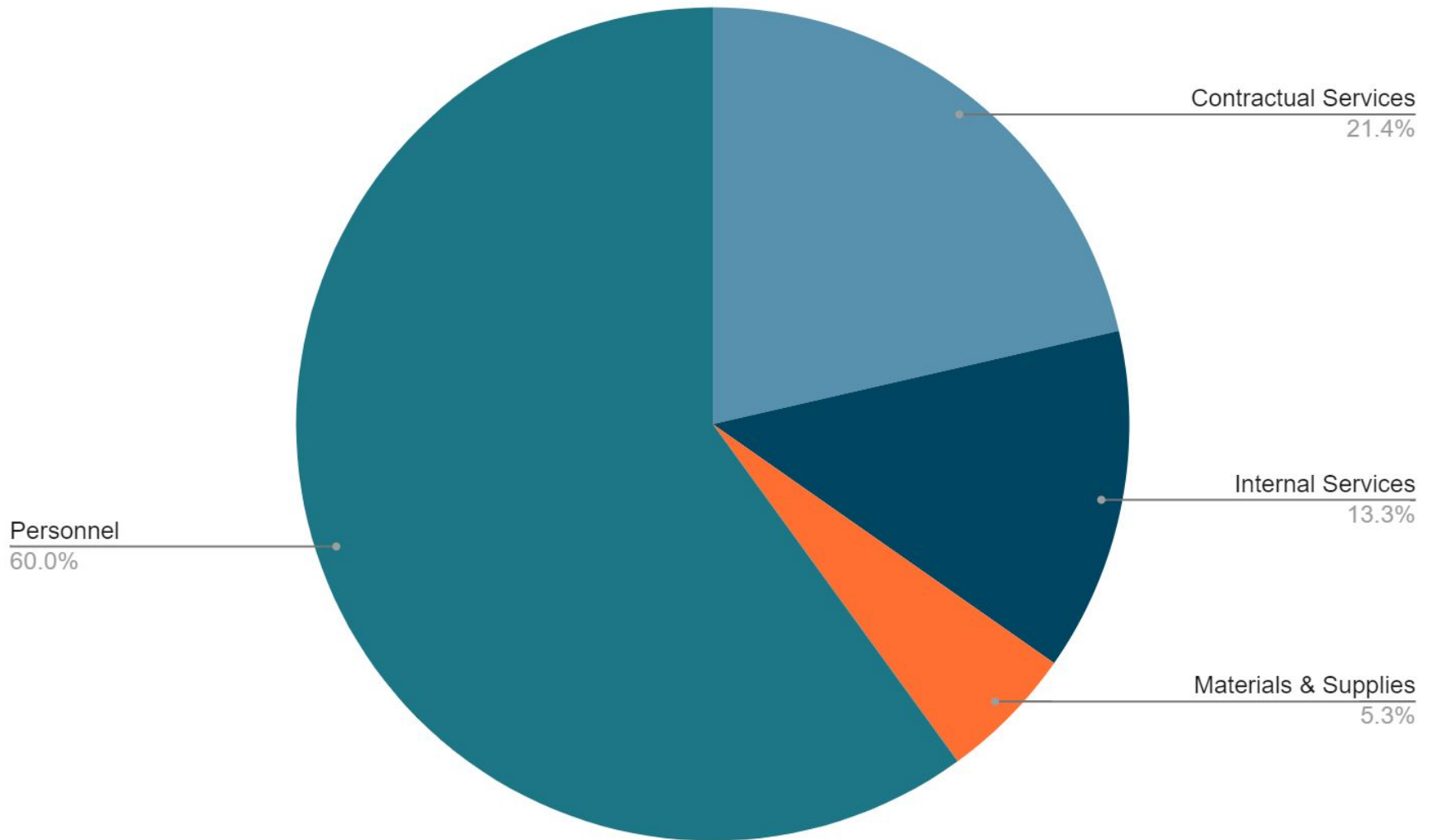


FTE - 5 Year Trend

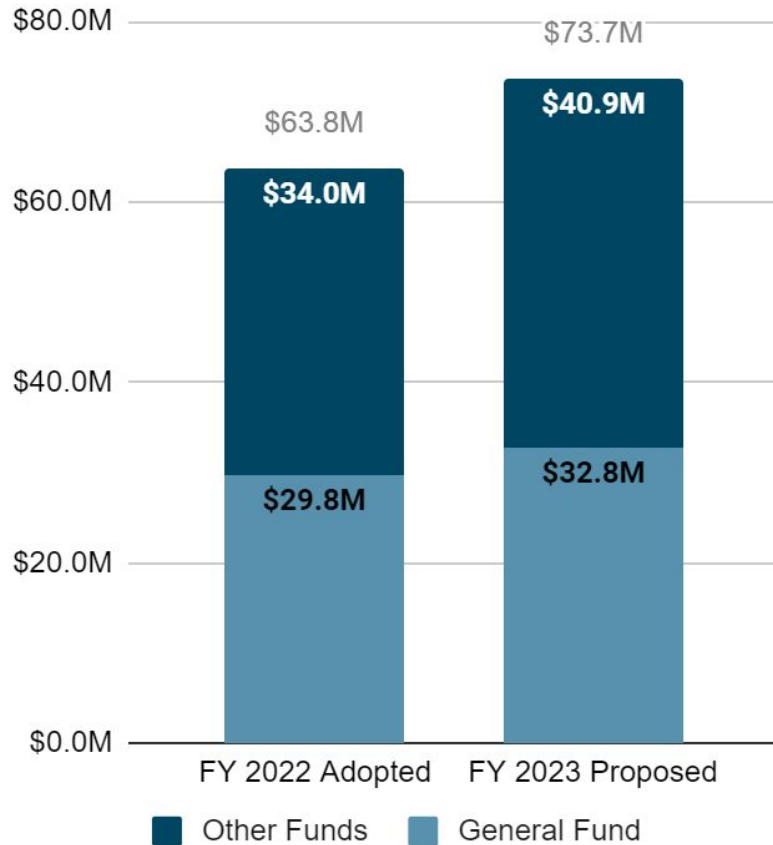
FY 2019 Adopted - FY 2023 Proposed



Budget by Category - \$73,721,104



Public Health FY22 v FY23 Proposed Budget



New General Fund Investments

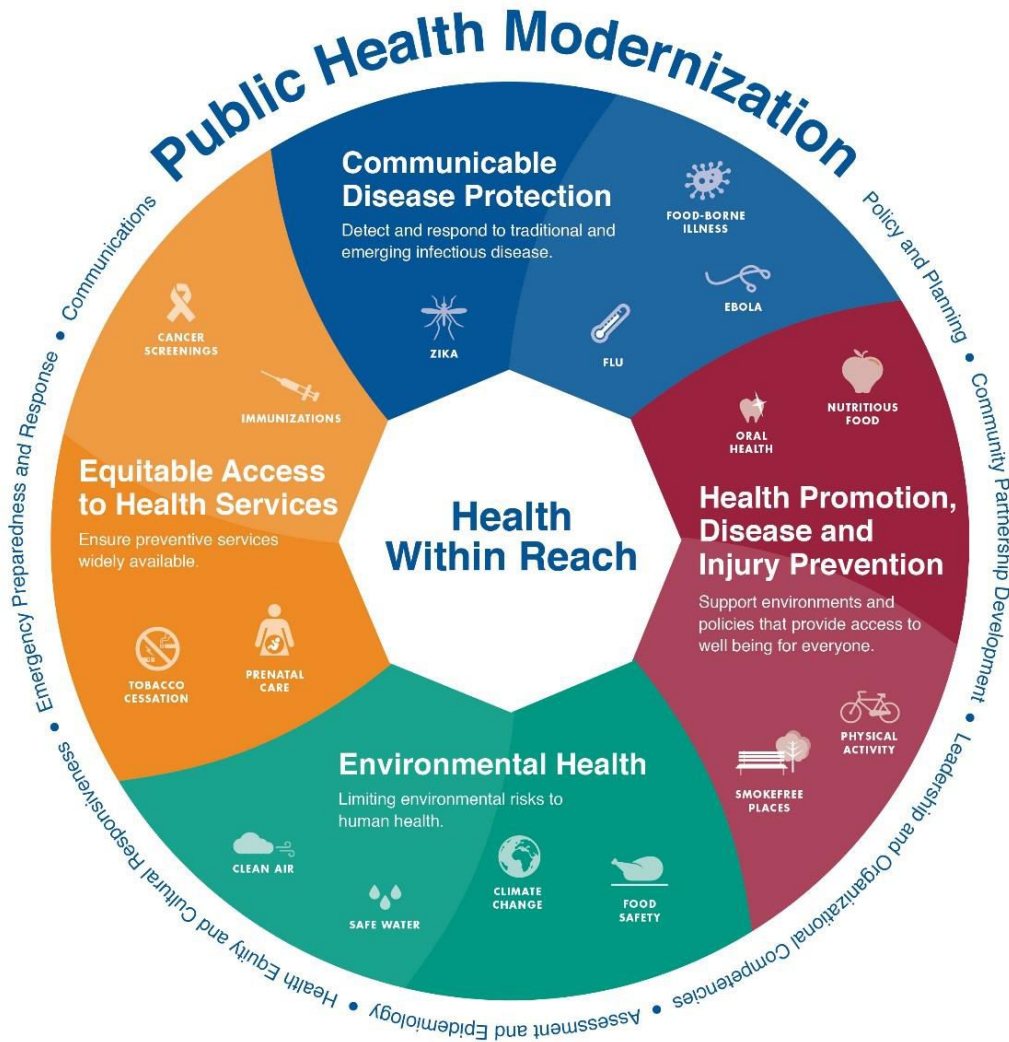
- \$405,000 Vector Control-Encampment Health Hazard Abatement (40008B)
- \$169,762 Future Generations Collaborative (40096C)
- \$350,000 Pacific Islander Coalition (40096D)

Other Significant Changes

- Public Health Modernization: \$5.2M (Various Program Offers)



Public Health Modernization



Public Health Modernization (PHM) is an Oregon Health Authority initiative to **improve public health resilience, response, and recovery**. It is committed to developing a community-based and equity-centered public health system.





Public Health Modernization Local Funding

Increased by approx. \$5.2M million in FY23.

Program areas funded include:

<i>Operations</i>	<i>(increase of \$245,644)</i>
<i>Communicable Disease Services</i>	<i>(increase of \$1,214,050)</i>
<i>STD program</i>	<i>(increase of \$992,089)</i>
<i>Healthy Homes</i>	<i>(increase of \$1,300,342)</i>
<i>Community Epidemiology</i>	<i>(increase of \$266,010)</i>
<i>Adolescent Health</i>	<i>(increase of \$10,000)</i>
<i>Harm Reduction</i>	<i>(increase of \$160,944)</i>
<i>Capacity Building</i>	<i>(increase of \$1,199,609)</i>

Total Local Public Health Modernization Increase \$5,217,864

PHM funding in the Director's Office decreased by \$170,824. See Appendix C for more details.





Health Disparities funds

\$3.7M million in FY23.

Program areas funded include:

<i>Community and Adolescent Health</i>	<i>\$627,240</i>	<i>1.00 FTE</i>
<i>Racial & Ethnic Approaches to Comm. Health</i>	<i>\$350,000</i>	<i>0.00 FTE</i>
<i>Communicable Disease Clinical and Community Services</i>	<i>\$87,872</i>	<i>0.50 FTE</i>
<i>Public Health Administration and Quality Management</i>	<i>\$1,060,570</i>	<i>4.90 FTE</i>
<i>Environmental Health Community Programs</i>	<i>\$349,746</i>	<i>1.00 FTE</i>
<i>Public Health Office of the Director</i>	<i>\$176,263</i>	<i>0.80 FTE</i>
<i>Parent Child Family Health Management</i>	<i>\$327,533</i>	<i>0.00 FTE</i>
<i>Immunizations</i>	<i>\$675,000</i>	<i>3.57 FTE</i>
<i>Total Public Health Disparities Funding</i>	<i>\$3,654,224</i>	<i>11.77 FTE</i>

See Appendix D for more details.



Prevention and Health Promotion

Racial and Ethnic Approaches to Community Health (REACH)

Convened African Coalition - **14 local organizations** represented across the diaspora and a total of **38 languages** identified.

51 COVID vaccination events where **2,044** people have been vaccinated within the African Immigrant and Refugee community.

Hosted **150+** culturally specific **vaccine events** and over **40 virtual forums**.

Community and Adolescent Health (CAH)

Adolescents and Communities Together work under Teen Pregnancy Prevention funding.

Over 5,017 students were reached across several school districts.

Engaged over **150 stakeholders**.
Provided over **\$600,000** in funding to organizations, schools, and individuals.

Tobacco Control and Prevention Program

Mass media campaign: “Don’t Lean on Nicotine” Tobacco Prevention and Education Regional partnership.

New Tobacco Retail Licensing data platform.

Resumed youth inspections tobacco products compliance.



Prevention and Health Promotion: \$8,448,683



March Against Murder, April 2022



Anti-vaping mass media campaign graphic



Community Partnerships and Capacity Building

Public Health Foundational Capabilities

Coordinates Public Health Modernization between the state and county

Partnership coordination across Public Health programs

Supporting Public Health programs with **Culturally-Specific Community partnerships and strategy development**

Health Equity system change

Community Health Worker (CHW) Programs

Community Health Workers (CHW) programming supports:

COVID-19 wraparound services

Training, technical assistance, and workforce development

Culturally-Specific Public Health Strategies

Culturally-specific strategies help reach Multnomah County's diverse populations.

Communities and coalitions:

- Slavic & Eastern European Coalition
- Latinx (Latino Emotional Health Collaborative; East County Natural Leaders; Latinx Partners)
- Pacific Islander (Pacific Islander Coalition)
- Future Generations Collaborative



Community Partnerships & Capacity Building: \$4,607,764



Future Generations Collaborative vaccination event



Community Health Worker's presentation to the Board of Health, April 2022



Environmental Health Services

Vector Program

The Vector Program **reduce vector-borne diseases.**

During the COVID-19 pandemic, **outreach and requests decreased.**

More capacity and outreach events will **increase inspections** in the next fiscal year.

Vital Records

Vital Records processes birth and death records.

During the pandemic, **death records increased** and **birth records decreased.**

Healthy Homes & Communities

This program looks at how **environmental and social conditions impact health.**

FY22 Lead Poisoning Prevention inspections **returned to nearly pre-pandemic levels.**

Other programming prevents **toxic exposures**, promotes **air quality**, and looks at larger systems like **land use and transportation.**

Inspections

The Inspections program inspects facilities to **reduce foodborne and waterborne illnesses.**

Inspections **enforced the state's COVID-19 rules** at the local level:

Occupancy restrictions, closures, & outdoor structures

Since indoor dining resumed - **Increase in restaurant and food cart licensing** and **in food handlers card applications.**



Environmental Health Services: \$11,736,904

General Fund
\$8,724,665
(74%)

Fed/State Fund
\$2,662,493
(23%)

COVID
Response Fund
\$349,746
(3%)



Lead poisoning prevention specialist Perry Cabot and AmeriCorps fellow Judy Tan purchased local products and discovered high lead content. December 2019

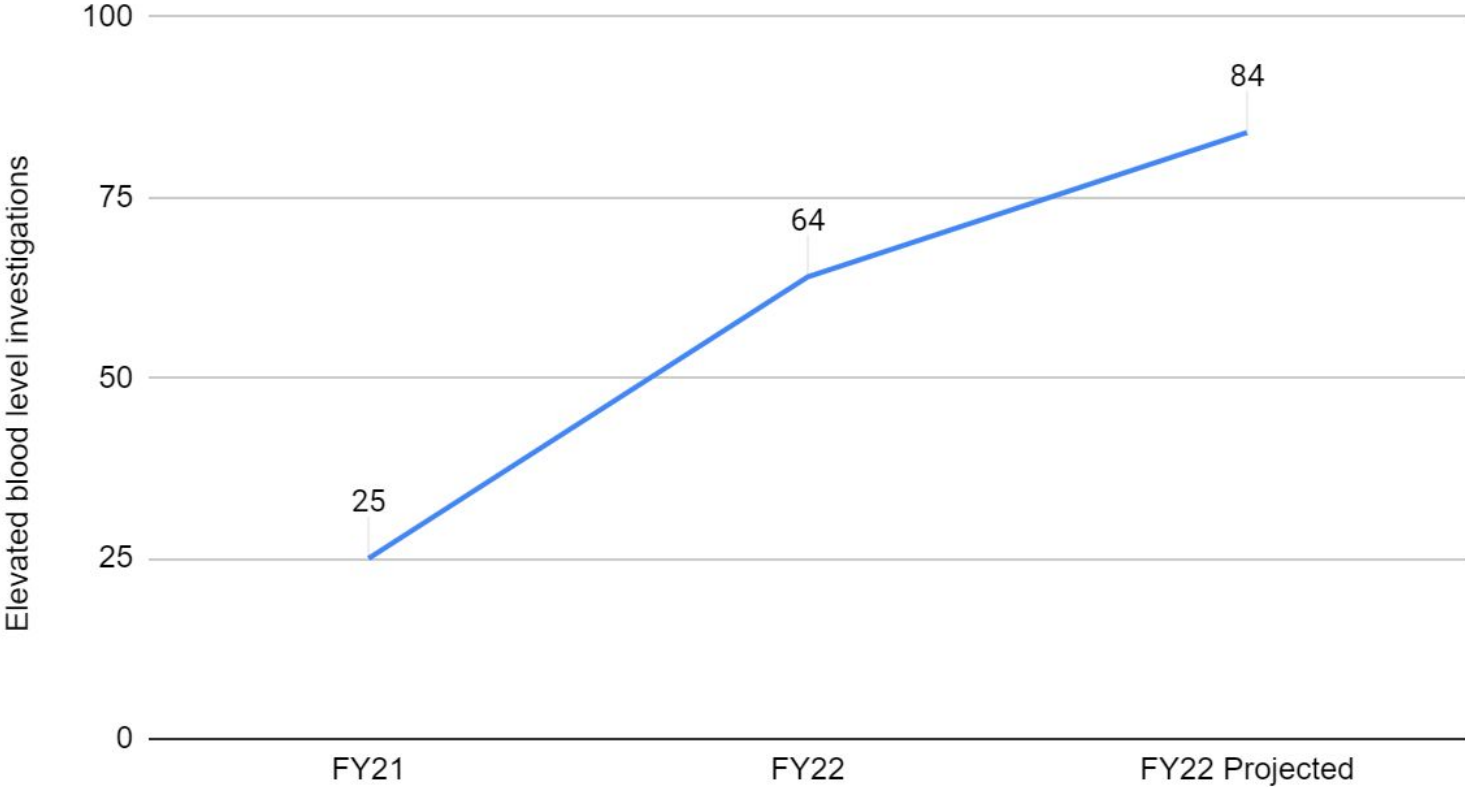


Heriberto Hernandez-Riano and Fernando Riaño from El Carrito with Inspector Elan Sandberg



Service Trends: Lead Prevention Program

Elevated blood level investigations



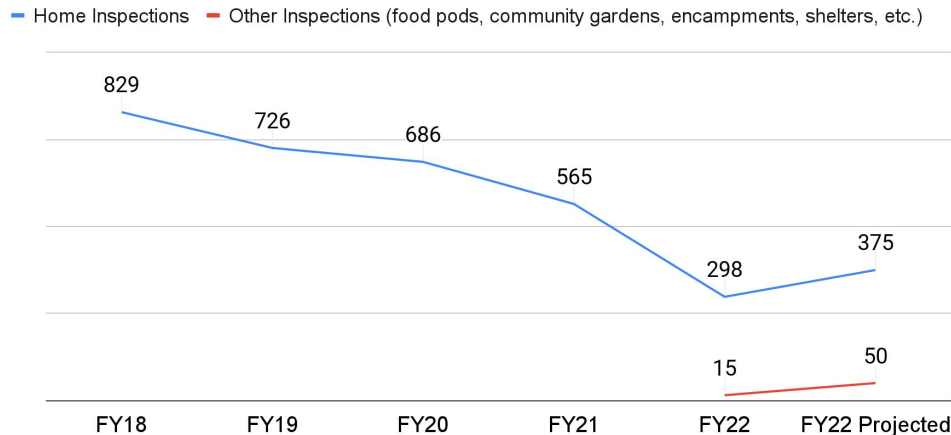
Expanded definitions of lead thresholds will impact the need for expanded screening in BIPOC communities



Service Trends: Vector Program

Rats Inspections:

Number of Rat Inspections at Homes and Other Spaces



The Vector Program only began inspecting other areas with the start of BIT funding mid FY22.

Mosquitos:

Mosquito Field Team Service Trends

	2020	2021	2022
Inspection and Monitoring of Mosquito Producing Sites	145	134	108
Adult Mosquitoes Trapped for Virus Testing	1,870	3,176	1,808
Outreach through social media, radio, tv	20,000	20,000	30,000

*The most active time for mosquitoes is May - September. For ease of comparison, the numbers are tracked by calendar year instead of fiscal year.

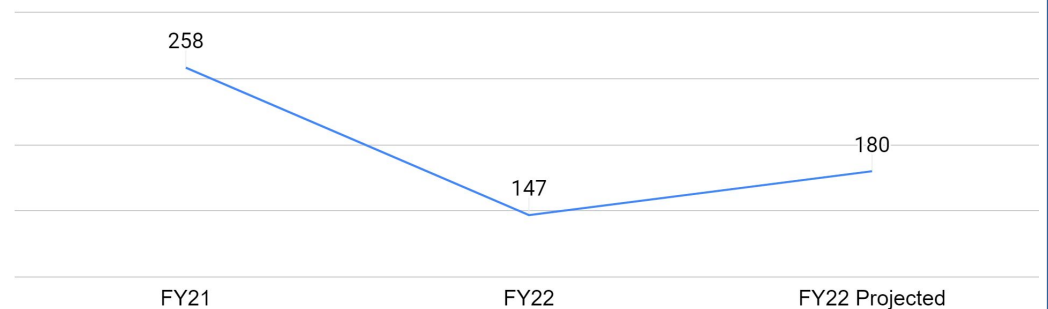
Code Enforcement:

FY22 Code Enforcement: Title IX

Responded to and abated **120** complaints regarding specified animals (chickens, roosters, goats, etc.)

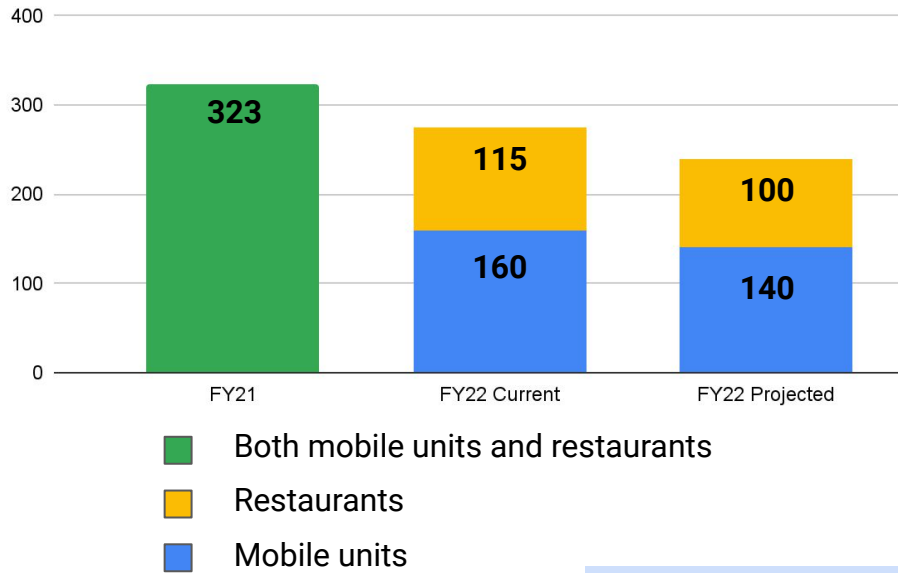
*This program was restarted in FY22 via an intergovernmental agreement with City of Portland

Illegal Dumping Code Enforcement in Unincorporated Multnomah County

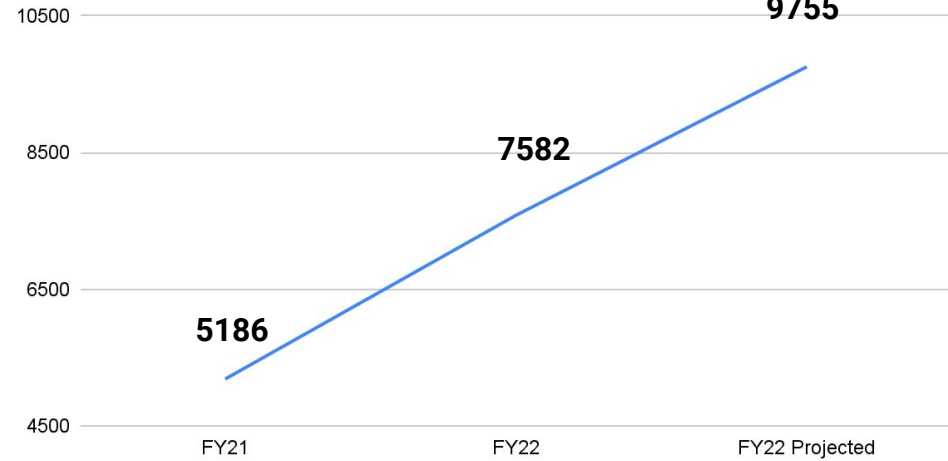


Service Trends: Restaurant Inspections

Number of plan review for new and existing restaurants and mobile units



Number of restaurant and mobile unit inspections completed by health inspectors



Preferred languages of those taking food handler card tests

Cantonese
English
Korean
Mandarin
Other

Russian
Spanish
Tagalog
Thai
Vietnamese



Communicable Disease Services

HIV Prevention Services

HIV prevention activities include:

- Community testing
- Linking individuals to care
- Support community wrap-around services, including housing
- PrEP medication to prevent HIV

STD/TB Clinic

STD Clinical services include:

- Evaluation and treatment of sexually transmitted diseases
- Vaccinations for Hepatitis A, B, and HPV

The services focus on **reducing sexual health disparities** among specific communities of color, as well as gay, bisexual, and other men who have sex with men and transgender individuals.

Tuberculosis (TB) services include:

- Evaluation and treatment of TB to high-risk populations only

Non-COVID Communicable Disease Work

The CD disease team **investigates and documents** thousands of reports of diseases that are transmitted through water, food, air, and animals.

This team works closely with:

- Businesses, schools, and long-term care facilities

Anticipating an increase in the following outbreaks:

Measles due to children falling behind on vaccinations

Flu, norovirus (stomach flu), and pertussis (whooping cough) as people have removed masks and as socializing and travel increase



Communicable Disease Services: \$6,687,889

HIV/STD: \$18,446,896

CD



CDS General Fund \$1,914,964 (29%)
 CDS Fed/State Fund \$3,386,717 (51%)

CDS COVID Response Fund
 \$1,386,208 (21%)

HIV/STD COVID Response Fund
 \$87,872 (1%)

HIV/STD



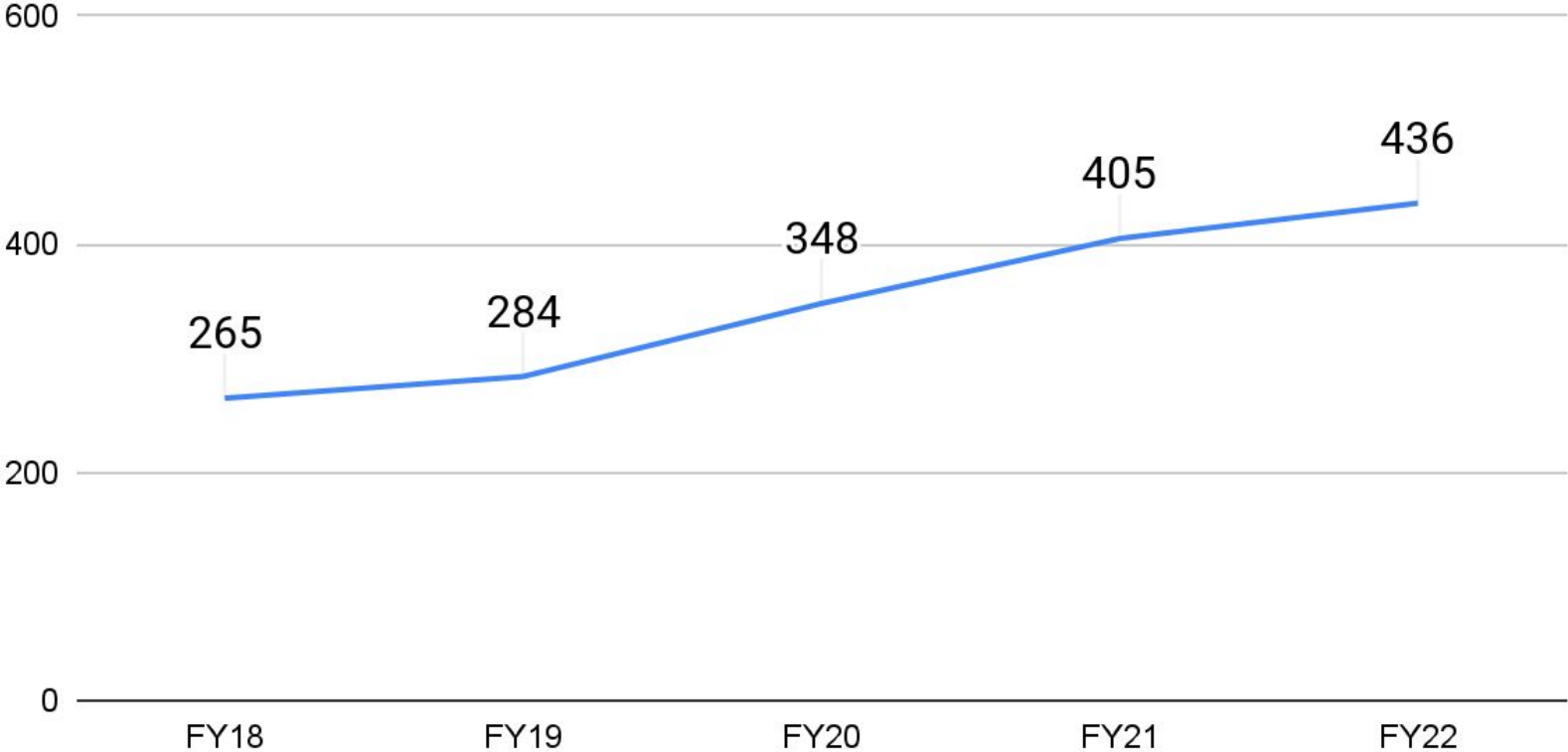
HIV/STD General Fund
 \$3,577,574 (19%)

HIV/STD Fed/State Fund: \$14,781,450 (80%)



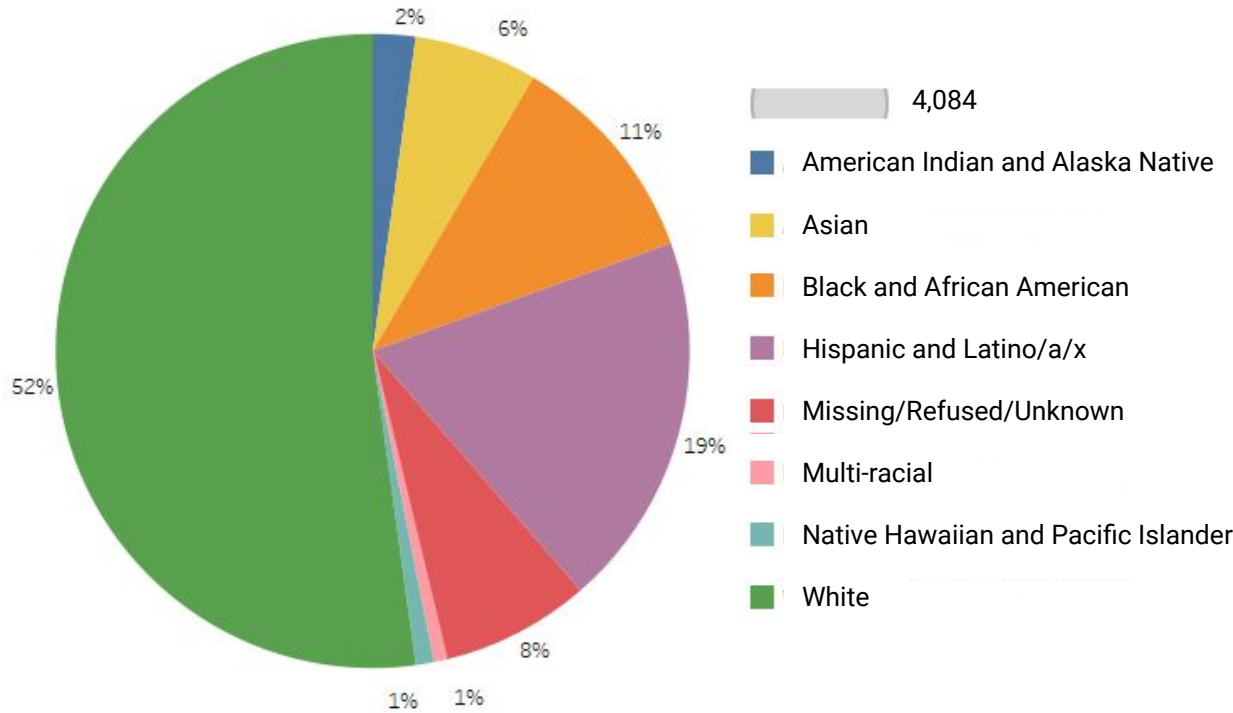
Service Trends: HIV Services

Number of people started on PrEP medication to prevent HIV infection



Service Trends: Sexually Transmitted Diseases (STD) / Tuberculosis (TB) Clinic Demographics

Client Race/Ethnicity



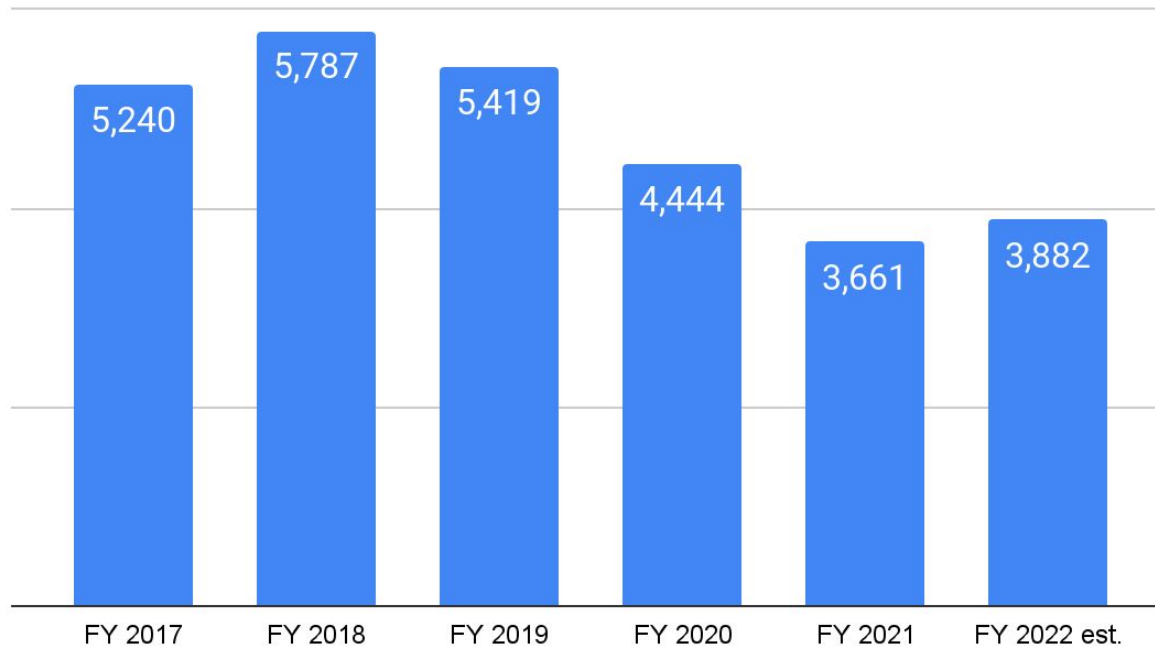
Languages spoken

- | | |
|-----------|-----------------|
| Afghan | Mina |
| ASL | Nepali |
| Amharic | Norwegian |
| Bosnian | Oromo |
| Cantonese | Other / Unknown |
| Mandarin | Portuguese |
| Dari | Russian |
| English | Somali |
| Farsi | Spanish |
| Hmong | Tagalog |
| Kanjobal | Tigrinya |
| Karen | Vietnamese |
| Mien | |



Service Trends and Expected FY23 Impacts: Non-Covid Communicable Disease

Non-COVID Communicable Disease Reports



Case numbers declined during COVID due to less social mixing and medical care. We expect to see these numbers rebound and **potentially climb higher due** to delays accessing preventive care/vaccines during COVID.



COVID-19 and ARP Update - Successes & Achievements

Contact Tracing, Case Investigation, and Outbreaks

6,419

cases interviewed

1,125

contacts reached out to

1,162

outbreaks opened or investigated

1,217

phone calls responded to on the Communicable Disease COVID Phone Triage Line

1,185

case data entries done by data entry team

777

contact data entries done by data entry team

Time period: 7/1/21 - 12/31/21



COVID-19 and ARP Update- Successes & Achievements

3,151 Households assisted with Wraparound Services
(estimated from phone numbers)

2,289

Referrals made to CBO
CHWs

244

Referrals made to ICS
CHWs

331

Requests for Groceries
Only

1,164

Urgent Grocery Orders

Community/Cultural Background

Black and African American	30.39%
White - Western European; other	23.74%
Hispanic and Latino/a/x	22.13%
Prefer not to answer/Unknown	16.56%
White - Eastern European; Slavic	3.87%
Asian	3.56%
American Indian & Alaska Native	2.79%
Native Hawaiian & Pacific Islander	1.99%
African	1.64%
LGBTQ+	1.29%
Other	1.08%
Middle Eastern/North African	0.84%
Faith-based Communities	0.24%

Preferred Language

While the majority of our clients indicate a preference to speak with us in **English** (89%) and **Spanish** (10%), and we do not specifically ask for languages spoken in the home, we hear from clients representing a wide variety of linguistic communities, including:

Akateko	Dari	Pashto
Amharic	Dine/Navajo	Rohingya
Arabic	Dinka	Romanian
Armenian	Farsi	Russian
Bosnian	Haitian Creole	Somali
Burmese	Mandarin	Swahili
Cambodian	Marshallese	Tigrinya
Cantonese	Mian	Ukrainian
Chinese	Nepali	Vietnamese
Chuukese	Oromo	

Time period: 7/1/21 - 2/9/22

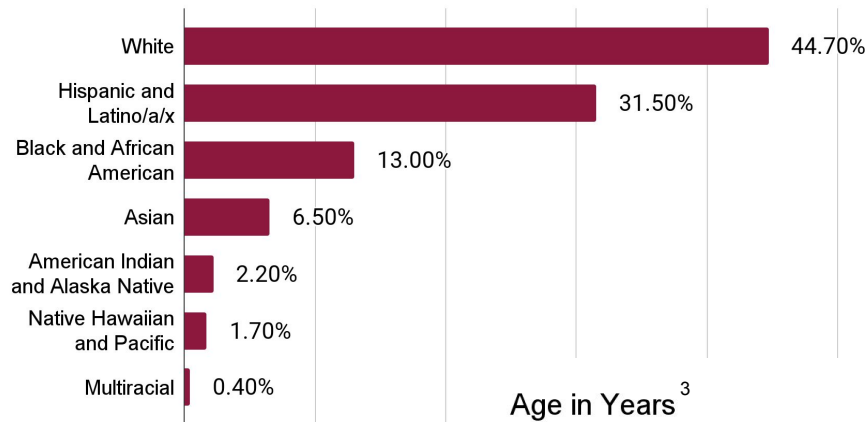


COVID-19 and ARP Update - Successes & Achievements

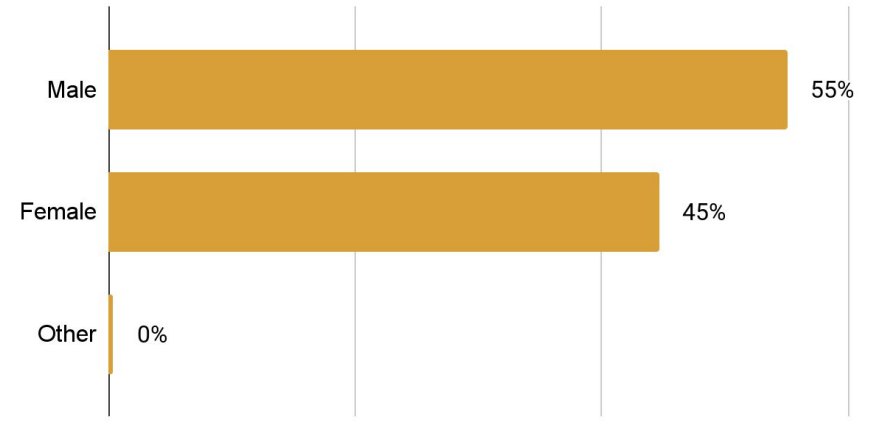
PH COVID-19 Vaccination Clinics: Client Demographics

15,354 Clients seen from July 1, 2021 – May 7, 2022

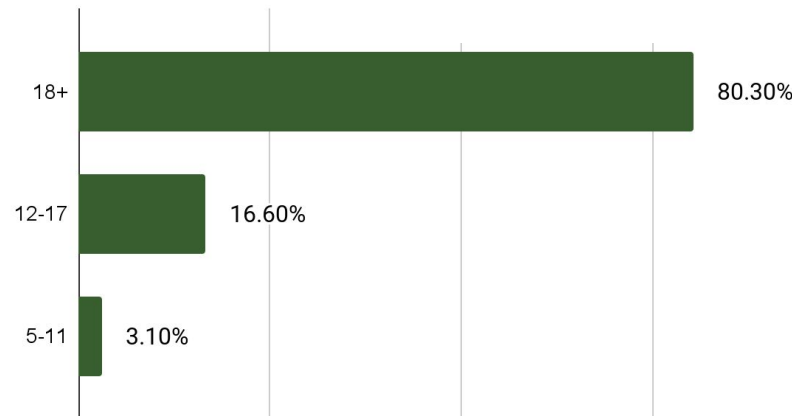
Race¹



Gender²



Age in Years³



¹Race is unknown for 2,868 (19%) of clients

²Gender is unknown for 149 (1%) of clients

³Age is unknown for 2 clients



COVID-19 and ARP Update - Successes & Achievements

REACH COVID-19 Response

150+

vaccine events with partners

Partners:

- Legacy Health
- Kaiser Permanente
- Medical Teams International
- Providence Health Systems
- Oregon Health & Science University
- Multnomah County Vaccine Team
- Multnomah County ICS

40+

virtual forums on COVID-19



Estimated audience reach:
5,000 people

150+

Ask a Black Doctor podcast episodes



Reached more than
200,000 individuals
with more than
20 different trusted messengers



COVID-19 and ARP Update

Pivoting how we work

COVID-19 Case Investigation, Contact Tracing and Outbreak Teams

2020 Staffing

1 Manager
4 Supervisors
45 Case/Outbreak Investigators
(CHN & DIS)
20 Contact Tracers (CHS2)
1 Infection Preventionist
4 OA2
1 Epidemiologist
1 Scheduler

*Variety of part time/on-call and students to support initial response

FY2023 Staffing

1 Manager
2 Supervisors
25 Case/Outbreak Investigators
(CHN & DIS)
1 Infection Preventionist
2 OA2
2 Epidemiologists
1 Data Analyst

*Focus on high risk settings, outbreak response/prevention and vulnerable community support



COVID-19 and ARP Update

Pivoting how we work

ARPA Isolation and Quarantine Funds

	FY 2022	FY 2023
Temporary Staff	\$968,188	\$766,944
Direct Client Assistance	\$3,961,750	\$1,811,262
Pass-through & Program Support	\$14,582,062	\$10,400,000
Professional Services	\$800,000	\$745,000
Materials & Supplies	\$87,000	\$52,563
Internal Service Data Processing		\$65,656
Totals	\$20,399,000	\$13,841,425

*Changing guidelines due to availability of vaccine and treatments

*Direct Client Assistance for Isolation & Quarantine ending at end of December 2022

*COVID-19 CBO support will sunset in June 2023



COVID-19 & American Rescue Plan Funding

Program	FY 2022 Adopted		FY 2023 Proposed		Variance
	Multco ARP	Other ARP	Multco ARP	Other ARP	
40199A ARP - Public Health - COVID-19 Investigation and Response	4,913,480		4,800,720		(112,760)
40199B ARP - Public Health Communicable Disease Community Immunization Program	9,037,079	1,379,330		1,398,394	(9,018,015)
40199C ARP - Public Health - Isolation and Quarantine	13,278,250	7,120,750	11,341,425	2,500,000	(6,557,575)
40199J ARP- Public Health Community Partners and Capacity Building Expansion	1,166,000		1,023,795		(142,205)
40199K ARP- Public Health Communicable Disease Services Expansion	1,038,000		711,208		(326,792)
40199L ARP - Nurse Family Partnership Restoration	468,595				(468,595)
40199P ARP - Demonstration Project for Neighborhood Focused Violence Prevention	101,000				(101,000)
40199T Public Health CDC COVID-19 Health Disparities				3,654,224	3,654,224



COVID-19 & American Rescue Plan Funding

Program	FY 2022 Adopted		FY 2023 Proposed		Variance
	Multco ARP	Other ARP	Multco ARP	Other ARP	
40199U Public Health REACH COVID-19/Flu Vaccine Supplement				253,884	253,884
40199V Public Health PDES COVID-19 Funding				225,000	225,000
Total	\$30,002,404	8,500,080	17,877,148	8,031,502	(12,593,834)



Questions



Appendices

- Appendix A - General Fund reallocations
- Appendix B - Out of Target General Fund Requests
- Appendix C - Public Health Modernization Funds
- Appendix D - Health Disparities Funds
- Appendix E - ARPA Proposals
- Appendix F - New, Backfill, & One Time Only Offers



Appendix A: General Fund Reallocations

Program	FY 2023 General Fund	FTE Change
Reduced funding in:		
40010A: Communicable Disease Prevention & Control	-467,588	-2.20
To fund:		
40010B: Communicable Disease Clinical and Community Services	228,656	0.00
40048: Community Epidemiology Services	107,081	1.20
40037: Environmental Health Community Programs	131,851	0.80
Total <i>See Appendix A for More Details</i>	\$0	-0.20



Appendix A: General Fund reallocations

Communicable Disease Prevention and Control (40010A)

- -\$581,116 in CGF and; -2.20 FTE moved from CGF
- Program has a net increase of \$793,810 and 1.88 FTE

Communicable Disease Clinical and Community Services (40010B)

- Reduction of HIV Early Intervention Services Grant (\$457,336)
- Backfilled internal services to GF from EISO
- Offset through adding GF from 40010A, Public Health Modernization funds, and CDC Health Disparities grant funds
- Program offer has net increase of 0.57 FTE and \$309,023
- General Fund increase of \$228,656

Community Epidemiology Services (40048)

- Added 1.0 Principal Investigator Manager
- 0.20 Research Scientist moved from CDS
- Increase of \$220,609; 1.20 FTE

Environmental Health Community Programs (40037)

- Reduction in City Lead (-\$7,000) and Willamette River Fish Advisory Funds (-\$86,292)
- Reduction in funds due to underspend in FY21 when outreach and advisory activities were impacted by Covid-19
- Increased costs: CDC modified the definition of elevated blood lead level, which is expected to significantly increase the caseload of investigations
- Increase of \$131,851; 0.80 FTE



Appendix B: Out of Target General Fund Requests

<p>Vector Control (40008B) <i>New, Ongoing</i></p>	<ul style="list-style-type: none">• Mid FY 2022 BIT funding addressing environmental hazards and improving the health houseless individuals and communities near houseless encampments• \$405,000; 3.00 FTE
<p>Public Health Office of the Director (40096A) <i>New, Ongoing</i></p>	<ul style="list-style-type: none">• Increased funding for Future Generations Collaborative, contracts with NAYA and Native Wellness Institute for education, research & evaluation, policy, community engagement, elders & natural helpers, community support circles, health & healing events, decolonizing conference. Directly relates to Covid-19 and chronic disease prevention work.• \$489,501; 0.00 FTE
<p>Public Health: Pacific Islander Coalition (44096D) <i>New, Ongoing</i></p>	<ul style="list-style-type: none">• Enhanced investment of funds to support the Pacific Islander Coalition to develop and strengthen capacity for Pacific Islander community organizations, increase access to culturally specific programs and community engagement opportunities, and to improve health equity for the Pacific Islander community• \$350,000; 0.00 FTE



Appendix C: Public Health Modernization Funds

Communicable Disease Prevention and Control (40010A)

- Core public health functions: epidemiologic investigation, preventive health measures for reportable disease exposures and outbreaks, disease tracking, etc.
- 2.30 FTE existing positions: 0.20 Ex. Specialist; 1.0 Epidemiologist; 1.00 Epidemiologist; 0.10 Sr. Manager
- 4.00 new positions: 1.0 OA 2; 1.0 Program Tech; professional services
- \$1,214,050; 7.2 FTE

Community Epidemiology Services (40048)

- Fulfills required governmental public health role by collecting and analyzing health and environmental data
- Adds 1.0 Epidemiologist Sr.
- \$266,010; 1.4 FTE

Communicable Disease Clinical and Community Services (40010B)

- Moved 0.40 existing positions
- Added 1.0 Office Assistants, 1.0 Executive Specialist, 1.0 Project Manager, 1.0 Finance Specialist 2, and 1.0 Operations Administrator
- \$992,089; 6.7 FTE



Appendix C: Public Health Modernization Funds

continued

Environmental Health Community Programs (40037)

- Expansion of the team: Program revenue will increase by \$1,781,796 and program staffing by 10.07 FTE
- Adds capacity on climate change, transportation justice, and healthy homes
- \$1,300,342; 8.0 FTE

Public Health Office of the Director (40096A)

- Add six program specialists with various KSA (Asian, African immigrant and refugee, African American, Native American/Alaskan Native, Slavic & Eastern European, and Middle Eastern)
- \$1,199,609; 7.0 FTE

Harm Reduction (40061)

- Added 1.0 Community Health Nurse
- \$160,944; 1.0 FTE



Appendix D: Health Disparities Funds

Community & Adolescent Health (40199T)

- One-time-only media campaigns and contracts for BIPOC community
- Implementation of youth-led violence prevention projects
- \$627,240; 1.00 FTE

Racial and Ethnic Approaches to Community Health (40199T)

- Pass-through to CBOs for nutrition, physical activities PSEs
- Communications and media buys, PSE implementation
- AmeriCorps Volunteer In Service To America (VISTA)
- \$350,000; 0.00 FTE

Communicable Disease Clinical and Community Services (40199T)

- Added 0.20 FTE for Nurse Practitioner
- Added 0.30 OA Sr. for clinical capacity
- \$87,872; 0.50 FTE

Public Health Administration and Quality Management (40199T)

- Includes 1.00 Nursing Development Consultant, 1.00 Administrative Analyst, 1.00 Program Tech, 1.00 Finance Specialist Sr., 0.90 Contracts Project Manager
- \$290,689 in contractual expenses
- \$1,060,570; 4.90 FTE



Appendix D: Health Disparities Funds continued

<p>Environmental Health Community Programs (40199T)</p>	<ul style="list-style-type: none">● 1.00 Project manager● Affordable housing air and temperature sensing pilot with City of Portland and Home Forward● Engagement with a contractor to measure and compile a report on the distribution of urban noise● \$349,746; 1.00 FTE
<p>Public Health Office of the Director (40199T)</p>	<ul style="list-style-type: none">● Moved vacant Manager 1 from PHM to Health Disparities● \$176,263; 0.80 FTE
<p>Parent Child Family Health Management (40199T)</p>	<ul style="list-style-type: none">● One-time-only increases for Healthy Families contractors (costs not allowable in Healthy Families grant)● \$50,000 increase for African Family Holistic Health Organization for HBI● \$327,533; 0.00 FTE
<p>Immunizations (40199T)</p>	<ul style="list-style-type: none">● 3.57 FTE added for non-Covid related immunizations (childhood vaccines, school exclusion work)● \$675,000; 3.57 FTE



Appendix E: ARPA Proposals

<p>ARPA - Covid-19 Investigation and Response (40199A) <i>Existing</i></p>	<ul style="list-style-type: none">● FY23 budget reflects changing Public Health interventions at this phase of the pandemic. The focus of the work has moved to high risk populations and settings.● \$4,800,720; 33.26 Temporary FTE
<p>ARPA - Public Health - Community Testing, Vaccination, and Distribution (40199B) <i>Existing</i></p>	<ul style="list-style-type: none">● In FY23, the focus of this offer is being broadened to include additional immunization work and it is connected to 40010C.● To support expanded strategies, a 1.0 FTE Nursing Supervisor is being moved from 40199K to this offer.● Together, this program offer and 40010C, represent the integration of COVID-19 vaccination and testing into broader and ongoing Communicable Diseases Services immunization work and strategies.● \$1,398,394; 4.17 FTE
<p>ARPA - Isolation & Quarantine (40199C) <i>Existing</i></p>	<ul style="list-style-type: none">● Wraparound services for people who test positive for Covid-19: rental, mortgage, utility, and food assistance to minimize the financial impact of self-isolating, as well as access to Voluntary Isolation Motel and other services as needed● Interdepartmental agreements with DCHS and contracts with culturally specific CBOs to support wraparound services and provide referrals for services● \$13,841,425; 7.25 Temporary FTE



Appendix E: ARPA Proposals continued

ARPA - Community Partners & Capacity Building (40199J)

- Funds increased capacity within Community Partnerships and Capacity Building and Chronic Disease Prevention & Health Promotion programs.
- These increases in Public Health and community capacity will lead to collective problem solving with BIPOC communities. The results of these efforts will be policy, system, and environment change strategies that improve overall community health by addressing the impacts of racism and social determinants such as education and economic opportunities.
- \$1,023,795; 3.0 Temporary FTE

ARPA- Communicable Disease Services Expansion (40199K) *Existing*

- Additional staffing for expansion of vaccination, tuberculosis, emerging infectious disease, and foundational support programs.
- \$711,208; 5.0 Temporary FTE



Appendix E: ARPA Proposals continued

ARPA- REACH Covid-19 Flu Supplemental (40199U)

- Public Health's Racial and Ethnic Approaches to Community Health (REACH) program received supplemental Centers for Disease Control and Prevention (CDC) funding to support COVID-19 and flu vaccination work in March 2021. The supplemental funding ends September 29, 2022. The funding supports identifying barriers to vaccine uptake, equipping community members to support vaccination strategies, and implementing vaccine clinics. These activities are focused on the local Black/African American and African immigrant and refugee communities.
- \$253,884; .25 FTE

ARPA - PDES Covid Funding (40199V)

- Program Design and Evaluation Services (PDES) has received federal and state COVID-19 funding to provide ongoing support to the Oregon Health Authority Office of the State Public Health Director. The scope of work includes collaborating with BIPOC community partners to improve public health data systems; analyzing and reporting on COVID-19 measures; and creating COVID-19 modeling reports. Activities support both statewide and local needs.
- \$225,000; .84 FTE



Appendix F: New, Backfill, & One Time Only Offers

Program	FY 2023 General Fund	GF Backfill	FY 2023 Other Funds	Total	OTO	New
40008B: Vector Control-Encampment Health Hazard Abatement	405,000			405,000		X
40096C: Future Generations Collaborative	154,762			169,762	15,000	X
40096D: Public Health: Pacific Islander Coalition	350,000			350,000		X
Total	\$909,762			\$924,762	\$15,000	

