



# FY 2024

## Adopted Budget

Adopted by Multnomah County  
Board of Commissioners  
Jessica Vega Pederson, Chair



### Volume 3:

County Human Services  
Joint Office of Homeless  
Services  
Health Department  
Library  
Nondepartmental

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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 or 3; 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 results it produces for the community. 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.
- Communicate how they use an equity lens in relation to services provided.
- 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, including how the program will impact racial equity. 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.

### *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 youth might report the number of youth who received treatment (output), and the percentage of youth 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 youth 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
- Existing Program
- New Program
- Program Alternative/Reconstruction
- Internal Service
- Revenue/Fund Level/Tech

### *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.

### *Existing 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 Program*

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

### *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/Fund Level/Tech*

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 funds, 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 that 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 175 beds. Departments are 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 25 additional beds, giving decision-makers a choice between adding either 50 or 75 beds.

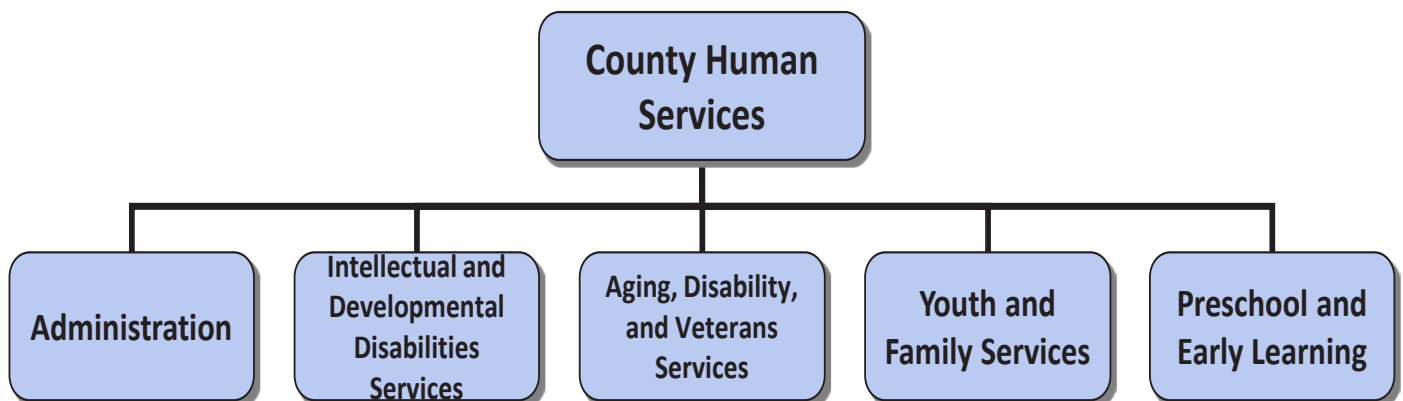
## Department Overview

The Department of County Human Services' long-range vision is guided by the DCHS North Star, which states: **Every person – at every stage in life – has equitable opportunities to thrive.**

In order to achieve our North Star, we must actively work against systemic racism and socio-economic disparities within our communities by centering racial justice and equity in the work we do. DCHS strives to not only uplift our community members in times of need – but to invest in innovative, future-oriented approaches to human services that prevent crises, build assets and nurture self-determination within our communities by addressing and redressing the root causes of racism and all other forms of inequity.

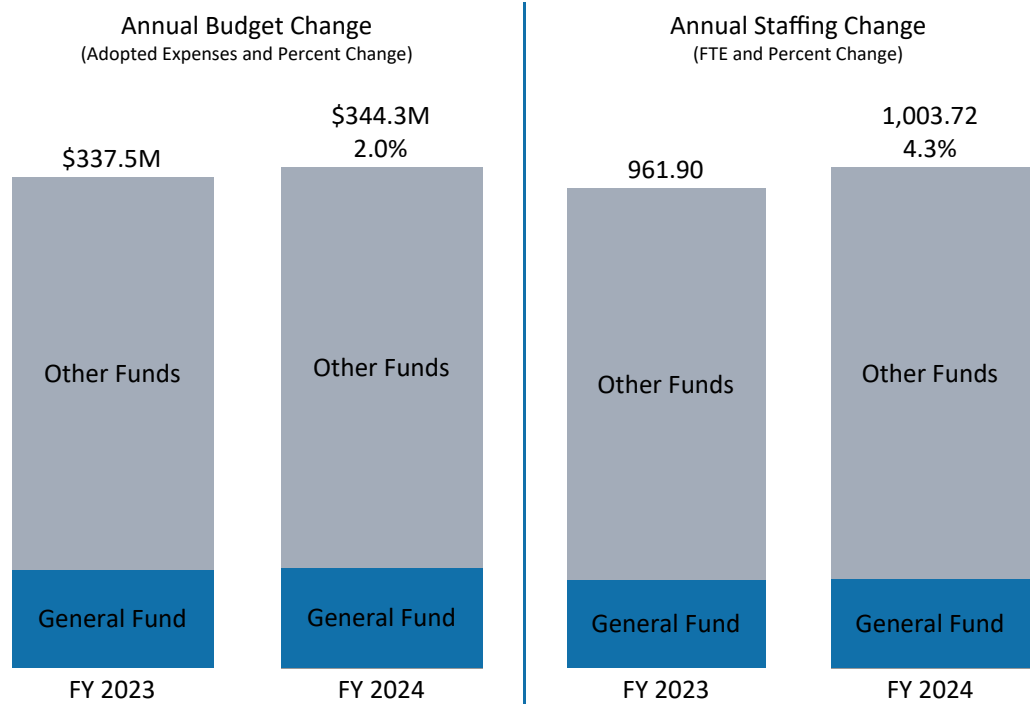
DCHS has a critical role in the County because the department designs programs, services and funding to provide stability for people across the lifespan. This budget supports the core work of the department by:

- **In early childhood, DCHS supports** our youngest community members by ensuring equitable access to free, high-quality, developmentally appropriate, culturally responsive preschool experiences through the department's Preschool & Early Learning Division (PEL). PEL will collaborate across the department to offer developmentally appropriate early education access for youth served through the Intellectual and Developmental Disabilities Services Division.
- **DCHS supports children and young people** by promoting positive parenting, improving educational access and support, and making sure that BIPOC children and other children facing barriers have access to quality education, enough to eat in the year round, and that their families are stably housed.
- **In adulthood, DCHS supports** young adults with disabilities who want to live in their own homes and have fulfilling and stable jobs, thus contributing to their economic stability and quality of life. DCHS helps people stay in affordable homes and provides safety and support for survivors of domestic and sexual violence.
- **DCHS supports older adults, people with disabilities and veterans** to achieve quality of life and independence by helping them navigate public programs, providing community programs that support people staying healthy and engaged, and intervening when older adults or people with disabilities are potentially being abused.



### Budget Overview

The FY 2024 Department of County Human Services (DCHS) Adopted budget is \$344.3 million and 1003.72 FTE. The County General Fund accounts for \$69.5 million or 20.2% of the total. Other Funds include Federal/State at \$176.6 million (51.3%), Preschool for All at \$79.0 million (22.9%) and COVID-19 Response at \$19.1 million (5.6%).



Most of the DCHS budget comes from nearly 100 Federal, State and local sources. This includes \$176.6 million in the Federal/State Fund, which increased by \$22.7 million (14.8%) from the FY 2023 Adopted budget. The bulk of this increase came from the State of Oregon and increased the Aging, Disability, and Veterans Services Division (ADVSD) by \$6.5 million and 19.52 FTE in Medicaid funding (multiple program offers) and the Youth and Family Services Division (YFS) by \$10.6 million and 6.60 FTE in energy and rent assistance funding for income-eligible households (25119 and 25133C).

Additionally, the Federal/State Fund includes \$1.3 million and 12.50 FTE in one-time-only funding for the Regional Health and Human Services Contact Center (HHSCC) (25032B). The funding comes from CareOregon in partnership with the Health Department. The Contact Center began during the COVID-19 pandemic and has evolved to become the HHSCC. It connects community members with culturally-responsive emergency and public health information and service connections.

### Budget Overview (cont.)

The DCHS Preschool and Early Learning (PEL) Division administers the voter approved “Preschool for All” program (Measure 26-214), which offers free early education to 3 and 4 year olds across the County. FY 2024 will be the second year of preschool slots, estimated at 1,400 slots. The budget totals \$354.3 million and 37.00 FTE in the PEL Division. Of this amount, \$260.0 million is unappropriated balance and \$15.3 million is contingency, leaving a balance of \$79.0 million for direct programming in DCHS’s budget. The direct programming amount increased by \$28.8 million (57.4%) and 14.00 FTE, compared to the FY 2023 budget at \$50.2 million and 23.00 FTE.

The COVID-19 & American Rescue Plan (ARP) Division decreases by \$46.4 million and 22.50 FTE from FY 2023 as the funding is sunsetting. Although the ARP funding is limited, some of the positions existed more than two years and had to be converted from limited duration assignment to FTE in FY 2023 based on labor agreements and personnel rules. 18.50 of these FTE moved to the ADVSD and YFS Divisions in FY 2024 and are budgeted in the Federal/State Fund (25032B, 25119, 25121A and 25133C).

The FY 2024 DCHS General Fund allocation includes \$824,383 in ongoing funding for the following new programs:

- YFS - Infrastructure - Expand Staff Capacity (25118B) \$287,244
- YFS - Housing Stability Team: 1.00 FTE Eviction Prevention Specialist (25133B) \$151,437
- YFS - Maintain 4 Existing SUN Community School Sites (25145B) \$275,644
- YFS - Summer Meal Expansion (25147B) \$29,829
- YFS - SUN Database Cost Increase (25160B) \$80,229

Budget Trends	FY 2022	FY 2023	FY 2023	FY 2024	Difference
	<u>Actual</u>	<u>Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	865.59	961.90	961.90	1,003.72	41.82
Personnel Services	\$94,049,434	\$105,085,038	\$118,507,350	\$128,456,610	\$9,949,260
Contractual Services	120,862,739	164,588,584	184,455,204	180,902,381	(3,552,823)
Materials & Supplies	2,457,715	2,653,535	2,529,123	3,512,746	983,623
Internal Services	27,005,510	29,377,553	32,028,805	31,382,288	(646,517)
Debt Service	<u>8,078,727</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>Total Costs</b>	<b>\$252,454,125</b>	<b>\$301,704,710</b>	<b>\$337,520,482</b>	<b>\$344,254,025</b>	<b>\$6,733,543</b>

*\*Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies and unappropriated balances.*

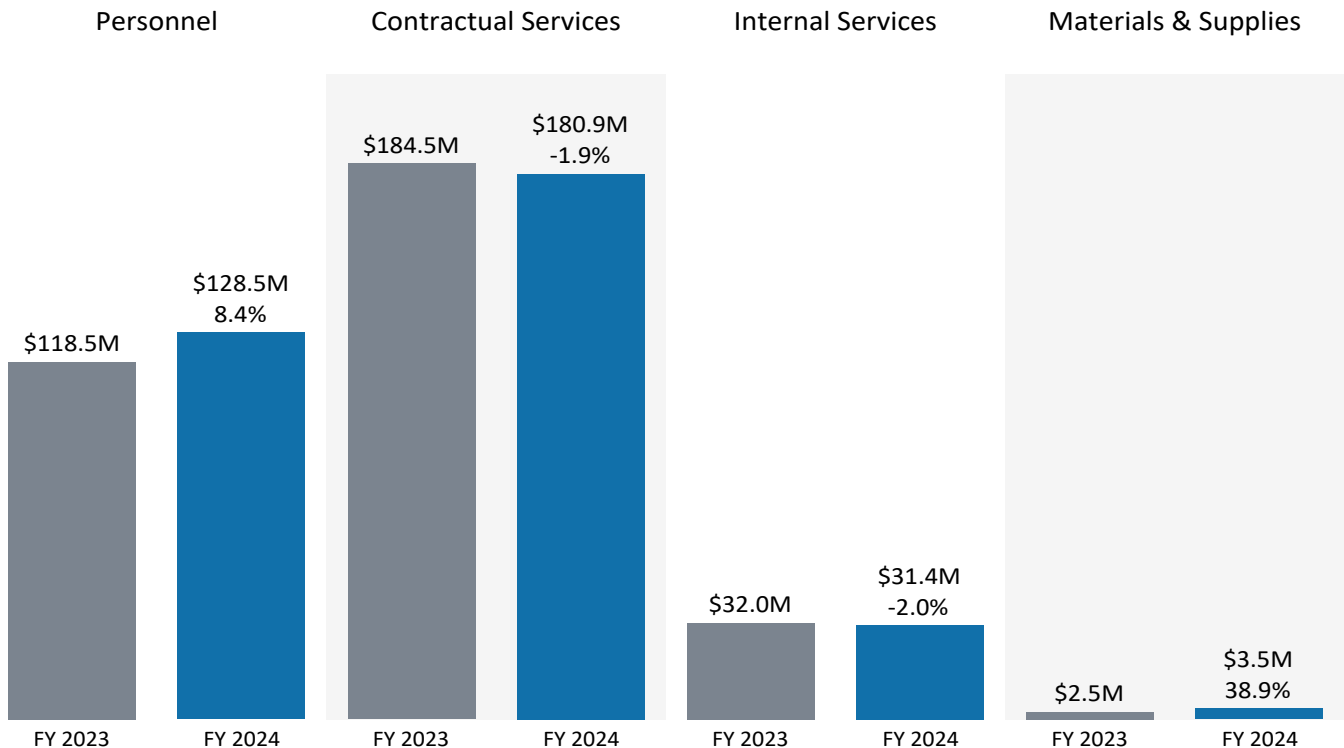
### Budget Overview (cont.)

Additionally, the FY 2024 DCHS General Fund includes \$1.2 million in one-time-only funding for the following programs:

• DCHS Economic Justice Project (25000B)	\$150,000
• ADVSD Older Adults in Home Care Needs (25036B)	\$75,000
• YFS - Woodstove Replacement (25121B)	\$244,283
• YFS - Expungement and Legal Services Days (25131D)	\$262,500
• YFS – Expungement and Legal Services Expansion (25131E)	\$140,000
• YFS - New Day Collaborative Backfill (25135B)	\$334,800

A full list of new programs or programs funded as one-time only can be found in the Budget Director’s Message.

The chart below provides a breakdown of the budget’s expense categories from FY 2023 to FY 2024. Contractual Services is the largest component of the DCHS budget, while Materials & Supplies grew the most between FY 2023 and FY 2024. The chart does not include cash transfers, contingencies or unappropriated balances.



## Successes and Challenges

DCHS strives to be a leader in anti-poverty work and economic justice efforts focused on the needs of Black, Indigenous and People of Color (BIPOC) communities. To do this we must maintain strong relationships and collaboration with our community partners and other County departments. In alignment with our commitments to interdepartmental collaboration, racial justice and innovation, DCHS is focused on the following key priorities:

**I. Equity and Racial Justice.** DCHS strives to incorporate Racial Justice & Equity into all of our work.

**II. Consumer Health and Safety.** This is a core function of DCHS, and includes the Adult Protective Services team, Public Guardian program, IDD Abuse Investigations, and more.

**III. Early learning and educational success.** This is a core function of DCHS, and includes the work of the department's Preschool & Early Learning Division, the SUN Service System, and the Intellectual & Developmental Disabilities Division's work with youth who experience I/DD.

**IV. COVID-19 response and recovery:** for example, the Regional Health and Human Services Contact Center.

**V. Economic impact & recovery for BIPOC Communities:** This includes emergency rent assistance & eviction prevention, Unconditional Cash Transfer (UCT), the Economic Justice Efforts, and the Immigrant & Refugee Project (a new position focused on advancing equity and improving quality of life for immigrant and refugee communities living in Multnomah County).

**VI. Making data-driven decisions that reflect the DCHS North Star and four pillars (Quality of Life, Economic Stability, Educational Success and Diverse and Inclusive Systems):** This includes the development of a DCHS Dashboard, and department-wide mapping of all current programs to our four pillars in order to better understand the overall investment and identify patterns (for instance, the majority of investment under the Economic Stability pillar is from the American Rescue Plan (ARP), which is sunsetting and therefore will also impact BIPOC staff whose positions are tied to that funding and temporary or limited duration).

**VII. Innovation and sustainable business strategies:** This includes future-focused space planning, implementation of DCHS Sustainable Business Plan strategies, and creating a new working group through reassignment of existing capacity to focus on department-wide Strategy & Innovation (The Multnomah Idea Lab, Quality Improvement & Systems Change, New Project Development/Incubation, and Research).

**VIII. Contracting process improvements (in collaboration with the Chief Operating Officer):** This includes improving the RFPQ process for large RFPs by using dedicated project managers, and coordinating department-wide Quality Assurance within DCHS contracts.

**IX. Cross Departmental Collaboration:** This includes collaboration with Public Health to address the Social Determinants of Health, and collaboration with the Joint Office of Homeless Services to address housing and shelter needs.

**X. Emergency Management:** Responding to climate crises and coordinating mass shelter during emergencies.

### COVID-19 & American Rescue Plan

Since the beginning of the COVID-19 pandemic, DCHS has played a critical role in meeting community members' immediate needs, providing stability through uncertain socio-economic conditions, and supporting the region's overall Public Health response. Below is a summary of DCHS COVID-19 pandemic response funding in FY 2024:

- **25399B - ARP - Multnomah Mothers' Trust Project (MMTP):** Continuation of existing Project to ensure a second full year of support to the current cohort of Trust Members - 100 African American female-headed households and their children.
- **25399C - ARP - Domestic Violence Services:** Continue funding for culturally specific domestic violence providers and the Domestic Violence Enhanced Response Team (DVERT).
- **25399E - ARP - SUN Community Schools Family Resource Navigators:** Continue funding to help families connect to resources such as case management, language support, skill building, and more.
- **25399S - ARP - YFS Food Security / Pantry Enhancement:** These funds will support the added costs of staffing, food and supplies at sites with large numbers of households accessing pantries in East County.
- **25490B - ARP - Emergency Rent Assistance:** Continue delivering emergency rent assistance in the community, at reduced funding levels.
- **25490C - ARP - YFS Rent Assistance Team Staffing Capacity:** For FY 2024 this represents the FTE necessary to administer Emergency Rent Assistance (25490B).
- **25491 - COVID-19 Energy & Housing Services:** Program continues in FY 2024 at a reduced funding level.
- **25492A - COVID-19 ADVSD OAA ARP:** Older Americans Act (OAA) ARP funding is available until September 2024. For FY 2024, the program is planning on allocating funds to provide services in the same areas of support.

## Diversity, Equity, and Inclusion

The DCHS North Star aligns with the County's Workforce Equity Strategic Plan (WESP), which guides the equity work for our department and helps us strategically and intentionally uphold our commitment to Inclusively Leading With Race – meaning that we center racial justice while understanding that all forms of oppression intersect and overlap with one another and have a compounding effect on those who hold multiple marginalized identities. For this reason, we are explicit in naming racial justice when framing and implementing the department's work at all levels.

### Equity for DCHS Consumers:

DCHS strives to incorporate racial justice and equity into all of the department's programs and services – in addition to programs that specifically serve BIPOC communities. For example, over 64 percent of Youth and Family Services Division funding is contracted out to partner agencies who work in the community, including a wide network of culturally specific organizations. A good illustration of this model is the department's FY 2023 Rent Assistance funding, where the majority of funds were intentionally distributed to families via culturally specific organizations to address the compounding impact of the COVID-19 pandemic and structural racism.

Another example of how equity is woven into the core functions of DCHS is the implementation of Preschool For All. All families in Multnomah County are eligible to apply and families who currently have the least access to preschool are prioritized, including Black, Indigenous, and Children of Color. In FY 2024, the Preschool & Early Learning Division will invest additional dollars to grow the child care workforce, strengthen preschool programs, provide access to early childhood mental health, stabilize infant and toddler care, create more inclusive preschool environments, and increase the number of early childhood facilities.

### Equity for the DCHS workforce:

The department is improving its current organizational culture through the DCHS Sustainable Business Plan (SBP), and the Workforce Equity Strategic Plan (WESP). The goal is for DCHS to be an employer of choice on the journey to becoming the community's service provider of choice. Some examples of internal racial justice and equity initiatives at DCHS include:

- **Uplifting the DESJC:** The Department recalibrated the DCHS Diversity, Equity, and Social Justice Committee (DESJC) and developed a Two (2) Year Strategic Plan. The DESJC also serves as the WESP Committee for DCHS and continues to promote Safety, Trust, & and Belonging within the department.
- **Division-level collaboration:** The Equity team works in partnership with each division initiative for the WESP. For 2024, each division will once again select a theme from the WESP to enhance and augment diversity, equity, and inclusion, as well as safety, trust, and belonging in each division. The Equity Team also continues to engage with each division by providing training, technical assistance, and consultations.
- **Restorative healing initiative:** The Equity team is in the process of developing an informal tool that will encourage healing through a restorative healing initiative aimed at resolving issues pertaining to micro-aggressions. We are extremely appreciative of the recent work (Putting it Together: A



## Diversity, Equity, and Inclusion (cont.)

Countywide Solution to Bridge the Needs for Conflict Resolution and Acts of Inclusion) on micro-aggressions by the Complaints Investigation Unit (CIU) and Central HR. We believe this work of addressing microaggressions is critical for safety, trust, and belonging as well as healing and relationships for all employees. We thank Central HR and CIU for recognizing the current work we are doing in DCHS to mitigate micro-aggressions.

- **Equity Cohort for managers and supervisors:** starting in FY 2023, this initiative will bring groups of managers and supervisors together for 6-8 weeks to talk about Diversity, Equity and Inclusion and provide them with the tools and structure necessary to manage the implementation of DEI work.

- **Recruitment, onboarding and retention initiatives:** Several groups within DCHS are working to improve recruitment and onboarding through a racial justice and equity framework.

### Equity in the DCHS budget process:

DCHS centered racial justice and equity in the FY 2024 budgetary decision-making process by asking staff and leadership to consider systemic racial disparities when developing program offers.

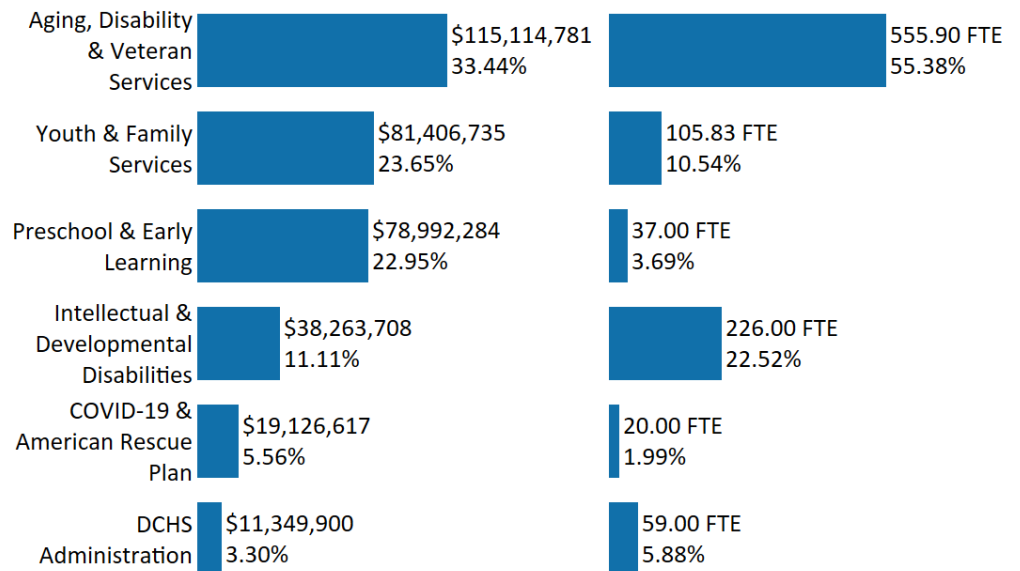
The DCHS Equity and Inclusion Manager also reviewed program offers using several equity tools consisting of specific and direct questions to guide the review process, including:

- What kinds of data are available, and how is data being used to inform our decision-making?
- What kinds of community engagement, particularly with BIPOC communities, were utilized in the creation and/or review of the program offer or proposal?
- Who will benefit and/or who will be adversely impacted by our decision?

### Budget by Division

Division Name	FY 2024 General Fund	Other Funds	Total Division Cost	Total FTE
Administration	\$11,349,900	\$0	\$11,349,900	59.00
Intellectual and Developmental Disabilities	4,343,363	33,920,345	38,263,708	226.00
Aging, Disability, and Veterans Services	13,804,644	101,310,137	115,114,781	555.90
Youth and Family Services	39,999,531	41,407,204	81,406,735	105.82
Preschool and Early Learning	0	354,279,231	354,279,231	37.00
COVID-19 & American Rescue Plan	0	19,126,617	19,126,617	20.00
<b>Total County Human Services</b>	<b>\$69,497,438</b>	<b>\$550,043,534</b>	<b>\$619,540,972</b>	<b>1,003.72</b>

\*The table above includes cash transfers, contingencies, and unappropriated balances.



\*The chart above does not include cash transfers, contingencies or unappropriated balances.

## Administration

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 high-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 900 departmental FTE 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

**Strategic Planning:** The DCHS Leadership Team is continuing to think collectively and creatively about big-picture strategies that can bring DCHS closer to our North Star. We are rethinking the Five Oak Administrative space to become an inclusive and equity informed space. We hosted a Design Justice workshop in March 2023 to start the project. We held a budget strategy session as a team to explore funding and program offers by impact and applying the North Star goal of becoming 10x better and empowering our consumers to create the lives they want for themselves.

**Legislative Advocacy:** The DCHS Leadership Team is continuing to strengthen our department's relationships with local, state and federal legislators – focusing on critical funding and policy changes. We hired a Project Manager who is our legislative lead and our focus is on housing and homelessness prevention, caseload reductions, supports for older adults and basic income legislation.

**Business Services:** Improvement to the large request for proposals (RFPs) for YFS and ADVSD to ensure a timely and complete process that centers equity. Went through a process improvement around contract exemption requests to ensure this only happens when necessary and created a communication plan to ensure that executive leaders are aware of these requests well in advance.

**Employer of Choice:** The DCHS Leadership Team has taken the employee survey feedback and pulled out themes that will be shared with the entire Department and we are working on improvement strategies and goals. We kicked this off with an All Staff meeting in March 2023 to share the feedback and first stage goals with the entire DCHS team.

### Intellectual and Developmental Disabilities Services

The Intellectual and Developmental Disabilities Services Division (IDDSD) serves over 6,850 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 (I/DD) guides our services and includes the following domains: emotional, material, and physical well-being, interpersonal relations, social inclusion, personal development, self-determination, and rights. IDDSD provides case management services supporting these domains and directly links clients and families to community resources and Medicaid-funded residential, employment, in-home and non-County brokerage case management services.

Additionally, the division reviews intake and eligibility referrals and provides abuse investigation services to all clients who experience I/DD. Despite the social, health, and housing impacts of the COVID pandemic, the division has maintained a high (80%) overall service satisfaction rating among clients, and a high (91%) overall job satisfaction rating among division staff. Staff are actively working on the objectives identified in the 2022-2025 strategic plan and State service equity requirements. These efforts will continue to improve equitable service delivery, workforce development, and resource management as the division also prepares for the 2023 State audit.

### Significant Changes

The FY 2024 budget expands services in response to increased client and provider needs and a growing client base. The division grew by 47.20 FTE during FY 2023, and this increase led to service stabilization and innovation. Service stabilization efforts include the expansion of the Abuse Investigation team and significant reduction of the abuse investigation backlog. Stabilization efforts also include the expansion of the Plan of Care team, who achieved 100% adherence to state billing system timelines, and expansion of Service Coordination teams, with a special focus on hiring staff with the knowledge, skills, and abilities (KSAs) to serve our diverse population and reduce caseloads. Innovations include continued use of telework, technology training for personal support workers, and increased distribution of supplemental housing assistance. The division has also launched Project SEARCH, a full immersion job internship for people with I/DD. The goal of Project SEARCH is competitive employment that pays a living wage and reduces economic disparity. Advocacy for new and more equitable practices has resulted in the adoption of a statewide rule change that grants I/DD services to all individuals, regardless of citizenship status, and an ARPA CME Innovation Grant for two positions to expand and train the child foster care, child residential, and adult residential provider network. These positions will help to sustain the gains that have been made to increase the number of qualified residential providers in the County and decrease the need for temporary lodging or placements far from a client's community, family and support network. Finally, the division will move from the West Gresham Plaza to the Multnomah County East Building. This move will reduce the division's carbon footprint and expenses, and increase office accessibility for clients and staff.

## Aging, Disability and Veterans Services

Multnomah County has about 810,242 residents – nearly a fifth of the state population. Over 155,170 (19.2%) of residents are 60 and older. There are over 93,564 people 18 and older with disabilities, and about 35,054 Veterans living in the county. These populations are served by the Aging, Disability and Veterans Services Division (ADVSD). The ADVSD service system helps people achieve independence, health, safety, and quality of life.

ADVSD is the Area Agency on Aging for the county. ADVSD offers access to services for older adults, people with disabilities, and Veterans at five senior centers, eight enhancing equity providers, five Medicaid offices, and the central downtown Portland location. The division serves five main areas: Community Services (includes a Veterans Services unit), Adult Care Homes, Long Term Services and Supports, Adult Protective Services, and Public Guardian and Conservator.

A 24-hour call center is a part of the division's seamless entry to services. Twenty-nine programs help over 50,000 receiving Medicaid long-term services and supports, and over 7,300 receiving community social support. ADVSD is a leader in the work toward racial justice both in the county and in our systems. The division strives to weave Multnomah County's Leading with Race pledge and the Equity and Empowerment Lens tools into its work. The analysis and goals give focus to people who have been marginalized based on their race, gender, sexual orientation, ability, age, and other forms of oppression.

## Significant Changes

### **Medicaid funding - Oregon Project Independence and Family Caregiver Assistance Program (1115 Waiver)** - Will focus on two initiatives:

- Expand Oregon Project Independence (OPI) to serve more older adults and people with physical disabilities who require assistance with Activities of Daily Living, but who are not accessing Medicaid long-term services and supports.
- Create a Family Caregiver Assistance Program (FCAP), offering a limited, monthly benefit to older adults and people with physical disabilities who receive support for Activities of Daily Living from family or other unpaid caregivers.

**Mobile Outreach Team and Housing Navigator** - The Homeless Mobile Intake Team has been serving consumers since November 1st, 2022 and consists of 5 positions within the Transition and Diversion Program:

- 4 Case Managers (3 KSA positions: Hispanic / Latino language KSA position, a Black / African American KSA culturally specific KSA position and a Alaska Native / American Indian cultural KSA position) and 1 Case Manager Assistant.
- ADVSD is receiving Medicaid funding for a housing navigator to provide support to Long-Term Services and Supports consumers.

### **Community Services RFPQ Process**

ADVSD will be opening up a procurement process to contract with community organizations that provide case management and other services to older adults, family caregivers and adults with disabilities. ADVSD has hired a project manager to assist with the implementation of an RFPQ for Community Services to renew \$7.2 million in annual contract funding.

### Youth and Family Services

The Youth & Family Services (YFS) Division manages over 40 programs and initiatives that focus on two major impact areas: educational success and economic stability for families. Within those impact areas, we have five core system and policy areas that represent our work: Energy Services, Housing Stability, 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. In FY 2022: 175 sexual assault survivors received specialized support; 3,219,624 meals were provided to children and families through SUN distribution sites; 15,590 youth engaged in services through SUN Community Schools; 25,513 households received energy bill payment support; 509 people received culturally specific mental health or addiction services through Bienestar de la Familia; and 96% of youth exiting a housing stabilization program were able to identify having at least one stable adult in their lives.

Over 83% of YFS funding is contracted out to partner agencies who work in the community, including a wide network of culturally specific organizations. Ensuring we provide quality support to the contractors and their direct service staff is a high priority for the Division. YFS also actively partners with local jurisdictions, such as city governments, Home Forward, the Joint Office for Homeless Services, school districts, and other departments within the County.

### Significant Changes

In FY 2024, YFS will continue to support the community with flexible and meaningful services – both our core functions and our continued response work related to the economic and social impacts of the pandemic in our community.

Supporting BIPOC community members to remain stably housed continues to be a priority for YFS. The overall reduction in rent assistance resources will require a shifting focus from an emergency based system to one that provides more ongoing longer term support for tenants struggling to pay rent. We will do this with eviction prevention/rent assistance programs, continue working with partners to deepen our alignment, and maintain the strong programs we support with community non-profit organizations and those internal to YFS.

Strengthening the YFS infrastructure will be an area of focus in FY 2024; new administrative positions allow the Division to more deeply support the organization as a whole, and our partners. YFS serves as a pilot division for innovative programming, and we often manage new procurements and support contractors new to the County. These positions build our Division capacity to respond to these needs and create more balance in existing workloads.

## Preschool and Early Learning

## Significant Changes

Voters in Multnomah County overwhelmingly supported “Preschool for All” on November 3rd, 2020, with 64 percent of voters approving the measure to extend early education to children across the County. Measure 26-214 directed the Department of County Human Services to administer the program and DCHS established the Preschool & Early Learning Division in January 2021.

Multnomah County’s Preschool for All connects 3 and 4 year olds with free, inclusive, culturally affirming preschool experiences. All families in Multnomah County are eligible to apply and families who currently have the least access to preschool are prioritized. The program will grow over time, increasing the number of children and families that it serves each year until there is access to publicly-funded preschool available to all interested families in 2030. Preschool for All exceeded the first year goal of 500 slots in FY 2023 by offering over 700 slots at 47 different locations.

Preschool & Early Learning Division staff will help create the foundation for Preschool for All’s success, including the systems, processes and partnerships necessary to increase the number of quality, inclusive, and culturally affirming preschool slots in Multnomah County.

Multnomah County’s Preschool for All faces major challenges as it grows the number of preschool slots in the community. This budget includes investments to grow the child care workforce, strengthen preschool programs, provide access to early childhood mental health, stabilize infant and toddler care, create more inclusive preschool environments, and increase the number of early childhood facilities. These investments are essential to achieve the initiative’s long-term goals. Preschool for All (PFA) anticipated tax revenue for FY 2024 is \$152.6 million dollars. Significant changes in FY 2024 include:

- Increased funding for slots at PFA Pilot Sites in order to offer over 1,400 slots in FY 2024. This exceeds the year 2 goal of 1,100 slots. Pilot Sites are partnering with the Preschool and Early Learning Division to refine and strengthen the program model, including support to stabilize infant and toddler care and include children with disabilities (25205).
- The addition of 14.00 FTE (this includes 6.00 FTE that were added mid FY 2023). The new team members will include staff working on the family application system, contracting, inclusion supports, data and evaluation, and communications (25200A, 25201).
- Continued investment in fiscal stability strategies that will protect the program from the volatility of personal income tax as a revenue source and allow the Preschool & Early Learning Division to maintain consistent services for Multnomah County children and families in the future. This includes dollars that will be added to Preschool for All contingency and reserve funds (25200B) as well as dollars for revenue smoothing (25200C).
- A decrease in tax collection costs. The City of Portland collects the Preschool for All tax. FY 2024 includes a planned decrease in expenses, because the start-up costs for implementing the new tax collection ended in FY 2023 (72052B - Dept. of County Management).

### 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 2024 General Fund	Other Funds	Total Cost	FTE
<b>Administration</b>					
25000	DCHS Director's Office	\$4,497,334	\$0	\$4,497,334	22.00
25000B	DCHS Economic Justice Project	150,000	0	150,000	1.00
25001	DCHS Human Resources	1,965,919	0	1,965,919	10.00
25002	DCHS Business Services	4,736,647	0	4,736,647	26.00
<b>Intellectual and Developmental Disabilities Services</b>					
25010	IDDS Administration & Support	1,028,812	3,214,835	4,243,647	24.00
25011	IDDS Budget and Operations	387,159	7,211,926	7,599,085	38.00
25012	IDDS Services for Adults	1,514,019	8,253,541	9,767,560	62.00
25013	IDDS Services for Children and Young Adults	1,393,247	8,395,170	9,788,417	62.00
25014	IDDS Abuse Investigations	4,290	4,400,053	4,404,343	26.00
25016	IDDS Eligibility & Intake Services	15,836	2,444,820	2,460,656	14.00
<b>Aging, Disability and Veterans Services</b>					
25022	ADVSD Adult Care Home Program	93,645	5,958,703	6,052,348	32.00
25023	ADVSD Long Term Services & Supports (Medicaid)	2,664,911	47,353,272	50,018,183	313.00
25024	ADVSD Adult Protective Services	525,222	9,780,860	10,306,082	57.35
25025	ADVSD Veterans Services	760,367	458,590	1,218,957	8.00
25026	ADVSD Public Guardian/Conservator	1,928,137	0	1,928,137	11.00
25027	ADVSD Administration	888,725	4,527,330	5,416,055	15.00
25028	ADVSD Multi-Disciplinary Team	864,781	878,639	1,743,420	5.65
25029	ADVSD Transition & Diversion	336,352	5,852,152	6,188,504	41.00
25032	ADVSD Outreach, Information & Referral	1,417,800	3,194,492	4,612,292	22.40
25032B	Regional Health and Human Services Contact Center	0	1,300,000	1,300,000	12.50
25033	ADVSD Nutrition Program	728,437	1,686,948	2,415,385	0.50
25034	ADVSD Health Promotion	103,201	482,818	586,019	3.00
25035	ADVSD Case Management & In-Home Services (non-Medicaid)	1,718,944	12,162,120	13,881,064	10.69
25036	ADVSD Safety Net Program	701,509	159,150	860,659	2.00
25036B	ADVSD Older Adults in Home Care Needs	75,000	0	75,000	0.00
25037	ADVSD Transportation Services	149,122	2,085,990	2,235,112	1.38



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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Ageing, Disability and Veterans Services (cont.)</b>					
25038	ADVSD Advocacy & Community Program Operations	655,362	5,041,936	5,697,298	19.43
25039	ADVSD Family Caregiver Program	193,129	387,137	580,266	1.00
<b>Youth and Family Services</b>					
25041	YFS - Domestic Violence Crisis Services	452,856	0	452,856	0.00
25044	YFS - Domestic and Sexual Violence Coordination	780,966	120,188	901,154	4.23
25046	YFS - Domestic Violence Legal Services	216,401	35,000	251,401	0.00
25047	YFS - Domestic Violence Crisis Response Unit	1,278,982	348,827	1,627,809	11.00
25048	YFS - Culturally Specific and Underserved Domestic & Sexual Violence Services	837,198	0	837,198	0.00
25049	YFS - Sexual Assault Services	862,978	0	862,978	1.00
25050	YFS - Gateway Center	716,295	1,128,048	1,844,343	7.00
25118A	YFS - Youth & Family Services Administration	2,541,664	0	2,541,664	14.00
25118B	YFS - Infrastructure - Expand Staff Capacity	287,244	0	287,244	2.00
25119	YFS - Energy Assistance	0	16,917,369	16,917,369	10.00
25121A	YFS - Weatherization	0	7,531,039	7,531,039	12.00
25121B	YFS - Woodstove Replacement	244,283	0	244,283	0.00
25130	YFS - Family Unification Program	627,725	0	627,725	0.00
25131A	YFS - Legal Services & Supports	475,552	0	475,552	0.00
25131B	YFS - Peer Navigators	550,517	0	550,517	0.00
25131C	YFS - Eviction Prevention Support	411,428	0	411,428	0.00
25131D	YFS - Expungement and Legal Services Days	262,500	0	262,500	0.00
25131E	YFS - Expungement and Legal Services Expansion	140,000	0	140,000	0.00
25133A	YFS - Housing Stabilization for Vulnerable Populations (HSVP)	1,385,944	2,986,607	4,372,551	1.00
25133B	YFS - Housing Stability Team: 1.00 FTE Eviction Prevention Specialist	151,437	0	151,437	1.00
25133C	YFS - Rent Assistance	0	5,474,036	5,474,036	6.00
25134	YFS - Fair Housing Testing	121,113	0	121,113	0.00
25135	YFS - Sex Trafficked Youth Services	673,681	0	673,681	0.00
25135B	YFS - New Day Collaborative Backfill	334,800	0	334,800	0.00
25136	YFS - Culturally Specific Navigation Services for Immigrant Families	291,709	0	291,709	0.00

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Youth and Family Services (cont.)</b>					
25137	YFS - Successful Families	2,747,449	0	2,747,449	1.00
25138	YFS - Youth Stability & Homelessness Prevention Services	1,408,844	46,651	1,455,495	0.00
25139	YFS - Multnomah Stability Initiative (MSI)	3,013,408	1,167,557	4,180,965	2.00
25140	YFS - Community Development	146,553	457,620	604,173	1.00
25141	YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach	169,096	149,425	318,521	2.00
25145A	YFS - SUN Community Schools	8,321,995	2,816,335	11,138,330	4.00
25145B	YFS - Maintain 4 Existing SUN Community School Sites	275,644	0	275,644	0.00
25147A	YFS - Child & Family Hunger Relief	477,071	0	477,071	1.00
25147B	YFS - Summer Meal Expansion	29,829	0	29,829	0.00
25149	YFS - SUN Youth Advocacy Program	2,920,508	200,000	3,120,508	0.00
25151	YFS - SUN Parent & Child Development Services	1,837,704	454,923	2,292,627	0.50
25152	YFS - Early Learning Family Engagement and Kindergarten Transition	426,616	1,047,800	1,474,416	1.00
25155	YFS - Sexual & Gender Minority Youth Services	363,525	0	363,525	0.00
25156A	YFS - Bienestar Social Services	2,111,951	525,779	2,637,730	12.60
25156B	YFS - Bienestar Case Manager Restoration	129,037	0	129,037	1.00
25160A	YFS - Data and Evaluation Services	1,894,799	0	1,894,799	10.50
25160B	YFS - SUN Database Cost Increase	80,229	0	80,229	0.00
<b>Preschool and Early Learning</b>					
25200A	PEL - Administration & System Support	0	1,414,409	1,414,409	5.00
25200B	PEL - Contingency and Reserves	0	38,148,000	38,148,000	0.00
25200C	PEL - Revenue Smoothing	0	237,138,947	237,138,947	0.00
25201	PEL - Program Development & System Support	0	6,061,815	6,061,815	32.00
25202	PEL - Preschool Access: Family & Provider Navigation	0	1,460,000	1,460,000	0.00
25203	PEL - Preschool Infrastructure Capacity Building	0	17,800,000	17,800,000	0.00
25204	PEL - Program Quality: Coaching & Provider Supports	0	10,664,000	10,664,000	0.00
25205	PEL - Preschool for All Pilot Sites	0	36,592,060	36,592,060	0.00
25206	PEL - Early Educator Workforce Development	0	5,000,000	5,000,000	0.00

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>COVID-19 &amp; American Rescue Plan</b>					
25399B	ARP - Multnomah Mothers' Trust Project (MMTP)	0	1,350,000	1,350,000	1.00
25399C	ARP - Domestic Violence Services	0	813,784	813,784	2.00
25399E	ARP - SUN Community Schools: Family Resource Navigators	0	4,443,455	4,443,455	0.00
25399S	ARP - YFS Food Security / Pantry Enhancement	0	179,235	179,235	0.00
25490B	ARP - Emergency Rent Assistance	0	8,078,059	8,078,059	0.00
25490C	ARP - YFS Rent Assistance Team Staffing Capacity	0	1,921,941	1,921,941	17.00
25491	COVID-19 Energy & Housing Services	0	1,762,843	1,762,843	0.00
25492A	COVID-19 ADVSD OAA ARP	0	<u>577,300</u>	<u>577,300</u>	<u>0.00</u>
<b>Total County Human Services</b>		<b>\$69,497,438</b>	<b>\$550,043,534</b>	<b>\$619,540,972</b>	<b>1,003.72</b>

\*The table above includes cash transfers, contingencies, and unappropriated balances.

**Department:** County Human Services      **Program Contact:** Mohammad Bader  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 30407A  
**Program Characteristics:**

### Executive Summary

The Director's Office of the Department of County Human Services supports the work of four divisions to ensure that every person, at every stage of life has equitable opportunities to thrive. The Director's Office uses a racial justice and equity lens to: develop and lead the department's mission, policies, communications and strategic initiatives; ensure quality of services; provide financial management; ensure a skilled workforce that reflects the community; provide protection for survivors of domestic and sexual violence; and support the divisions' efforts to provide equitable, high quality, and innovative services to the communities we serve.

### Program Description

**ISSUE:** The Department of County Human Services is made up of four divisions and one office tasked with providing human services to diverse communities. 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 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 consistent equity and inclusion to HR recruitment, compensation and retention strategies, as well as coordinate the efforts of the Department's Equity and Inclusion Manager and Diversity, Equity, and Social Justice Committee (DESJC). Director's office activities also include: a) providing department-wide COVID-19 response and recovery supports to the community; b) ensuring DCHS meets its financial and regulatory requirements through budget development, fiscal compliance, data collections, and reporting; c) Department-wide performance management and sharing of systems improvement tools and techniques; d) identifying new approaches to DCHS work and the application of research for emerging and best practices and solutions; and e) communication and coordination with elected officials, partners and participants by using multiple methods to engage with the community, including online tools. In FY 2022 the Director's Office also assumed oversight of the Domestic and Sexual Violence Community Services Office, elevating the needs and the voices of survivors of domestic and sexual violence.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of DCHS web page views*	301,806	850,000	387,117	450,000
Outcome	Percent of visitors who were able to find what they were looking for on the DCHS website**	48.1%	95%	69.1%	85%
Outcome	Percent of employees completing Stay Interviews***	N/A	N/A	1%	5%

### Performance Measures Descriptions

\*Number of DCHS web page views are calculated using Google Analytics. Numbers exclude job postings and error pages.

\*\*Percent of visitors who were able to find what they were looking for on the DCHS website is based on survey data from "was this page helpful?" surveys placed throughout the DCHS website.

\*\*\*Removed Number of formal communications to employees as a measure. Added new equity measure: Percent of employees completing Stay Interviews.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$3,435,128	\$0	\$3,658,602	\$0
Contractual Services	\$181,948	\$0	\$190,103	\$0
Materials & Supplies	\$82,566	\$0	\$187,966	\$0
Internal Services	\$573,739	\$0	\$460,663	\$0
<b>Total GF/non-GF</b>	<b>\$4,273,381</b>	<b>\$0</b>	<b>\$4,497,334</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,273,381</b>		<b>\$4,497,334</b>	
<b>Program FTE</b>	21.00	1.00	21.00	1.00

Program Revenues				
Other / Miscellaneous	\$3,252,702	\$0	\$2,123,957	\$0
<b>Total Revenue</b>	<b>\$3,252,702</b>	<b>\$0</b>	<b>\$2,123,957</b>	<b>\$0</b>

Explanation of Revenues

\$2,123,957 - County General Fund Department Indirect: Based on FY 2024 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2023: 25000A DCHS Director's Office

The 1.00 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30407A for the associated costs and program information.

**Department:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** New

**Program Offer Stage:** Adopted

**Related Programs:** 25399B, 50032B

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

**Executive Summary**

To create a county where everyone has the opportunity to thrive, we must embrace the goal of creating economic prosperity and generational wealth; and change the policies and systems that stand in the way - with a focus on those our systems have intentionally left out and left behind: Black, Indigenous, and other People of Color.

This offer invests in 1.00 FTE Research Evaluation Analyst, Sr. to continue the Economic Justice Project.

**Program Description**

In the FY 2023 budget, the Board approved funding for a staff position to create an Economic Justice Blueprint for the County. The blueprint provided a menu of potential approaches for advancing economic justice for the residents of Multnomah County. This offer continues funding of that work, with a goal of exploring opportunities presented in the blueprint, as well as other ideas, including ideas that build off existing County investments. Ideas will focus on innovative and comprehensive approaches that support economic stability, build financial assets, and grow generational wealth by removing barriers; focusing on upstream intervention; and, centering racial justice and equity.

This staff position will continue to conduct community verified research and coordinate design processes meant to educate and engage with a wide variety of community members.

The position will work with the Chair and Commissioners' offices, County departments, community members, and partner organizations on ideas and potential implementation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Hire 1.00 FTE Research & Evaluation Analyst, Sr.	N/A	N/A	N/A	1
Outcome	Deliver briefing on produced outcomes to BCC, as work is completed.	N/A	N/A	N/A	1

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$148,346	\$0
Materials & Supplies	\$0	\$0	\$1,654	\$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>	
<b>Program FTE</b>	0.00	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:

This program adds 1.00 FTE Research Evaluation Analyst Senior (6087).

**Department:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Support

**Program Offer Stage:** Adopted

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

DCHS Human Resources supports the quality of life, professional development, and education of employees, for 960 budgeted positions in FY 2024. 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 incorporating equity and inclusion best practices for hiring, training and supporting staff, and performance management.

**Program Description**

**ISSUE:** There are 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:** 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 staffing needs.

**ACTIVITIES:** Consultation to managers, supervisors, and employees while working with union representation and Central/County HR and County counsel when necessary. Efforts in FY 2024 will support the workforce in a hybrid environment, equity (including supporting the department's Workforce Equity Strategic Plan), professional development, education, trauma informed practices, and compliance, while supporting Department-wide goals. Be a resource and support for using the ERP while maintaining service levels. HR continues to support department process improvement projects related to equity: 1) Creating a comprehensive onboarding and training practice throughout DCHS that supports staff to build skills by centering a relational approach. This project is designed to support a welcoming and comprehensive onboarding experience and support and retain current employees by focusing on employee and manager training and development; 2) Interview panel selection and preparation. Seeks to ensure diversity and training of panel members to ensure equitable assessment of candidates; 3) Workforce Equity - Recruiting and Retention. HR supports this project led by the Director's Office, addressing identified disparities in the first year of employment, and identifying the sources of perceived disparities in access to positions and promotions. Improvements of processes for selection/hiring and support during the initial trial service period. HR will pilot a stay interview process and Peer Partner program. Provide in-person and virtual New Employee Orientations for support on questions employees may have regarding time entry, recruitment, general Workday support, clarification on rules, and general information sharing.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Recruitments	342	400	437	400
Outcome	Placement/reassignment of employees impacted by reduced staffing	0%	3%	4%	3%
Outcome	Percent of DCHS employees who identify as a person of color	45.6%	44.0%	44.0%	44.0%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,649,617	\$0	\$1,735,519	\$0
Contractual Services	\$3,000	\$0	\$3,000	\$0
Materials & Supplies	\$9,906	\$0	\$23,760	\$0
Internal Services	\$222,707	\$0	\$203,640	\$0
<b>Total GF/non-GF</b>	<b>\$1,885,230</b>	<b>\$0</b>	<b>\$1,965,919</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,885,230</b>		<b>\$1,965,919</b>	
<b>Program FTE</b>	10.00	0.00	10.00	0.00

Program Revenues				
Other / Miscellaneous	\$1,641,893	\$0	\$1,709,921	\$0
<b>Total Revenue</b>	<b>\$1,641,893</b>	<b>\$0</b>	<b>\$1,709,921</b>	<b>\$0</b>

Explanation of Revenues

\$1,709,921 - County General Fund Department Indirect: Based on FY 2024 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2023: 25001 DCHS Human Resources

**Department:** County Human Services

**Program Contact:** Robert Stoll

**Program Offer Type:** Support

**Program Offer Stage:** 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. Racial equity as well as alignment with the department's Workforce Equity Strategic Plan is a key focus in all our work.

**Program Description**

More than 40% of the total funds in the Department are contracted to community-based providers for services to the populations served by DCHS. DCHS includes culturally specific and culturally responsive requirements in the procurement process. This process allows DCHS to contract with a diverse pool of suppliers who are able to provide culturally specific and responsive services to clients that are tailored to specific populations. This process assists the department in ensuring that clients are comfortable accessing services and that we are not causing additional trauma to marginalized and vulnerable populations. 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. 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. 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; problem solving and financial risk mitigation. We work across the County with other Departments and agencies. We serve as liaisons between the department and internal service providers such as County Finance, Central Budget, County Facilities, Fleet, Records, IT, Central Purchasing, Risk Management and County Attorney.

DCHS Business Services Management Team offers mentorship, WOC opportunities, cross-training and supporting education for staff with aspirations for promotion and those who have financial and time commitment issues. DCHS also offers remote working opportunities and varied schedules to help staff maintain good work/life balance. The DCHS Business Services Management Team also cultivates strong team building activities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percent of invoices paid in 30 days or less (*estimated based on FY2021 actual)	92%	90%	93%	93%
Outcome	*Percent of annual contracts executed prior to start date	95%	93%	95%	94%
Output	Number of anticipated contract actions including new contracts, amendments and purchase orders	350	350	365	365

**Performance Measures Descriptions**

\* Includes Preschool and Early Learning Division.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$3,803,781	\$0	\$4,122,438	\$0
Contractual Services	\$40,000	\$0	\$40,000	\$0
Materials & Supplies	\$31,776	\$0	\$52,684	\$0
Internal Services	\$577,847	\$0	\$521,525	\$0
<b>Total GF/non-GF</b>	<b>\$4,453,404</b>	<b>\$0</b>	<b>\$4,736,647</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,453,404</b>		<b>\$4,736,647</b>	
<b>Program FTE</b>	26.00	0.00	26.00	0.00

Program Revenues				
Other / Miscellaneous	\$3,822,421	\$0	\$4,117,366	\$0
<b>Total Revenue</b>	<b>\$3,822,421</b>	<b>\$0</b>	<b>\$4,117,366</b>	<b>\$0</b>

Explanation of Revenues

\$4,117,366 - County General Fund Department Indirect: Based on FY 2024 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2023: 25002 DCHS Business Services

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

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

### Executive Summary

The IDSD Administration team provides oversight to the division and ensures service delivery. It increases quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabilities that a person is born with, or that develop during childhood. The Administration team focuses on the accurate and timely delivery of services, and generates revenue for the division through billable reviews and submissions to the State. It trains and retains case managers who provide culturally and linguistically specific service coordination in support of independent living. The Administration team leads the division in continuous quality improvement, advocacy at the local and state levels, collaborations with partner agencies, and examination of service equity data.

### Program Description

**ISSUE:** IDSD is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the state. The IDSD Administration team provides oversight of staff, quality assurance, revenue generation, data validity and access, and system improvement. These functions are necessary to maintain Medicaid authority status. This team maximizes client services, maintains service and staffing levels, and provides leadership to the division.

**PROGRAM GOALS:** This team implements business strategies related to system improvement and staff support. These strategies increase the delivery and accessibility of services that improve quality of life for individuals with intellectual and developmental disabilities. The goals of the Administration team include the following. First, optimize service capacity through staff training and development, staff retention, data accuracy and data access. This demonstrates public stewardship and accountability. Second, deliver quality, timely, culturally appropriate and Medicaid compliant services. These services support the health, safety, independence and inclusion of clients. Third, improve policies and remove barriers to access by advocating for clients. Finally, increase resources for clients through collaborative partnerships.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to four general areas of activity. These areas are: coordination, quality, advocacy, and collaboration. Coordination efforts include staff training and development, office management, service database updates, data quality checks, data access tool development, and workflow innovations. Quality efforts include the creation of a strategic plan, metrics, dashboards, and quality improvement cycles. Data informs business improvements to reduce service inequities experienced by historically marginalized clients. Quality efforts also include the monitoring of the state inter-agency agreement. The team maintains quality assurance, and integrates customer feedback into practice. Advocacy includes continuous dialogue with state and local agencies to reduce service barriers. Collaboration efforts include work with a variety of community-based and culturally specific organizations. These collaborations increase access to equitable and inclusive service.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of client records audited annually for Medicaid compliance. <sup>1</sup>	360	360	360	N/A
Outcome	Percent of federally-funded plan waivers in compliance for re-authorization. <sup>2</sup>	57%	75%	50%	75%
Outcome	Percent of survey respondents satisfied with the services they receive.	80%	90%	80%	90%
Output	Number of indirect monitoring reviews to confirm delivered services and generate division revenue. <sup>3</sup>	6,559	N/A	6,480	6,480

### Performance Measures Descriptions

<sup>1</sup>This measure will be retired in FY24. The target has been consistently reached with adequate staffing.

<sup>2</sup>Staff turnover, delays in hiring, and the long training timeline for new staff led to a lower percentage of waiver compliance in FY22 and FY23. The new trainer position will address the need to achieve compliance in this area.

<sup>3</sup>New Metric for FY24. Two Quality Assurance Case Managers are each required to complete at least 270 indirect reviews per month at a reimbursement rate of \$412.20 per review. Reviews generated \$2,703,619.80 in revenue for FY22.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$898,117	\$2,026,272	\$625,081	\$2,559,307
Contractual Services	\$282,592	\$0	\$282,592	\$0
Materials & Supplies	\$152,723	\$22,577	\$27,955	\$76,025
Internal Services	\$85,091	\$572,508	\$93,184	\$579,503
<b>Total GF/non-GF</b>	<b>\$1,418,523</b>	<b>\$2,621,357</b>	<b>\$1,028,812</b>	<b>\$3,214,835</b>
<b>Program Total:</b>	<b>\$4,039,880</b>		<b>\$4,243,647</b>	
<b>Program FTE</b>	7.50	16.50	4.50	19.50

Program Revenues				
Intergovernmental	\$0	\$2,621,357	\$0	\$2,778,695
Beginning Working Capital	\$0	\$0	\$0	\$436,140
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,621,357</b>	<b>\$0</b>	<b>\$3,214,835</b>

Explanation of Revenues

This program generates \$315,307 in indirect revenues.  
 \$2,778,695- State Mental Health Grant Case Management (Federal)  
 \$436,140 - Beginning Working Capital from State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25010 IDDSD Administration & Support

IDDSD will use \$436,140 in one-time-only State funding from the 21-23 biennium to backfill reductions to the General Fund and 23-25 State biennium funding to maintain current service levels for one year. This includes moving 3.00 FTE from the General Fund to Beginning Working Capital.

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Support

**Program Offer Stage:** Adopted

**Related Programs:** 30407A

**Program Characteristics:**
**Executive Summary**

The Budget and Operations team maintains regulatory compliance for mandated functions. These functions support quality of life for individuals with intellectual and developmental disabilities, and help clients live independent and healthy lives in the community. This team facilitates the delivery and payment of client-chosen services, ensuring the services meet compliance rules and regulations. This includes assistance with crisis housing services, such as rent assistance. This team also responds to changes in State service requirements to maximize revenue. This team uses targeted universalism to equitably support service providers from historically underserved communities. For example, prioritizing technical support to providers who speak a primary language other than English.

**Program Description**

**ISSUE:** IDSD Budget and Operations must meet the increasing demand for services. The team ensures that quality business and staffing practices adapt to change, while focusing on the need for timely service payments to ensure client health and safety.

**PROGRAM GOALS:** The goals of Budget and Operations include the following. First, increase the capacity of community based residential, personal support and employment providers. Do this by ensuring timely contracting, training, certification and payment. Second, increase equitable access to services by processing service requests based on client choice and needs. This also includes financial support for emergency and long term housing, with a focus on ensuring BIPOC clients have equitable access to housing funds. Third, implement policies, procedures, and training to maintain regulatory compliance at the County, State and Federal level. Finally, ensure fiscal accountability through budgeting and revenue tracking.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to four general areas of activity. These areas are: capacity, access, compliance, and budgeting. Capacity efforts increase the network of residential, employment, and direct service providers. These efforts include technical support, timesheet approval, credentialing, certification, recruitment, training, and contracts. There is also a partnership with the Adult Care Home Program to expand the number of certified homes for clients. Access efforts include the administration of funded services. These services include: housing stability, 24-hour residential care, supported living, employment, transportation, and in-home support. Compliance efforts include the determination and administration of regulatory requirements. Administration of these requirements requires provider service agreements, public procurement, authorization of provider services, ensuring compliance of changes to provider payment amounts and service types, and administrative procedures. Finally, budgeting efforts include budget review, report and approval. This team works to settle contracts with the State. It also tracks budget costs for employees and client services, and ensures all program services are in place each biennium.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of direct service provider timesheets processed annually for clients receiving in-home services. <sup>1</sup>	25,775	35,000	25,850	26,000
Outcome	Percent of clients referred who are accepted into an employment setting. <sup>2</sup>	76%	90%	80%	90%
Outcome	Percent of provider payment lines authorized and built in state billing system within 10 business days.	100%	70%	100%	100%
Outcome	Percent of clients who are stably housed 12 months after receiving housing funds.	91%	90%	90%	90%

**Performance Measures Descriptions**

<sup>1</sup>The FY23 budgeted amount of 35,000 reflects an old model of gathering timesheet data. New innovation and technology has adapted the workflow, leading to more accurate estimates. For example, the old model included questions or issues in addition to timesheets, and the new workflow filters those out.

<sup>2</sup>Although the percentage decreased, more clients were referred to employment settings in FY22 than the previous year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$274,915	\$4,276,654	\$154,403	\$5,034,776
Contractual Services	\$162,621	\$731,543	\$162,621	\$727,508
Materials & Supplies	\$3,149	\$47,876	\$12,380	\$94,854
Internal Services	\$27,722	\$1,241,387	\$57,755	\$1,354,788
<b>Total GF/non-GF</b>	<b>\$468,407</b>	<b>\$6,297,460</b>	<b>\$387,159</b>	<b>\$7,211,926</b>
<b>Program Total:</b>	<b>\$6,765,867</b>		<b>\$7,599,085</b>	
<b>Program FTE</b>	2.00	36.00	1.00	37.00

Program Revenues				
Intergovernmental	\$0	\$6,297,460	\$0	\$6,496,133
Beginning Working Capital	\$0	\$0	\$0	\$715,793
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,297,460</b>	<b>\$0</b>	<b>\$7,211,926</b>

Explanation of Revenues

This program generates \$680,982 in indirect revenues.  
 \$4,313,926 - State Mental Health Grant Case Management (Federal)  
 \$1,035,885 - State Mental Health Grant Local Admin (Federal)  
 \$715,793 - Beginning Working Capital from State Mental Health Grant Case Management (Federal)  
 \$468,814 - State Mental Health Grant Special Projects (Federal)  
 \$202,500 - State Mental Health Grant Self Directed Individual/Family (Federal)  
 \$180,000 - State Mental Health Grant Long Term Support for Children (Federal)  
 \$100,000 - State Mental Health Grant Family Support Services (Federal)  
 \$82,508 - Partners for Hunger-Free Oregon (Local)  
 \$57,500 - HAP Housing Program (Local)  
 \$45,000 - State Mental Health Grant Ancillary Service (Federal)  
 \$10,000 - State Mental Health Grant Room and Board State General Fund (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25011 IDSD Budget and Operations

IDSD will use \$715,793 in one-time-only State funding from the 21-23 biennium to backfill reductions to the General Fund and 23-25 State biennium funding to maintain current service levels for one year. This includes moving 1.00 FTE from the General Fund as well as 5.00 FTE from State funding to Beginning Working Capital.

1.00 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30407A for the associated costs and program information.

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The IDSD Adult Services team supports quality of life for individuals with intellectual and developmental disabilities. Cerebral palsy, autism, and intellectual disability are examples of intellectual and developmental disabilities. These are disabilities that a person is born with, or that develop during childhood. They usually continue over the lifetime. The Adult Services team supports personal development, social inclusion, health, safety, and self-determination. This team provides service coordination, monitoring, support plans, needs assessments, and risk assessments. The team also supports individuals with connections to resources. All services are inclusive, culturally specific and culturally responsive. They support clients to make informed decisions based on their goals.

### Program Description

**ISSUE:** Adult Services address the need for home and community based long-term support. Our system has ended expensive and isolating institutional care. Instead, Adult Services help people maintain their independence, health, and safety. They also help people live and work within the community.

**PROGRAM GOALS:** Adult services operate in eight domains that support quality of life. These domains include: 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. The goals include the following. First, assist individuals in accessing a living situation of their choice. Second, provide planning and supports that increase client achievement of personal goals. Third, support clients in connecting to and using both funded and natural supports. Fourth, maintain and improve the health and safety of clients. Fifth, increase the life choices available to clients. Sixth, optimize client involvement in education, employment, and purposive activity. Adult services center the cultural and linguistic needs of clients. This increases service equity and improves client outcomes.

**PROGRAM ACTIVITY:** The goals outlined above correspond to five areas of activity. These areas include assessment, connection, service coordination, monitoring, and documentation. Assessment efforts include needs assessments to determine service levels and categories. Connection efforts link clients to education, employment and residential resources, including affordable housing. Connections are also made to social activities. Service coordination efforts include ongoing person-centered planning. This planning identifies interests, strengths, choices, goals, and a path to goal achievement. These are recorded in an Individual Support Plan. Adult Service coordinators with KSA designation provide culturally and linguistically specific support. These staff serve 35% of adult clients who have a language support need. Monitoring efforts include regular monitoring of service providers. This ensures the health and safety of clients. Monitoring efforts also include partnerships with Community Justice, Mental Health and Addiction Services, Vocational Rehabilitation, and Crisis Services. Finally, staff document all service and client data in state and county databases. Documentation is a Medicaid requirement.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of adults served each month. <sup>1</sup>	2,314	2,250	2,400	2,500
Outcome	Number of monitoring contacts for adults.	33,027	36,000	36,000	38,000
Outcome	Percent of adult survey respondents who report that they like where they live.	89%	90%	89%	90%
Outcome	Percent of Service Coordinators with KSA designation to support language or cultural needs. <sup>2</sup>	7%	N/A	7%	10%

### Performance Measures Descriptions

<sup>1</sup> Adults included in this count are aged 22 and up. Adults aged 18 to 21 years are included in the "young adult" count in program offer 25013 - IDSD Services for Children and Young Adults.

<sup>2</sup> Existing KSA Service Coordinators serve over one third of clients with a language need. Ongoing data analysis will illuminate the need for additional KSA positions.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,316,936	\$5,849,694	\$1,247,783	\$6,400,159
Contractual Services	\$10,000	\$0	\$10,000	\$0
Materials & Supplies	\$31,647	\$83,599	\$28,093	\$80,247
Internal Services	\$77,469	\$1,740,068	\$228,143	\$1,773,135
<b>Total GF/non-GF</b>	<b>\$1,436,052</b>	<b>\$7,673,361</b>	<b>\$1,514,019</b>	<b>\$8,253,541</b>
<b>Program Total:</b>	<b>\$9,109,413</b>		<b>\$9,767,560</b>	
<b>Program FTE</b>	12.00	49.00	10.50	51.50

Program Revenues				
Intergovernmental	\$0	\$7,673,361	\$0	\$7,686,005
Beginning Working Capital	\$0	\$0	\$0	\$567,536
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,673,361</b>	<b>\$0</b>	<b>\$8,253,541</b>

Explanation of Revenues

This program generates \$829,809 in indirect revenues.  
 \$7,669,437 - State Mental Health Grant Case Management (Federal)  
 \$567,536 - Beginning Working Capital from State Mental Health Grant Case Management (Federal)  
 \$16,568 - State Mental Health Grant Psychiatric Treatment and Supervision (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25012 IDDSD Services for Adults

IDDSD will use \$567,536 in one-time-only State funding from the 21-23 biennium to backfill reductions to the General Fund and 23-25 State biennium funding to maintain current service levels for one year. This includes moving 1.50 FTE from the General Fund, as well as 2.50 FTE from State funding to Beginning Working Capital.

In FY 2024, 1.00 FTE Case Manager 2 (6297) is added that is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30400D for the associated costs and program information.

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The IDSD Child and Young Adult Services team supports quality of life for individuals with intellectual and developmental disabilities. Cerebral palsy, autism, and intellectual disability are examples of intellectual and developmental disabilities. These are disabilities that a person is born with, or that develop during childhood. They usually continue over the lifetime. The team supports self-determination, personal development, social inclusion, health, and safety. They provide service coordination, monitoring, individual support plans, and needs assessments. They connect families to resources that support child development. The team also supports the transition from child to adult services. All services center the linguistic and cultural needs of the client and family. They support clients to make informed decisions.

### Program Description

**ISSUE:** Child and Young Adult Services address the need for home and community based long-term support. Services are provided in the family home, foster homes, and group homes. These services help children and youth develop secure caregiver attachments. They help families maintain independence, health, and safety within the community.

**PROGRAM GOALS:** Eight quality of life domains guide the implementation of services. These domains include 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. They include the following. First, provide appropriate supports for children living in foster homes, group homes, or their family homes. The focus is to keep children in a stable, long term placement. Second, provide planning and supports that optimize child development. This includes the transition from child to adult services. Third, support clients and families in connecting to funded and natural supports. Fourth, support the health and safety of clients through service access and monitoring. Fifth, optimize client involvement in education and employment. Finally, center the cultural and linguistic needs of clients and families.

**PROGRAM ACTIVITY:** The goals outlined above correspond to five areas of activity. These areas include assessment, connection, service coordination, monitoring, and documentation. Assessments are conducted to determine levels and categories of service. Connection efforts link clients and families to community, educational, employment, and developmental resources. Service coordinators engage the client in person-centered planning. This helps the client identify choices and goals. It results in an Individual Support Plan that outlines a path to goal achievement. For young adults, this may include a plan to transition to independence. Service coordinators with KSA designation provide culturally and linguistically specific support. These service coordinators serve 32% of child and young adult clients. Monitoring is conducted for all Medicaid services. This ensures the health and safety of clients. Monitoring efforts also include collaborations with ODHS, ODDS, Behavioral Health, and emergency response services. Finally, staff document all service and client data in state and county databases. Documentation is a Medicaid requirement.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of children (birth - 17) served each month.	1,986	2,300	2,150	2,200
Outcome	Percent of children retained in the family home.	94%	90%	92%	90%
Output	Number of young adults (aged 18-21) served each month.	620	600	650	680
Outcome	Number of monitoring contacts for children and young adults.	26,163	25,000	25,000	27,000

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,126,431	\$6,067,072	\$1,148,762	\$6,477,332
Contractual Services	\$25,000	\$0	\$25,000	\$0
Materials & Supplies	\$28,091	\$71,133	\$26,970	\$71,135
Internal Services	\$69,557	\$1,822,954	\$192,515	\$1,846,703
<b>Total GF/non-GF</b>	<b>\$1,249,079</b>	<b>\$7,961,159</b>	<b>\$1,393,247</b>	<b>\$8,395,170</b>
<b>Program Total:</b>	<b>\$9,210,238</b>		<b>\$9,788,417</b>	
<b>Program FTE</b>	10.00	52.00	10.00	52.00

Program Revenues				
Intergovernmental	\$0	\$7,961,159	\$0	\$7,961,065
Beginning Working Capital	\$0	\$0	\$0	\$434,105
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,961,159</b>	<b>\$0</b>	<b>\$8,395,170</b>

Explanation of Revenues

This program generates \$845,622 in indirect revenues.  
 \$7,961,065 - State Mental Health Grant Case Management (Federal)  
 \$434,105 - Beginning Working Capital from State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25013 IDDSD Services for Children and Young Adults

IDDSD will use \$434,105 in one-time-only State funding from the 21-23 biennium to backfill reductions to the 23-25 State biennium funding to maintain current service levels for one year.

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The IDSD Abuse Investigation team provides abuse investigation and coordinates protective services. This increases the quality of life for individuals with intellectual and developmental disabilities. These services ensure the health and safety of clients. They also support client rights and access to criminal justice protections. The team delivers timely, equitable, person centered, and responsive services. The team strives to be collaborative. The services provided by the Abuse Investigation team ensure compliance with Oregon Administrative Rules and statutes and reduce the risk of abuse, neglect, and exploitation of clients. Abuse reporting decreased during the beginning of the COVID pandemic, but has now returned to pre-pandemic levels.

### Program Description

**ISSUE:** The Abuse Investigation team protects 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:** The Abuse Investigation team addresses four domains identified by the research on quality of life for individuals with intellectual and developmental disabilities. These include emotional, material, and physical well-being, and rights. The goals of the team include the following. First, increase access to services and criminal justice protections. The team does this through a process that centers clients' needs related to language, culture, race, health status, and financial situation. Second, increase and maintain client health and safety through safety plans. Third, improve service delivery by partnering with local, state and federal agencies. Finally, prevent further abuse through protective service action plans.

**PROGRAM ACTIVITY:** The goals outlined above correspond to three general areas of activity. These include access, collaboration, and prevention. In the area of access, investigators are responsible for ensuring that safety plans are in place. This increases client access to direct supports for health and safety needs. Additional responsibilities related to access include the review, screening, and investigation of allegations. These may be related to the death, alleged abuse, neglect, or exploitation of clients. Investigators use an equity lens to examine potential bias throughout this process, and use a trauma informed practice framework when determining appropriate follow up in each case. These services are conducted under the oversight of the Office of Training, Investigation, and Safety, which is a joint effort between DHS and OHA. They include investigations of care and non-care providers. Collaboration efforts include working relationships with local, state, and federal law enforcement agencies. Collaborations also occur with community partners. The team participates in the District Attorney's Multi-Disciplinary Team, the DD Advisory Committee, The Inter-Agency Committee for Abuse Prevention, the Incident Management Team, and the Critical Case Review Committee. This committee identifies safe options for high-risk clients experiencing complex situations. Prevention efforts include technical assistance and follow-up for protective services. This is also provided for recommended action plans.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of investigations and death reviews closed. <sup>1</sup>	200	190	350	350
Outcome	Percent of abuse referrals screened within 3 working days. <sup>2</sup>	40%	90%	65%	90%
Outcome	Percent of new investigations and death reviews closed within 55 days. <sup>3</sup>	27%	N/A	50%	90%

### Performance Measures Descriptions

<sup>1</sup> This measure was updated to recognize the work that is done to close all investigation types.

<sup>2</sup> This percentage dropped in FY22 due to increased data entry and documentation requirements by the State, as well as staff turnover.

<sup>3</sup> This is a new measure that reflects the team's efforts to prevent a backlog of investigations.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$3,143,626	\$0	\$3,405,304
Contractual Services	\$0	\$1,000	\$0	\$1,000
Materials & Supplies	\$2,058	\$34,421	\$3,571	\$51,383
Internal Services	\$719	\$985,613	\$719	\$942,366
<b>Total GF/non-GF</b>	<b>\$2,777</b>	<b>\$4,164,660</b>	<b>\$4,290</b>	<b>\$4,400,053</b>
<b>Program Total:</b>	<b>\$4,167,437</b>		<b>\$4,404,343</b>	
<b>Program FTE</b>	0.00	26.00	0.00	26.00

Program Revenues				
Intergovernmental	\$0	\$4,164,660	\$0	\$4,196,805
Beginning Working Capital	\$0	\$0	\$0	\$203,248
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,164,660</b>	<b>\$0</b>	<b>\$4,400,053</b>

Explanation of Revenues

This program generates \$441,825 in indirect revenues.  
 \$3,663,982 - State Mental Health Grant Abuse Investigation Services (Federal)  
 \$532,823 - State Mental Health Grant Case Management (Federal)  
 \$203,248 - Beginning Working Capital from State Mental Health Grant Abuse Investigation Services (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25014 IDDSD Abuse Investigations

IDDSD will use \$203,248 in one-time-only State funding from the 21-23 biennium to backfill reductions to the 23-25 State biennium funding to maintain current service levels for one year.

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Eligibility and Intake Services team provides the entryway to IDSD services. They increase equitable access to resources. These resources support quality of life for individuals with intellectual and developmental disabilities. Entryway services emphasize awareness, access, choice, and community inclusion. The team follows State and Federal rules. They ensure that eligibility and intake services are self-directed and inclusive. They provide services that are culturally and linguistically responsive. They support clients to make informed decisions based on their goals and provide opportunities for individuals to choose activities, supports and living arrangements. This team is the point of entry to all IDSD vocational, residential, case management, and in-home services.

### Program Description

**ISSUE:** There is a need for increased awareness and understanding of IDSD services. The Eligibility and Intake Services team addresses this need. They provide help with navigating the application and eligibility processes for services.

**PROGRAM GOALS:** The Eligibility and Intake Services team increases service access and supports quality of life. The goals of this team include the following. First, increase the public's understanding of available services and eligibility requirements. Second, increase the connection of individuals to community resources. Third, provide direct, trauma-informed application support. This support centers the linguistic, cultural, emotional, and economic needs of the applicant. Finally, increase access to funded services by determining eligibility and enrolling clients. This is done according to State regulatory requirements.

**PROGRAM ACTIVITY:** The four goals outlined above correspond to three general areas of activity. These areas are: awareness, equitable access, and connection. Awareness efforts include community outreach. This outreach increases understanding of IDSD services and processes. It results in referrals from community partners, such as schools, medical providers, and parent networks. All referrals are followed up with service information. Equitable access efforts include contacting the potential client in their primary language. The team meets with the potential client at a location convenient for them. Supports include application assistance, initial needs assessment, service information, and eligibility determination. Once eligible, clients are paired with a Service Coordinator or referred to a brokerage. Brokerages are alternative non-County case management systems. Bilingual staff with KSA designation support Spanish speaking applicants and provide referrals to other social supports, such as housing, social security, energy assistance, and links to community agencies. Additionally, a Clinical Services Specialist with KSA designation provides outreach to the African American community and culturally responsive intake supports. Applicants are contacted in their preferred language regarding the outcome of their eligibility determination. Connection efforts include connecting potential clients to agencies providing additional resources, such as health insurance, social security benefits, early intervention, or housing support.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of intake eligibility referrals.	1,069	1,100	1,100	1,100
Outcome	Percent of applicants found eligible for DD services. <sup>1</sup>	82%	80%	80%	80%
Outcome	Percent of intake appointments conducted in the primary language of the applicant. <sup>2</sup>	100%	100%	100%	N/A
Outcome	Percent of newly eligible clients who identify as Black, Indigenous, or People of Color. <sup>3</sup>	34%	N/A	34%	34%

### Performance Measures Descriptions

<sup>1</sup>The wording of this measure was updated to more accurately reflect current practices.

<sup>2</sup>Removing this measure for FY24, as 100% is consistently achieved.

<sup>3</sup>New measure that reflects the work of KSA positions focused on eligibility supports for BIPOC communities. Team strives to maintain at least the same proportion as the general population, as reported in the census.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,768,444	\$0	\$1,890,634
Contractual Services	\$10,000	\$0	\$10,000	\$0
Materials & Supplies	\$7,000	\$19,155	\$2,960	\$39,524
Internal Services	\$2,876	\$531,790	\$2,876	\$514,662
<b>Total GF/non-GF</b>	<b>\$19,876</b>	<b>\$2,319,389</b>	<b>\$15,836</b>	<b>\$2,444,820</b>
<b>Program Total:</b>	<b>\$2,339,265</b>		<b>\$2,460,656</b>	
<b>Program FTE</b>	0.00	14.00	0.00	14.00

Program Revenues				
Intergovernmental	\$0	\$2,319,389	\$0	\$2,333,462
Beginning Working Capital	\$0	\$0	\$0	\$111,358
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,319,389</b>	<b>\$0</b>	<b>\$2,444,820</b>

Explanation of Revenues

This program generates \$245,139 in indirect revenues.  
 \$1,603,491 - State Mental Health Grant Local Admin (Federal)  
 \$729,971 - State Mental Health Grant Case Management (Federal)  
 \$111,358 - Beginning Working Capital for State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25016 IDDSD Eligibility & Intake Services

IDDSD will use \$111,358 in one-time-only State funding from the 21-23 biennium to backfill reductions to the 23-25 State biennium funding to maintain current service levels for one year.

**Department:** County Human Services

**Program Contact:** Steven Esser

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Adult Care Home Program (ACHP) licenses and monitors adult care homes. It provides equitable access to adult care homes. ACHP licenses homes to ensure compliance with rules and regulations. Adult care homes are single-family homes in residential neighborhoods. They house and care for up to five adults in a homelike environment. Adult care homes serve people with intellectual, physical, and developmental disabilities, older adults, and behavioral health populations.

### Program Description

**ISSUE:** The State values the goal of reducing Medicaid costs and increasing choice. The State works to invest more Medicaid dollars in community settings. These settings are less costly than nursing facilities. Adult care homes are single-family homes in residential neighborhoods. They house and care for up to five adults in a homelike environment. These homes are a vital alternative to nursing facilities. Multnomah county has most of the nursing facilities in the state.

**PROGRAM GOAL:** The program regulates adult care homes. It ensures residents receive appropriate, person-directed, culturally specific, and safe services. A State exemption allows ACHP to create local licensing regulations. These regulations are the Multnomah County Administrative Rules (MCARs). The local regulations meet or exceed State requirements for adult care homes. They ensure the highest quality and safety for residents.

**PROGRAM ACTIVITY:** The ACHP receives, reviews, and approves license applications. The program monitors licenses for adult care homes. Licensing includes background checks and role approvals for staff. Licensing also monitors home and operator compliance with MCARs. ACHP provides technical help and training for operators and staff. In-person inspections check resident personal care, socialization, and nutrition. Inspections check physical safety, nursing care, and medication management. At the start of FY22, the program reduced in-person licensing visits due to COVID-19 related restrictions. Essential visits to address health and safety concerns were still conducted. Full inspections were able to resume mid year. The program has been able to make up inspections for 97% of the homes delayed due to COVID. Noncompliance with licensing requirements results in progressive corrective action. Actions are based on the frequency, severity, and seriousness of harm. Corrective actions range from technical help to license sanctions or home closure. ACHP has a quality improvement process to ensure efficiency, data quality, and program outcomes. The ACHP has a Registered Nurse (RN) who offers equity based outreach and education. The RN focuses on topics disproportionately affecting the underserved and disadvantaged within our care homes.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of licensed homes in operation throughout the fiscal year <sup>1</sup>	685	640	675	655
Outcome	Percent of adult care homes that were licensed accurately and timely based on ACHP audit findings	87%	85%	85%	85%
Outcome	Percent of adult care home residents satisfied with services received in adult care homes	93%	90%	93%	93%
Outcome	Average Medicaid cost savings for adult care home residents compared to nursing facility placement <sup>2</sup>	58%	50%	58%	50%

### Performance Measures Descriptions

<sup>1</sup>Reworded for clarity. Former wording: "Number of licensed homes."

<sup>2</sup>Average monthly Medicaid cost of services for the program population in an adult care home is \$5,322. This is 58% less than the \$12,791 basic monthly rate for a nursing facility placement.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$81,396	\$3,984,462	\$86,344	\$4,231,161
Contractual Services	\$391,694	\$443,935	\$0	\$525,000
Materials & Supplies	\$13,059	\$22,458	\$0	\$35,149
Internal Services	\$10,969	\$1,321,425	\$7,301	\$1,167,393
<b>Total GF/non-GF</b>	<b>\$497,118</b>	<b>\$5,772,280</b>	<b>\$93,645</b>	<b>\$5,958,703</b>
<b>Program Total:</b>	<b>\$6,269,398</b>		<b>\$6,052,348</b>	
<b>Program FTE</b>	0.64	31.36	0.64	31.36

Program Revenues				
Fees, Permits & Charges	\$0	\$268,935	\$0	\$350,000
Intergovernmental	\$0	\$5,503,345	\$0	\$5,608,703
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,772,280</b>	<b>\$0</b>	<b>\$5,958,703</b>

## Explanation of Revenues

This program generates \$521,278 in indirect revenues.  
 \$5,608,703 - Title XIX (Federal)  
 \$305,960 - Adult Care Home Program License Fees (Local)  
 \$31,590 - Adult Care Home Program Other Fees (Local)  
 \$12,450 - Adult Care Home Program Fines (Local)

## Significant Program Changes

Last Year this program was: FY 2023: 25022 ADVSD Adult Care Home Program

**Department:** County Human Services

**Program Contact:** Joe Valtierra

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Long Term Services and Supports (LTSS) supports independence and quality of life. The program provides equitable and culturally appropriate access to services. It does this by providing resources and case management that are in line with consumer choice, culture and individual needs. The program supports living in the community and avoiding nursing facility care.

### Program Description

**ISSUE:** Older adults living below the poverty level and those with a physical disability, behavioral health need, or developmental disability can face health and safety risks. Often they are vulnerable and with complex social, daily living, and medical needs. They benefit from early intervention and effective management of their care needs.

**PROGRAM GOAL:** LTSS case management advocates and supports safe, healthy, and independent living in the community that considers individual needs and preferences along with quality of life. These goals help prevent or cut costly nursing facility placement, hospitalization, and readmission. The program prioritizes home and community-based services. Multnomah county has more people living in community-based settings than the national average.

**PROGRAM ACTIVITY:** LTSS provides two Medicaid case management programs—service and eligibility. Service case management uses a person-centered approach to assess needs. The case manager and participant create a plan for their needs. Those receiving service case management meet State guidelines for nursing facility level care. Service case managers also authorize, coordinate, and monitor these services. The staff consists of diverse staff who speak multiple languages. They are culturally knowledgeable and trained in diversity, equity, and inclusion principles.

Eligibility case management participants meet financial guidelines. However, they do not meet guidelines for nursing facility level care. They enroll in programs meeting basic health, financial, and nutritional needs. Programs include the Oregon Health Plan, Medicaid, and the Supplemental Nutrition Assistance Program (SNAP). They may also receive counseling to help them choose managed care and Medicare Part D plans. Counseling and service is provided with consideration of each person’s individual and cultural background needs; this is essential to service equity.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants served in LTSS programs <sup>1</sup>	48,800	50,000	48,800	50,000
Outcome	Percent of nursing facility eligible participants who are living in the community	88%	88%	88%	88%
Output	Number of participants receiving Medicaid service case management	11,248	11,300	11,487	11,500

### Performance Measures Descriptions

<sup>1</sup>Estimated based on enrollment from Jul 2020 - Jan 2021. The conversion to the ONE system in Feb 2021 resulted in a lack of access to medical benefit and MSP case data.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$34,448,328	\$0	\$36,183,018
Contractual Services	\$3,203,964	\$256,423	\$2,664,911	\$80,900
Materials & Supplies	\$0	\$477,897	\$0	\$475,406
Internal Services	\$0	\$10,867,165	\$0	\$10,613,948
<b>Total GF/non-GF</b>	<b>\$3,203,964</b>	<b>\$46,049,813</b>	<b>\$2,664,911</b>	<b>\$47,353,272</b>
<b>Program Total:</b>	<b>\$49,253,777</b>		<b>\$50,018,183</b>	
<b>Program FTE</b>	0.00	312.80	0.00	313.00

Program Revenues				
Intergovernmental	\$0	\$45,175,421	\$0	\$46,710,050
Other / Miscellaneous	\$0	\$874,392	\$0	\$643,222
<b>Total Revenue</b>	<b>\$0</b>	<b>\$46,049,813</b>	<b>\$0</b>	<b>\$47,353,272</b>

## Explanation of Revenues

This program generates \$4,457,747 in indirect revenues.

\$46,528,627 - Title XIX (Federal)

\$181,423 - State of OR Change Leader (Federal)

\$170,400 - Kaiser Foundation Hospitals (Local)

\$165,904 - Case Management Assessments for Medicaid Patients (Local)

\$160,172 - Providence Medical Center (Local)

\$146,746 - OHSU (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25023 ADVSD Long Term Services & Supports (Medicaid)

Removed vacant 0.80 FTE Case Manager Senior due to reduction in Providence contract. Increase of 1.00 FTE Case Manager 2 that moved from ADVSD Transition & Diversion (25029) program offer.

**Department:** County Human Services

**Program Contact:** Brian Hughes

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Adult Protective Services Program (APS) helps to improve the quality of life for vulnerable older adults and people with disabilities. APS protects against abuse through quick and equitable access to quality services. APS investigates abuse and self-neglect of older adults and people with disabilities with the goal of ending abuse and neglect and holding perpetrators responsible.

### Program Description

**ISSUE:** Older adults and people with disabilities can be at risk of abuse, financial exploitation, neglect, and self-neglect for many reasons. About one in nine vulnerable adults is the victim of abuse at some time during their life.

**PROGRAM GOAL:** The goal of the Adult Protective Services program is to protect vulnerable adults from abuse and self-neglect. APS helps the department towards ending abuse and neglect and holds perpetrators responsible. APS also works to balance the safety and independence of vulnerable adults. Finally, APS provides community education on abuse, neglect, and exploitation.

**PROGRAM ACTIVITY:** APS investigates abuse and self-neglect of older adults and people with disabilities. Forty-three APS investigators review the incidents of abuse. Some investigators serve people living in the community. Other investigators serve people living in long-term care facilities. APS staff connect vulnerable adults to resources like healthcare, housing, and advocacy agencies. The APS team includes clinical services specialists, investigators, risk case managers, and screeners. APS works with law enforcement and the District Attorney's Office to prosecute offenders. Many different agencies work together in monthly meetings to discuss criminal cases. The APS risk case managers provide longer-term follow-up for people facing threats to their health or safety. Risk case management services last for up to a year. Risk case managers reduce risk by connecting people to the right agencies and setting up needed services.

The Training and Outreach Coordinator for APS provides education and training about the program to community partners and culturally specific organizations. The coordinator builds relationships and gives presentations to connect APS and our services with diverse communities.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of Adult Protective Service intakes	9,128	9,000	9,300	9,300
Outcome	Percent of investigations with timely response	98%	98%	98%	98%
Output	Number of Adult Protective Service investigations completed	2,844	2,800	3,000	3,000
Outcome	Re-abuse rate for individuals involved with APS	4%	3%	3%	3%

### Performance Measures Descriptions

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$51,708	\$7,248,244	\$55,643	\$7,684,656
Contractual Services	\$666,805	\$5,000	\$465,582	\$5,000
Materials & Supplies	\$32	\$68,228	\$0	\$68,260
Internal Services	\$4,278	\$2,047,233	\$3,997	\$2,022,944
<b>Total GF/non-GF</b>	<b>\$722,823</b>	<b>\$9,368,705</b>	<b>\$525,222</b>	<b>\$9,780,860</b>
<b>Program Total:</b>	<b>\$10,091,528</b>		<b>\$10,306,082</b>	
<b>Program FTE</b>	0.35	57.00	0.35	57.00

Program Revenues				
Intergovernmental	\$0	\$9,368,705	\$0	\$9,780,860
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,368,705</b>	<b>\$0</b>	<b>\$9,780,860</b>

## Explanation of Revenues

This program generates \$946,750 in indirect revenues.  
\$9,780,860 - Title XIX (Federal)

## Significant Program Changes

Last Year this program was: FY 2023: 25024 ADVSD Adult Protective Services

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The County Veterans Services Office (VSO) ensures equitable and efficient access to services and programs. VSO also provides case management support to Veterans who are nursing facility eligible and receive their care in their home. The VSO supports anyone who served on active duty with the U.S. Armed Forces and their families. The VSO helps Veterans and dependents to get pension, disability, and health benefits through the Federal Veterans' Administration and supports Veterans enrolled in the home and community based support program called Veterans Directed Care (VDC).

### Program Description

**PROGRAM GOAL:** The VSO goals are to provide information, help, and advocacy to improve Veteran access to a pension, disability, and health benefits. The VSO leverages strong community partnerships to increase community referrals for underrepresented Veterans. Veterans eligible for VDC are supported to direct their care and remain in their home.

**PROGRAM ACTIVITY:** The Oregon Department of Veterans Affairs trains and accredits Veterans services officers. They know applicable Federal and State laws to provide the best representation possible—free of charge. The office provides comprehensive Veterans Administration (VA) benefits counseling and enrollment. The VSO submits claims for VA compensation and pensions, and coordinates appeals. VSOs help Veterans to navigate the claims process. ADVSD leads the County's Veterans Services Task Force to strengthen the network of community partners. This program promotes fair access to underrepresented communities. The VSO uses intentional and targeted outreach to aging, LGBTQ, women, justice involved, houseless, and BIPOC Veterans. At any given moment, the VSO serves over 10,000 Veterans in the county. In FY 2022, the VSO provided over 4,600 telephone and email screenings. These screenings provided information and referral, and scheduled appointments.

Veteran Directed Care gives Veterans of all ages the opportunity to receive the Home and Community Based Services they need in a consumer-directed way. This program is for Veterans who need personal care services and help with activities of daily living. (e.g., help with bathing, dressing, fixing meals), and for Veterans who are isolated or their caregiver is experiencing burden. Veterans in this program are given a budget for services that is managed by the Veteran or the Veteran's representative. With the help of a case manager/service coordinator, Veterans hire their own workers to meet their daily needs to help them live at home.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of service contacts held by Veterans Services Officers	3,579	3,500	3,750	3,800
Outcome	New monthly compensation or pension awarded for ongoing benefit to Veterans due to VSO representation	\$568,228	\$980,000	\$980,000	\$980,000
Output	Number of claims filed for Veterans or eligible family members	582	800	800	850
Outcome	New retroactive benefits awarded to Veterans because of VSO representation in the last fiscal year	\$2,113,626	\$4,000,000	\$4,500,000	\$4,500,000

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$560,197	\$324,346	\$579,327	\$386,220
Contractual Services	\$10,000	\$21,560	\$10,500	\$21,560
Materials & Supplies	\$30,859	\$271	\$30,859	\$271
Internal Services	\$129,195	\$39,104	\$139,681	\$50,539
<b>Total GF/non-GF</b>	<b>\$730,251</b>	<b>\$385,281</b>	<b>\$760,367</b>	<b>\$458,590</b>
<b>Program Total:</b>	<b>\$1,115,532</b>		<b>\$1,218,957</b>	
<b>Program FTE</b>	5.06	2.94	4.80	3.20

Program Revenues				
Intergovernmental	\$0	\$385,281	\$0	\$458,590
<b>Total Revenue</b>	<b>\$0</b>	<b>\$385,281</b>	<b>\$0</b>	<b>\$458,590</b>

Explanation of Revenues

\$458,290 - Oregon Department of Veteran Affairs (Federal)  
 \$300 - Veteran's Directed Home & Community Services (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25025 ADVSD Veterans Services

Moved 0.26 FTE from General Fund to Other Funds (slightly changed the distribution for 8 positions)

**Department:** County Human Services

**Program Contact:** Mark Sanford

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Public Guardian and Conservator Program (PGC) protects and enhances the quality of life for the most vulnerable adults. PGC supports older adults, people with disabilities, and Veterans. The program serves adults who need daily intensive assistance and support. They also need specialized housing. They are often victims of abuse, neglect, and financial exploitation. BIPOC (Black, Indigenous, and/or People of Color) participants receive culturally specific services. The program plans to add a KSA position to further enhance culturally responsive service in the coming year. Guardians create person-centered care plans. PGC diverts those at risk or underserved to less restrictive and costly alternatives to public guardianship.

### Program Description

**ISSUE:** The vital decisions PGC makes under court authority ends or reduces:

- Victimization, emergency department and hospital admissions,
- Houselessness, protective services, and law enforcement involvement,
- Involuntary civil commitments, and increased risk of premature death.

The demand for PGC services is growing due to an increasing aging population and the rising incidence of abuse and neglect. The growing number of people experiencing houselessness and the need for long term care adds to the need for this program. The COVID-19 pandemic (and other infectious respiratory diseases) has driven up referrals as hospital bed utilization remains at capacity.

**PROGRAM GOAL:** PGC provides legal protection and access to services and benefits. Client health and welfare improve by minimizing unnecessary emergency department or hospital visits. Public guardians arrange for their medical, behavioral health, and residential care. The program is essential to the department strategy to reduce financial fraud, abuse, and neglect while enhancing quality of life.

**PROGRAM ACTIVITY:** Public guardians are court-appointed representatives. Clients have mental incapability, behavioral health needs, developmental disabilities, dementias or brain injury. They are dependent on others to meet their basic needs. The program seeks to balance the need for protection with the right to autonomy. PGC uses a culturally specific approach to address specific needs and help reduce health disparities. Guardians create person-centered care plans. The plan addresses risks, care arrangements, and stabilizes medical and psychiatric conditions. Public guardians are available 24/7 to make necessary decisions. Guardians provide quality services while carrying higher caseloads than the state PGC standard of 25. The program provides community consultation to identify alternatives to the restrictions of guardianship. PGC educates community partners. The program works with adult protective services, families, law enforcement, hospitals, multidisciplinary teams, and the court to intervene early to resolve fraud, abuse, and neglect of vulnerable adults.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of County residents with a Public Guardian/Conservator	159	185	160	170
Outcome	Percent of new high-risk PGC participants with a reduction in hospital visits within a year <sup>1</sup>	100%	95%	95%	95%
Outcome	Percent of PGC participants with properly managed assets to ensure ongoing eligibility and fraud protection	100%	100%	100%	100%
Outcome	Percent of PGC contacts diverted to a less costly and less restrictive resource	32%	40%	35%	40%

### Performance Measures Descriptions

<sup>1</sup>Because this measure requires a 12-month service window, data for individuals newly appointed with a Guardian during FY 2022 is not yet available. The figure reported for FY 2022 Actual represents all high-risk PGC participants with a petition date during FY 2021.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,462,223	\$0	\$1,520,082	\$0
Contractual Services	\$27,439	\$0	\$28,811	\$0
Materials & Supplies	\$31,428	\$0	\$31,428	\$0
Internal Services	\$285,730	\$0	\$347,816	\$0
<b>Total GF/non-GF</b>	<b>\$1,806,820</b>	<b>\$0</b>	<b>\$1,928,137</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,806,820</b>		<b>\$1,928,137</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 2023: 25026A ADVSD Public Guardian/Conservator

**Department:** County Human Services

**Program Contact:** Irma Jimenez

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

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

### Executive Summary

The ADVSD Administration provides division-wide support to ensure high quality services and advance County and Department initiatives. ADVSD Administration helps the division build racial equity and quality improvement. It ensures program and fiscal integrity and accountability. It does this through planning, community engagement, analysis, and evaluation.

### Program Description

**ISSUE:** Aging, Disability, and Veterans Services Division (ADVSD) serves older adults, people with disabilities, and Veterans focusing on communities that have been harmed by systemic racism and other forms of discrimination. There are 29 unique programs in ADVSD. Some are managed by ADVSD employees. Others are provided by contracted staff in community-based organizations. The ADVSD Administration supports the coordination between programs to provide equitable, high quality service and public accountability.

**PROGRAM GOAL:** The ADVSD Administration helps to ensure alignment with County and Department values. It plays a lead role in developing the ADVSD Service Equity Plan, and the Older Americans Act Area Plan. It also supports the goals of the County Workforce Equity Strategic Plan, and the ADVSD Strategic Work Portfolio. The ADVSD Administration team engages with division staff, community partners, public advisory councils and consumers to help achieve these goals. This team values transparency, efficiency, and collaboration.

**PROGRAM ACTIVITY:** ADVSD is committed to promoting racial equity. The ADVSD Administration supports this commitment in many ways. Team members engage with the community to seek input on program decisions. They identify gaps in service delivery and consumer outcomes. They also provide insights on program budgets to help Division leaders make strategic investments in diverse communities.

There are many teams in ADVSD who lead complex projects. The ADVSD Administration supports by providing project management and data solutions. The team also provides administrative support and quality improvement coaching. When programs want to measure the effectiveness of their services, the Administration team helps them gather and analyze information to make improvements. Programs collect large amounts of data. The Administration team helps organize and analyze that data so that it can be used to make informed decisions and support quality of life for consumers.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of opportunities for participants and community members to give feedback to ADVSD <sup>1</sup>	27	65	49	37
Outcome	Percent of diverse <sup>2</sup> representation on ADVSD Advisory Councils <sup>1</sup>	67%	65%	65%	65%
Outcome	Percent of ADVSD employees who identify as Black, Indigenous, and/or People of Color (BIPOC)	42%	41%	42%	43%
Outcome	Percent of ADVSD promotions that went to BIPOC employees	47%	60%	50%	50%

### Performance Measures Descriptions

<sup>1</sup>New measure. Formerly, this measure was on Program Offer ADVSD-25038. <sup>2</sup>Those who identify as Black, Indigenous, and/or People of Color, a person with a disability, an immigrant or refugee, non-English speaking, LGBTQ+. Former measure: Number of ADVSD quality improvement, program evaluation or data analytics projects completed. FY22 Actual: 22. FY23 Estimate: 36.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$286,947	\$1,621,489	\$394,525	\$2,235,630
Contractual Services	\$363,654	\$2,082,018	\$250,895	\$1,599,620
Materials & Supplies	\$146,665	\$71,948	\$96,103	\$71,949
Internal Services	\$113,816	\$432,341	\$147,202	\$620,131
<b>Total GF/non-GF</b>	<b>\$911,082</b>	<b>\$4,207,796</b>	<b>\$888,725</b>	<b>\$4,527,330</b>
<b>Program Total:</b>	<b>\$5,118,878</b>		<b>\$5,416,055</b>	
<b>Program FTE</b>	1.80	10.20	2.25	12.75

Program Revenues				
Intergovernmental	\$0	\$4,205,796	\$0	\$4,525,330
Other / Miscellaneous	\$0	\$2,000	\$0	\$2,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,207,796</b>	<b>\$0</b>	<b>\$4,527,330</b>

## Explanation of Revenues

This program generates \$275,430 in indirect revenues.  
 \$4,525,330 - Title XIX (Federal)  
 \$2,000 - Special Risk Fund (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25027 ADVSD Quality and Business Services

Added 1.00 FTE Program Specialist Senior, 1.00 FTE Office Assistant 2, and 1.00 FTE Program Specialist to support advisory council work, Division projects, and communications.

**Department:** County Human Services

**Program Contact:** Brian Hughes

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Multi-Disciplinary Team (MDT) helps vulnerable older adults and people with disabilities with equitable access to quality services. The MDT works with mental health and nursing providers to improve safety and quality of life. The program provides a coordinated service plan to help stabilize participants and support them living in the community.

### Program Description

**ISSUE:** Older adults and people with disabilities may experience complex health issues. Such issues can impact their ability to live safely in the community. The public services these individuals rely on are often uncoordinated.

**PROGRAM GOAL:** The goal of the MDT is to help stabilize participants and support them in living in the community. The MDT supports and encourages participation in mental health and medical services.

**PROGRAM ACTIVITY:** The MDT serves older adults and people with disabilities who struggle to get help. Case coordination occurs in five 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 help as needed. These teams work to improve participant safety and stabilize them in their own homes.

The Training and Outreach Coordinator for Adult Protective Services (APS) provides education and training about the program to case managers and district center staff, encouraging the use of MDT to help get services for their clients. The MDT may provide short-term help after an APS investigation for people with complex care plans. MDT services provide equitable access to in-home nursing and mental health support that otherwise would not be available. MDT works to connect participants to permanent mental and physical health providers and culturally specific services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants served by the Multi-Disciplinary Team (MDT)	437	600	435	435
Outcome	Percent of participants referred to nursing clinical supports and/or mental health services through MDT	58%	60%	60%	60%
Output	Number of MDT participants who receive mental health services	163	150	150	150

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$411,009	\$530,033	\$458,774	\$588,909
Contractual Services	\$325,482	\$160,687	\$375,482	\$160,687
Materials & Supplies	\$224	\$11,317	\$224	\$11,318
Internal Services	\$32,822	\$117,203	\$30,301	\$117,725
<b>Total GF/non-GF</b>	<b>\$769,537</b>	<b>\$819,240</b>	<b>\$864,781</b>	<b>\$878,639</b>
<b>Program Total:</b>	<b>\$1,588,777</b>		<b>\$1,743,420</b>	
<b>Program FTE</b>	2.45	3.20	2.45	3.20

Program Revenues				
Intergovernmental	\$0	\$819,240	\$0	\$878,639
<b>Total Revenue</b>	<b>\$0</b>	<b>\$819,240</b>	<b>\$0</b>	<b>\$878,639</b>

Explanation of Revenues

This program generates \$72,554 in indirect revenues.  
 \$717,952 - Title XIX (Federal)  
 \$160,687 - Older/Disabled Mental Health (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25028 ADVSD Multi-Disciplinary Team

**Department:** County Human Services

**Program Contact:** Joe Valtierra

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

**Related Programs:** 30407A

**Program Characteristics:**
**Executive Summary**

The Transition and Diversion program helps people access home and community living options. Benefit recipients would otherwise live in a nursing facility if not provided with alternatives. Living in the setting of choice improves the quality of life of benefit recipients. The program provides equitable and culturally appropriate access. The program offers consumers choices that reflect cultural, and individual needs. Available staff speak multiple languages, are culturally knowledgeable, and train in diversity, equity, and inclusion.

**Program Description**

**ISSUE:** Oregon is a national leader in offering alternatives to nursing facilities. The Aging, Disability, and Veterans Services Division helps older adults, people with disabilities, and Veterans live in a community setting. These places are less costly and less restrictive than nursing facilities. The Centers for Medicare and Medicaid Services sees living in a community setting as a best practice. It provides a better experience for those needing Medicaid long-term services and supports.

**PROGRAM GOAL:** The Transition and Diversion Program (T&D) serves older adults, people with disabilities, and Veterans. T&D uses equity principles to help people live in the setting of their choice. To the fullest extent, services are provided by culturally knowledgeable providers. The goal is to avoid placement in an institutional setting. This results in 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 equity centered services and assistance to help them live safely in the community. Transition and Diversion works 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 the DCHS priority to reduce housing insecurity. The Transition team works closely with the Houseless Mobile Intake Team (HMIT) funded by the Joint Office of Homeless Services. Transition coordinators will leverage the culturally specific resources developed and fostered by the 3 culturally specific positions on the HMIT.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Annual number of transitions from a nursing facility <sup>1</sup>	395	400 <sup>2</sup>	438	400
Outcome	Percent of transitions where participants returned home	40%	50%	48%	40%
Outcome	Percent of transitions where participants returned to a community-based facility	60%	50%	51%	60%

**Performance Measures Descriptions**

<sup>1</sup>This measure and all following measures include both transitions and diversions. <sup>2</sup>The availability of alternative placement homes is limited at this time due a combination of COVID-19 and staffing shortages.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,152,745	\$0	\$4,415,427
Contractual Services	\$388,046	\$5,000	\$336,352	\$5,000
Materials & Supplies	\$0	\$67,443	\$0	\$89,610
Internal Services	\$0	\$1,383,882	\$0	\$1,342,115
<b>Total GF/non-GF</b>	<b>\$388,046</b>	<b>\$5,609,070</b>	<b>\$336,352</b>	<b>\$5,852,152</b>
<b>Program Total:</b>	<b>\$5,997,116</b>		<b>\$6,188,504</b>	
<b>Program FTE</b>	0.00	40.00	0.00	41.00

Program Revenues				
Intergovernmental	\$0	\$5,452,106	\$0	\$5,686,250
Other / Miscellaneous	\$0	\$156,964	\$0	\$165,902
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,609,070</b>	<b>\$0</b>	<b>\$5,852,152</b>

## Explanation of Revenues

This program generates \$527,655 in indirect revenues.

\$5,686,250 - Title XIX (Fed thru State); \$165,902 - Case Management Assessments for Medicaid Patients (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25029 ADVSD Transition & Diversion (Medicaid)

- 6.00 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services (4.00 FTE Case Manager Sr, 1.00 FTE Case Manager 2, & 1.00 FTE Case Manager Assistant). See programs 30400D and 30407A for the associated costs and program information. 1.00 FTE Case Manager 2 is a new position in FY 2024 and associated with program 30400D.

- Added 1.00 FTE Program Specialist (State housing navigator) in Federal/State Fund. (FY23 Budget modification DCHS-009-23).

- Moved 1.00 FTE Case Manager 2 to ADVSD Long Term Services & Supports (25023) program offer.

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Outreach, information, referral, and assistance services are the entry point for help. The program helps people maintain their independence and improve their quality of life. The Aging and Disability Resource Connection Helpline (ADRC) is a 24/7/365 contact center. The program helps older adults, people with disabilities, Veterans, and their families. The ADRC is available by phone or online. The ADRC provides access to information, help, and resources specific to the needs of the participant.

### Program Description

**ISSUE:** The network of public and private services and resources is complex and difficult to navigate. Barriers are greater for BIPOC communities (Black, Indigenous, and/or People of Color). Certified specialists help consumers to navigate the aging and disability network. They provide information, help, and connection to community programs and benefits.

**PROGRAM GOAL:** The ADRC goal is to increase awareness of and equitable access to services. The ADRC provides information and referral/assistance (I&R/A). Services meet or exceed national Association of Information & Referral Services standards. This program helps to meet a department-wide goal to increase ease of resource navigation and equity in access for the community.

**PROGRAM ACTIVITY:** The ADRC serves older adults, people with disabilities, and Veterans. ADVSD is the federally designated Area Agency on Aging. Specialized services include information referral and assistance, follow-up, and crisis intervention. Specialists screen and refer for Medicare, long-term care counseling, and public benefits. The ADRC also screens for intensive services. These services include Oregon Project Independence, and Medicaid in-home services. The ADRC refers to adult protective services, intellectual and developmental disability services, and the mental health crisis line.

The ADRC partners with 211info to create a cohesive information and assistance network. Top referrals are for Medicare, housing and energy assistance, and senior centers. Community partnerships are important to program success. Contracted district senior centers and enhancing equity partners provide 29% of all I&R/A client contacts. Community partners are culturally responsive and use person-centered intergenerational services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of contacts to the Aging and Disability Resource Connection Helpline	35,002	43,000 <sup>1</sup>	35,800	37,500
Outcome	Percent of participants with a new ADVSD service after an ADVSD referral from the ADRC <sup>2</sup>	46%	30%	46%	30%
Output	Number of referrals to County and community partner agencies from the ADRC	55,688	62,000	57,230	60,000

### Performance Measures Descriptions

<sup>1</sup>Call volume did not increase as expected, potentially due to staff shortages at contracted partners.

<sup>2</sup>Due to lack of data availability, Adult Protective Services referrals are not included.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$356,361	\$1,808,705	\$398,792	\$2,313,116
Contractual Services	\$926,932	\$323,731	\$953,467	\$302,925
Materials & Supplies	\$280	\$51,875	\$280	\$91,146
Internal Services	\$60,383	\$445,278	\$65,261	\$487,305
<b>Total GF/non-GF</b>	<b>\$1,343,956</b>	<b>\$2,629,589</b>	<b>\$1,417,800</b>	<b>\$3,194,492</b>
<b>Program Total:</b>	<b>\$3,973,545</b>		<b>\$4,612,292</b>	
<b>Program FTE</b>	3.05	15.35	3.28	19.12

Program Revenues				
Intergovernmental	\$0	\$2,629,589	\$0	\$3,194,492
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,629,589</b>	<b>\$0</b>	<b>\$3,194,492</b>

## Explanation of Revenues

This program generates \$282,285 in indirect revenues.  
 \$2,439,663 - Title XIX (Federal)  
 \$404,430 - Outreach & Enrollment – MIPPA (Federal)  
 \$207,063 - ADRC – System-Wide Technical Assistance (State)  
 \$35,833 - Senior Health Insurance (SHIBA) (Federal)  
 \$19,800 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$15,800 - Senior Medicare Patrol Grant (Federal)  
 \$13,053 - Title VIIB (OAA – Elder Abuse) (Federal)  
 \$3,000 - City of Troutdale (Local)  
 \$1,850 - City of Fairview (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25032 ADVSD Outreach, Information & Referral

Added 4.00 FTE to support OPIM/FCAP – 2.00 FTE Community Information Specialist, 1.00 FTE Office Assistant Senior, and 1.00 FTE Program Supervisor. (FY23 Budget modification DCHS-009-23)

**Department:** County Human Services

**Program Contact:** Irma Jimenez

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Regional Health and Human Services Contact Center (HHSCC) will connect community members with culturally-responsive emergency and public health information and service connections. Building on emergency response goals as the Multnomah County COVID Contact Center, the new regional HHSCC is prepared for the next emergency. This program will continue and grow existing relationships with regional partners. Key partners include Tri-County public health leadership, public information officers, community-based organizations, healthcare systems, and others.

Regular hours for the HHSCC are Monday through Friday, 8am - 5pm, with after hour voicemails returned the next day. Extended hours are activated for heightened or emergency response as needed.

### Program Description

**ISSUE:** Social determinants of health contribute to wide health disparities and inequities. These disparities are greater for BIPOC, LGBTQ+, and other marginalized communities. The network of public and private organizations that provide services, supports and resources is complex and difficult to navigate.

**PROGRAM GOAL:** The HHSCC goal is to increase awareness of and equitable access to services, supports, and resources. The HHSCC provides a streamlined connection to information and referral/assistance (I&R/A), and helps address community needs across multiple social determinants of health. This program also helps to meet a department-wide goal to increase ease of resource navigation and equity in access for the community.

**PROGRAM ACTIVITY:** The Health and Human Services Contact Center serves as an information hub for public health, emergent issues, and crisis and emergency resources. This involves communicating up-to-date guidance and messaging provided by Regional Public Health Leadership Group to the public, in multiple languages, including Public Health Emergency Preparedness (PHEP) operations according to established plans.

The HHSCC provides access to county services and connection to community partners, including access to care (vaccination clinics, primary care, etc.) and Public Health wraparound services when available. HHSCC serves as a regionally-available resource for rapid response needs during acute emergency activations, as required. HHSCC works with interpreters and community partners to ensure that callers receive services in their preferred language. Since March 2020, HHSCC has provided assistance to callers in at least 80 languages.

HHSCC workers coordinate with regional partners to connect community members to information and resources. This might include, but is not limited to, mass vaccination efforts, evacuation notices, or public health alerts. HHSCC workers listen for concerns, call trends, and possible gaps in service brought forward by community members, including gaps in equitable information access, and elevate issues to leadership.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of languages supported by printed and online promotional materials and outreach campaigns	N/A	N/A	N/A	12
Outcome	Percent of phone contacts provided with timely, accurate information, service, and referral	N/A	N/A	N/A	80%
Output	Number of direct contacts with community members <sup>1</sup>	N/A	N/A	N/A	15,000

### Performance Measures Descriptions

<sup>1</sup>Includes incoming calls as well as community-focused outreach through outbound calls, emails, and SMS.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$1,294,605
Materials & Supplies	\$0	\$0	\$0	\$5,395
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,300,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,300,000</b>	
<b>Program FTE</b>	0.00	6.50	0.00	12.50

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,300,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,300,000</b>

Explanation of Revenues

\$1,300,000 - CareOregon. This funding is one-time-only in FY 2024. It's expected that this revenue will fund the HHSCC to April 2024.

Significant Program Changes

Last Year this program was: FY 2023: 25492B ARP - DCHS Client Assistance

In FY 2023, this program was funded by the Health Department using Federal American Rescue Plan (ARP) Direct County funding through 12/31/2022. It was extended to the end of FY 2023 with budget modification #HD-015-23 using Federal OHA funding, as a cross department funding project with the Health Department, under program offer ARP - Public Health - Isolation and Quarantine (40199C). In addition to extending existing positions, this budget modification also added a new 1.00 FTE Program Supervisor (9361) during FY 2023. In FY 2024, this program is increased by 1.00 FTE Office Assistant Senior (6002).

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Nutrition Program provides meals to older adults, people with disabilities, and Veterans who may be at nutritional risk. Nutrition services increase health and reduce social isolation. The program uses culturally responsive and culturally specific services. These services help maintain participants' independence and improve their quality of life. A network of community partners provides nutrition education and nutritious meals.

### Program Description

**ISSUE:** Participants from diverse communities report they need more 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. Access to good nutrition helps to support better health and results in consumers' ability to remain independent in their own home. A nutrition risk assessment measures this risk. This program gives access to healthy meals. Healthy meals prevent disease, improve nutritional status, and reduce social isolation. The program also links people to community-based services.

**PROGRAM ACTIVITY:** ADVSD provides funding to community partners to provide nutrition education and nutritious meals. Meals are both home-delivered and available at dining sites. These meals meet the tastes of diverse participants. The program serves people with the greatest social and economic needs. Nutrition services pay special attention to isolated, low-income, minority, and limited English participants. In FY 2022, 42% of participants identified as Black, Indigenous, and/or People of Color (BIPOC). Providers are culturally responsive to the priorities and challenges facing diverse communities. The COVID-19 pandemic closed in-person meal sites and partners have moved to home-delivered meals. ADVSD increased funding to culturally specific providers serving communities harder hit by COVID-19. Culturally specific providers maximize funds and community impact by using culturally specific restaurants and stores when possible. This increases the economic well-being of the communities where the elders live. ADVSD uses a dietitian to review menus and follow nutrition guidelines.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of meals served	557,814	592,000	477,864 <sup>1</sup>	450,000
Outcome	Percent of high nutritional risk participants who experienced an improvement in their annual risk score	47%	45%	47%	45%
Output	Percent of meals through culturally specific services	17%	19%	18%	19%
Outcome	Percent of home-delivered meal participants satisfied or very satisfied with nutritional services	96% <sup>2</sup>	92%	96%	92%

### Performance Measures Descriptions

<sup>1</sup>Increased food costs and the end of Pandemic funding and disaster declaration led to a decrease in meals served.

<sup>2</sup>Based on responses to the question "How do you usually feel about the quality of the meal?"

## Legal / Contractual Obligation

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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$69,653	\$0	\$76,200
Contractual Services	\$659,770	\$1,730,694	\$726,437	\$1,600,706
Materials & Supplies	\$2,000	\$3,786	\$2,000	\$3,786
Internal Services	\$0	\$6,112	\$0	\$6,256
<b>Total GF/non-GF</b>	<b>\$661,770</b>	<b>\$1,810,245</b>	<b>\$728,437</b>	<b>\$1,686,948</b>
<b>Program Total:</b>	<b>\$2,472,015</b>		<b>\$2,415,385</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$1,810,245	\$0	\$1,686,948
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,810,245</b>	<b>\$0</b>	<b>\$1,686,948</b>

## Explanation of Revenues

\$595,898 - Title IIIC-2 (OAA – Home Meals) (Federal)  
 \$565,522 - Title IIIC-1 (OAA – Congregate Meals) (Federal)  
 \$360,262 - U.S. Department of Agriculture (Federal)  
 \$86,242 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$79,024 - PWD OPI Pilot Project (State)

## Significant Program Changes

Last Year this program was: FY 2023: 25033 ADVSD Nutrition Program

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Health promotion supports healthy, active living, and chronic disease self-management. The program serves older adults, people with disabilities, and Veterans. Community organizations provide culturally specific and responsive services. Program activities improve health through exercise. They also provide classes on disease self-management, healthy eating, and other social activities. During the COVID-19 pandemic, agencies continued classes by switching to a virtual environment. Currently, community agencies are reopening for in person activities. Many classes will have in person or virtual options.

### Program Description

**ISSUE:** Older adults are at risk for developing chronic health conditions. As people age the risk of falling increases. Studies show that falls result in health decline and potential hospitalization. Adults with chronic conditions have higher rates of hospital readmissions.

**PROGRAM GOAL:** ADVSD provides evidence-based health promotion programs (EBHP), and disease prevention classes. Evidence-based programming helps reduce hospital readmissions. Programs focus on healthy behaviors, and improved health status. Other programs address taking an active role in the management of chronic conditions. The Care Transitions Coaching program helps to reduce hospitalization. The program helps reduce the risks for falling. The coaching improves health outcomes and reduces healthcare costs. Ongoing partnership with culturally specific agencies makes these classes more accessible to communities of color and those most at risk for chronic conditions.

**PROGRAM ACTIVITIES:** Classes offered support regular physical activity. Workshops teach how to better manage chronic conditions. The Care Transitions program supports the move from hospital to home. Coaching helps participants take an active role in managing their health. It helps them follow their discharge plan. Topics include reviewing medication and understanding red flags associated with their health conditions. The classes foster community engagement. This helps reduce social isolation, and support a healthy lifestyle. Programs include Tai Chi, diabetes prevention, chronic disease self-management, and Walk with Ease. ADVSD coordinates community partnerships to streamline access to services. Contracted agencies provide culturally responsive and specific services to increase access. This program helps prevent health decline, supports aging in place and reduces healthcare costs.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of evidence based health promotion (EBHP) courses offered	26	N/A	28	28
Outcome	Percent of EBHP courses offered by culturally-specific providers	31%	N/A	35%	35%
Output	Number of participants served by Care Transitions	654	N/A	542	529
Outcome	Percent of evidence based Care Transition participants with no hospital readmission in 30 days	88%	88%	88%	88%

### Performance Measures Descriptions

Former measure: Number of people enrolled in evidence-based behavioral and health promotion activities. FY22 Actual: data not available, FY23 Estimate: 1022. Percent of EBHP fall prevention participants who had a reduction in fall risk compared to non-participants. FY22 Actual: 55%, FY23 Estimate: 55%.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$26,612	\$337,958	\$28,658	\$359,579
Contractual Services	\$31,722	\$43,134	\$33,023	\$42,560
Materials & Supplies	\$12,408	\$275	\$12,408	\$275
Internal Services	\$25,452	\$85,387	\$29,112	\$80,404
<b>Total GF/non-GF</b>	<b>\$96,194</b>	<b>\$466,754</b>	<b>\$103,201</b>	<b>\$482,818</b>
<b>Program Total:</b>	<b>\$562,948</b>		<b>\$586,019</b>	
<b>Program FTE</b>	0.22	2.78	0.22	2.78

Program Revenues				
Intergovernmental	\$0	\$223,748	\$0	\$364,439
Other / Miscellaneous	\$0	\$243,006	\$0	\$118,379
<b>Total Revenue</b>	<b>\$0</b>	<b>\$466,754</b>	<b>\$0</b>	<b>\$482,818</b>

## Explanation of Revenues

This program generates \$44,300 in indirect revenues.  
 \$321,879 - ADRC – Person Centered Option Counseling Medicaid (State)  
 \$118,379 - Providence Health Services – Metro Care Transitions (Local)  
 \$42,560 – Title IIID (OAA – Health Promotion) (Federal)

## Significant Program Changes

Last Year this program was: FY 2023: 25034 ADVSD Health Promotion

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

This program serves older adults, people with disabilities, and Veterans who do not qualify for traditional Medicaid case management. They may experience complex or many problems that make it hard to remain in their homes. They are at risk for nursing facility placement. This non-traditional Medicaid program provides critical support that lets them remain at home.

### Program Description

**ISSUE:** This program serves older adults, people with disabilities, and Veterans. They may experience complex or many problems that make it hard to remain in their homes. An outcome of community listening sessions was a four-year strategic plan for service delivery. The Division also changed its funding allocation to increase culturally specific services. Services focus on trauma informed case management and in-home support.

**PROGRAM GOAL:** Case management and in-home services use a comprehensive, person-centered approach. It supports participants to remain independent at home. The program supports family caregivers and delays the need for costly Medicaid services. It also helps avoid nursing facility placement. As an example, the program can help to arrange housekeeping and grocery shopping. Research shows case management can improve housing stability and prevent isolation. Partnerships with culturally specific agencies to provide this much needed case management, respite and support has a significant positive impact on communities of color and other severely marginalized communities that are disproportionately affected by lack of resources.

**PROGRAM ACTIVITY:** The Case Management and In-Home Services program is separate from the Long Term Services and Supports program. The program partners with community organizations to provide culturally responsive and specific services. Case managers work with participants and their families. They assess the needs for services and determine eligibility. Case managers also authorize and coordinate services. They develop and test the person-centered care plan. Other continued in-home services include respite, housekeeping, personal care, and grocery shopping. Case managers contact participants by phone and in-home visits. They reassess participant needs, provide reassurance, and advocate on their behalf. As needed, they provide information, help, and referral. In FY 2023 this program will include Medicaid funding from Oregon Project Independence-Medicaid (OPI-M) and Family Caregiver-Medicaid (FCAP).

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people receiving case management and/or in-home services	2,672	3,400	3,400 <sup>1</sup>	3,400
Outcome	Percent of Oregon Project Independence participants who did not enroll in Title XIX services	85% <sup>2</sup>	94%	85%	87%

### Performance Measures Descriptions

<sup>1</sup>This estimate includes OPI-M and FCAP which are currently awaiting Centers for Medicare and Medicaid Services approval.

<sup>2</sup>Methodology for calculation of actuals was updated in FY22.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$198,407	\$423,966	\$251,148	\$1,004,049
Contractual Services	\$1,244,795	\$10,753,202	\$1,373,377	\$10,763,703
Materials & Supplies	\$104	\$16,191	\$104	\$16,191
Internal Services	\$77,196	\$216,494	\$94,315	\$378,177
<b>Total GF/non-GF</b>	<b>\$1,520,502</b>	<b>\$11,409,853</b>	<b>\$1,718,944</b>	<b>\$12,162,120</b>
<b>Program Total:</b>	<b>\$12,930,355</b>		<b>\$13,881,064</b>	
<b>Program FTE</b>	1.13	3.47	1.43	9.26

Program Revenues				
Intergovernmental	\$0	\$11,402,067	\$0	\$12,154,334
Service Charges	\$0	\$7,786	\$0	\$7,786
<b>Total Revenue</b>	<b>\$0</b>	<b>\$11,409,853</b>	<b>\$0</b>	<b>\$12,162,120</b>

## Explanation of Revenues

This program generates \$115,473 in indirect revenues.  
 \$9,822,365 - Veteran's Directed Home & Community Services (Federal)  
 \$922,288 - Title XIX (Federal)  
 \$517,691 - Oregon Project Independence (State)  
 \$515,906 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$168,722 - PWD OPI Pilot Project (State)  
 \$142,496 - Oregon Money Management Program (State)  
 \$61,045 - Title IIIE (OAA – Caregiver Support) (Federal)  
 \$8,821 - Title IIID (OAA – Health Promotion) (Federal)  
 \$7,786 - Client Employer Provider Fees (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25035 ADVSD Case Management & In-Home Services (non-Medicaid)

FY 2024 decreased by 0.50 FTE Case Manager 2 that moved to ADVSD Safety Net Program (25036) and 0.41 FTE Program Specialist that moved to ADVSD Advocacy & Community Program Operations (25038).

FY 2023 added to support OPIM / FCAP – 1.00 FTE Program Supervisor, 2.00 FTE Case Manager 2, 1.00 FTE Case Manager Assistant, 2.00 FTE Office Assistant 2, 1.00 FTE Office Assistant Sr (program offer 25038 in FY 2023). (FY23 Budget modification DCHS-009-23).

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

The Safety Net Program helps prevent eviction and stabilize housing. This program serves older adults, people with disabilities, and Veterans. Safety Net focuses on the most vulnerable and those experiencing homelessness. The program helps participants get things like dentures, eyeglasses, and prescription medicine. These items help prevent participant health decline. Additionally, participants do not have to choose between medications and food.

**Program Description**

**ISSUE:** The Safety Net Program serves older adults, people with disabilities, and Veterans who are unable to get or keep housing. They also need help getting medical equipment, dentures, and prescription medication. Usually, this is because of limited personal financial resources. Other factors make their situation more difficult. For example, the ongoing lack of affordable housing or health insurance. Extra barriers include limited mobility, increasing disability, and other health factors.

**PROGRAM GOAL:** The Safety Net Program helps support and maintain safe and stable housing. Participants are experiencing homelessness, or are at risk of losing their housing. The program offers emergency housing help and services. The program provides short-term help to pay for prescription medication. The Safety Net Program helps to pay for dentures. Dentures can reduce barriers to good nutrition. These goals provide services and supports to address significant gaps. Participants of the network have seamless access to this program with help from ADVSD staff and partners.

**PROGRAM ACTIVITY:** The Safety Net Program receives requests from many sources within the county. The Safety Net team provides training and support to referral sources. The training and support helps to create equitable access and reduce barriers to the program. It streamlines processes and provides better support to the clients they serve. The Aging and Disability Resource Connection Helpline is the primary access point for Safety Net services. Community partners also refer people to the program for help. The program facilitates support services such as deep cleaning and bed bug mitigation. Financial help ensures individuals get their prescribed treatments to prevent health decline. This program helps participants buy dentures, eyeglasses, and other durable medical equipment. Items not covered by Medicaid, Medicare, or other programs. Short-term help with prescription medication payment helps develop a long-term medication coverage plan. The program's demographic customer data is under review in order to establish new sets of measures to ensure that the program is effectively serving the most marginalized communities in Multnomah county.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people who received Safety Net services	569	350	806	650
Outcome	Percent of requests for Safety Net services fulfilled to avert eviction	69%	70%	70%	70%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$94,797	\$94,797	\$132,589	\$132,589
Contractual Services	\$563,739	\$0	\$558,399	\$0
Materials & Supplies	\$1,859	\$73	\$1,932	\$0
Internal Services	\$9,168	\$22,477	\$8,589	\$26,561
<b>Total GF/non-GF</b>	<b>\$669,563</b>	<b>\$117,347</b>	<b>\$701,509</b>	<b>\$159,150</b>
<b>Program Total:</b>	<b>\$786,910</b>		<b>\$860,659</b>	
<b>Program FTE</b>	0.75	0.75	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$117,347	\$0	\$159,150
<b>Total Revenue</b>	<b>\$0</b>	<b>\$117,347</b>	<b>\$0</b>	<b>\$159,150</b>

Explanation of Revenues

This program generates \$16,335 in indirect revenues.  
 \$159,150 - Title XIX (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25036 ADVSD Safety Net Program

Increase of 0.50 FTE Case Manager 2 to support housing services (moved from program offer 25035).

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

**Executive Summary**

There is a significant need to provide assistance for older adults (age 55+) at risk of losing housing and in need of supports to prevent eviction by providing crucial in-home resources. This program offer provides funding for a community based organization focused on the most vulnerable older adults at risk of experiencing houselessness. The program helps participants pay for housekeeping only, in-person and phone call check-ins, driving people to appointments, help arrange for home repairs, grocery shopping and connecting clients to critical resources needed to continue living independently.

**Program Description**

**ISSUE:** Older adults at risk of eviction or housing instability tend to have a combination of social and health related risks that contribute to a decline in their ability to perform Instrumental Activities of Daily Living (IADLs). Individuals who have recently found housing after long periods of houselessness may struggle with physical limitations, cognitive impairments, behavioral ability, or skills to maintain housekeeping. In extreme cases it can result in hoarding disorder. Poor housekeeping can have negative consequences on health and housing, including increased risk of falls, infection, social isolation, and can lead to eviction.

**PROGRAM GOAL:** The Older Adults In Home Care Needs Program will contract with a community organization that serves people who are at risk of losing housing with the goal to provide support and maintain safe and stable housing for older adults. The Older Adults In Home Care Needs Program helps to pay for necessary services and supports to keep older adults in their homes.

**PROGRAM ACTIVITY:** The Older Adults In Home Care Needs Program focuses on the most vulnerable older adults and those at risk of experiencing houselessness by providing housekeeping support, eviction prevention, client outreach, transportation support and life stabilization such as connecting clients to critical resources needed to continue living independently, such as health insurance and grocery delivery services, checking and understanding mail, serving as a medical advocate during doctor appointments to help clients understand information, and ensure clients are getting appropriate care.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people served	N/A	N/A	N/A	30
Outcome	Stably housed / moved to more stable housing 6 month post services	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Transportation Program helps older adults, people with disabilities, and Veterans. This program helps them with their transportation needs. Services provide transportation to social activities, nutrition programs, stores, pharmacies, and medical appointments. The program removes mobility barriers that may reduce a person's independence or quality of life. Services include transportation assessments, ride coordination, and authorization. Services offered include TriMet HOP cards, door-to-door service, and emergency rides. Specialized vehicles accommodate mobility devices.

### Program Description

**ISSUE:** A 2020 community needs assessment of older adults found access to transportation an unmet need. Affordable transportation options support good health and an active lifestyle. Transportation also connects participants to their community which improves their quality of life.

A 2021 county transportation survey was conducted in 17 languages. The survey provided diverse racial and ethnic input into transportation needs. It found transportation support was an essential service—transportation services to get to appointments, community events, and senior centers. Aging & Disability Advisory councils advocate for lower ride costs and more frequent service. They also ask for changes to provide safety personnel. The COVID pandemic has changed ridership and services. Older adults reported concerns about safety using transit. Transportation agencies lost staff due to their personal safety concerns. This resulted in reduced access to transportation services and increased service rates.

**PROGRAM GOAL:** The goal of Transportation Services is to improve equitable access to community services. It meets community needs and supports efforts to strengthen ride services. Agencies and transportation services help people who speak other languages, by providing translation services. This program promotes hiring culturally diverse staff who speak more than one language.

**PROGRAM ACTIVITY:** County and contracted community partners use case managers to coordinate transportation services. The case manager screens for eligibility and estimates current transportation needs. They authorize services and coordinate rides. Senior centers and Enhancing Equity programs provide services through ADVSD contracts with TriMet, Ride Connection, and Radio Cab. Clients with Medicaid receive transportation services through the ADVSD contract with First Transit.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants who received transportation assistance <sup>1</sup>	1,270	1,200	1,200	1,200
Outcome	Percent of non-Medicaid participants who report increased mobility because of transportation services <sup>2</sup>	85%	85%	85%	85%

### Performance Measures Descriptions

<sup>1</sup>All transportation utilization by older adults and people with disabilities is down due to the COVID-19 pandemic, and concerns for safety while traveling with strangers. <sup>2</sup>Survey data collection ongoing at time of reporting. Data includes participants who used transportation services anytime in FY22. Former measure: Percent of participants with improved utilization of ADVSD services after receiving transportation services. FY22 Actual: 12% FY23 Estimate: data not available.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$200,057	\$0	\$164,361
Contractual Services	\$119,042	\$1,871,114	\$149,122	\$1,889,201
Materials & Supplies	\$0	\$151	\$0	\$40
Internal Services	\$0	\$48,840	\$0	\$32,388
<b>Total GF/non-GF</b>	<b>\$119,042</b>	<b>\$2,120,162</b>	<b>\$149,122</b>	<b>\$2,085,990</b>
<b>Program Total:</b>	<b>\$2,239,204</b>		<b>\$2,235,112</b>	
<b>Program FTE</b>	0.00	1.58	0.00	1.38

Program Revenues				
Intergovernmental	\$0	\$2,120,162	\$0	\$2,085,990
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,120,162</b>	<b>\$0</b>	<b>\$2,085,990</b>

## Explanation of Revenues

This program generates \$12,637 in indirect revenues.  
 \$1,421,256 - Medicaid Community Transportation (Federal)  
 \$546,431 - TriMet Community Transportation Local Match (Local)  
 \$67,382 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$50,921 - PWD OPI Pilot Project (State)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25037 ADVSD Transportation Services

0.20 FTE Program Supervisor moved to ADVSD Advocacy & Community Program Operations (25038).

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program seeks to center the voice of historically marginalized communities. It supports an equity-focused, participant-directed service system. The program includes Area Plan development and management. The program provides contract administration, program support, network advocacy, volunteer engagement, and coordination.

**Program Description**

**ISSUE:** The Division engages with diverse communities. These communities share their needs and issues. These engagements help in planning and developing services. The program ensures that publicly funded programs operate effectively.

**PROGRAM GOAL:** Advocacy efforts ensure diverse feedback and enhance equity for volunteers, staff, and participants. Program operations provide administrative support to contracted community-based organizations. This support helps ensure consistent, equitable, and quality-focused services to participants. ADVSD desires diverse community participation.

**PROGRAM ACTIVITY:** The program includes advocacy, contract monitoring, and Area Plan implementation. ADVSD develops and monitors social service and nutrition program contracts. The Older Americans Act requires an Area Plan. The Area Plan describes the scope of diverse needs in the service area and addresses service equity. It outlines program goals, objectives, and key tasks. ADVSD recruits and retains racially, ethnically, culturally, and regionally diverse community participation. The program supports regular meetings, and coordinating opportunities for community engagement and advocacy.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of volunteer hours donated to ADVSD	5,568 <sup>1</sup>	45,000	29,250	38,000
Outcome	Percent of ADVSD contract funding for culturally specific providers <sup>2</sup>	50%	38%	45%	38%

**Performance Measures Descriptions**

<sup>1</sup>Due to the COVID-19 pandemic, foster grandparent volunteers were unable to fulfill hours in assigned locations based on infection control protocols in schools and childcare centers. <sup>2</sup>Contracts are specific to the Federal 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 the 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$351,292	\$1,365,707	\$433,231	\$2,087,778
Contractual Services	\$131,575	\$507,761	\$131,647	\$2,315,643
Materials & Supplies	\$9,578	\$112,919	\$9,578	\$112,918
Internal Services	\$116,514	\$569,534	\$80,906	\$525,597
<b>Total GF/non-GF</b>	<b>\$608,959</b>	<b>\$2,555,921</b>	<b>\$655,362</b>	<b>\$5,041,936</b>
<b>Program Total:</b>	<b>\$3,164,880</b>		<b>\$5,697,298</b>	
<b>Program FTE</b>	2.96	10.66	3.31	16.12

Program Revenues				
Intergovernmental	\$0	\$2,310,724	\$0	\$4,798,419
Service Charges	\$0	\$245,197	\$0	\$243,517
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,555,921</b>	<b>\$0</b>	<b>\$5,041,936</b>

## Explanation of Revenues

This program generates \$116,063 in indirect revenues.  
 \$2,858,000 - Title XIX (Federal). Increase of \$2.4 million from FY 2023 Adopted budget.  
 \$429,822 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$376,105 - State GF-SEQ Assist (Federal)  
 \$337,154 - Veteran's Directed Home & Community Services (Federal)  
 \$279,546 - Foster Grandparent Program (Federal)  
 \$265,946 - Oregon Money Management Program (State)  
 \$243,517 - Contractor Rentals (Local)  
 \$175,245 - Older/Disabled Mental Health (Federal)  
 \$43,314 - Oregon Project Independence (State)  
 \$26,000 - Title IIIC-1 (OAA – Congregate Meals) (Federal)  
 \$7,287 - PWD OPI Pilot Project (Local)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25038 ADVSD Advocacy & Community Program Operations

FY 2024: moved 0.41 FTE Program Specialist from 25035, moved 0.20 FTE Program Supervisor from 25037. Added 1.00 FTE Data Technician and 1.00 FTE Case Manager 2.

FY 2023 added 1.20 FTE Program Technician, 1.00 FTE Program Specialist Senior, and 1.00 FTE Data Analyst Senior (budget modification DCHS-009-23)

Reflects an increase of \$2.4 million in Title XIX (Federal) funding. Adds 5.20 FTE and \$1.8 million in contracted services to provide additional outreach and interpretation services. Funds were added in FY 2023 (budget modification DCHS-009-23).

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Family Caregiver Support Program (FCSP) helps caregivers. FCSP participants care for older family members or are older adults raising grandchildren. Unpaid caregivers face stress, a financial burden that impacts their own health and family well-being. FCSP reduces burnout, maximizes independence, and provides support. This help allows people to remain in their homes. Support may include respite, financial awards, and education.

### Program Description

**ISSUE:** AARP estimates that 30% of the general population provides care for an older adult. These unpaid caregivers represent the largest source of long-term services and support. Stress and financial burden impact caregiver health. These issues can increase nursing facility placement for their loved ones.

**PROGRAM GOAL:** FCSP helps those caring for an older adult family member or raising grandchildren or related family members. This program reduces burnout and maximizes independence. It provides support that allows people to remain in their homes. Providing support can reduce nursing facility placement and increase family well-being.

**PROGRAM ACTIVITY:** The FCSP provides a system of support for unpaid family caregivers. This helps them provide quality care to their loved ones and makes caregiving easier. Unpaid family caregivers get information, training, counseling, case management, and peer support. Respite, financial awards, and education help reduce caregiver burnout. The COVID-19 pandemic prevented meeting in person. The program used virtual connections for support groups and training. Events also went virtual. During this time FCSP targeted outreach to diverse communities. FCSP offered a webinar series for grandparents raising school-aged grandchildren. The series included specific strategies and supports for navigating remote learning. During the pandemic outreach efforts increased to connect caregivers with more support options. These resources helped with food boxes, activity kits, and safety information. In FY23, program updates include in-person and online training opportunities. In FY24 the program will work with Enhancing Equity partners to offer culturally specific support groups for caregivers.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants served by the Family Caregiver Support Program	262	325	325	325
Outcome	Percent of family caregivers who report services received were excellent or good	89%	90%	90%	90%
Outcome	Percent of family caregivers who attended a training or event that would recommend the program	N/A <sup>1</sup>	95%	95%	95%

### Performance Measures Descriptions

<sup>1</sup>Insufficient survey data was collected due to service delivery changes from the COVID-19 pandemic.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$127,350	\$92,681	\$59,255
Contractual Services	\$181,276	\$194,709	\$100,387	\$291,170
Materials & Supplies	\$0	\$21,031	\$0	\$21,031
Internal Services	\$0	\$0	\$61	\$15,681
<b>Total GF/non-GF</b>	<b>\$181,276</b>	<b>\$343,090</b>	<b>\$193,129</b>	<b>\$387,137</b>
<b>Program Total:</b>	<b>\$524,366</b>		<b>\$580,266</b>	
<b>Program FTE</b>	0.00	0.90	0.61	0.39

Program Revenues				
Intergovernmental	\$0	\$343,090	\$0	\$387,137
<b>Total Revenue</b>	<b>\$0</b>	<b>\$343,090</b>	<b>\$0</b>	<b>\$387,137</b>

## Explanation of Revenues

\$387,137 - Title IIIIE (OAA – Caregiver Support) (Federal)

## Significant Program Changes

**Last Year this program was:** FY 2023: 25039 ADVSD Family Caregiver Program

As required by the Older Americans Act IIIIE the County General Funds in contracted services have increased to meet the required minimum of 25% maintenance of effort.

Increase 0.10 FTE Program Specialist.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Emergency and Crisis Services support individuals and families who are seeking safety from domestic violence. Domestic violence does not present in the same way across all demographics, meaning that survivors need access to client-centered and culturally-relevant services when the time is right for them. Crisis services are flexible, trauma-informed, and collaborative to meet the unique needs of each individual and family served.

### Program Description

**ISSUE:** Domestic violence is 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. Crisis services help ensure that support is available for survivors when the time is right for them.

**PROGRAM GOAL:** In their lifetimes, 1 in 4 women and 1 in 9 men experience intimate partner violence. This program funds immediate safety and advocacy services for individuals and families. Services are provided through contracted community-based agencies. They serve a racially and ethnically diverse population.

**PROGRAM ACTIVITY:** There are two program activities funded by this program: Shelter-based services and Mobile Advocacy.

Shelter-based programming is provided in partnership with the Joint Office of Homeless Services confidential shelters. Advocates provide confidential, 24-hour services for survivors. This includes ongoing safety planning and help navigating the domestic violence service continuum.

Mobile advocacy services serve survivors who are at risk of homelessness due to domestic violence. Advocates provide confidential support to survivors who have barriers to accessing available shelter services (ex. large families or those needing accommodation for disabilities). Mobile advocates are available to meet survivors anywhere in the county. Services include ongoing risk assessment and safety planning, emergency short-term motel stays, and support navigating the domestic violence system.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of domestic violence survivors and children receiving comprehensive, specialized crisis services	416	400	400	400
Outcome	Percentage of adult survivors who engaged in safety planning with an advocate	91%	90%	90%	90%

### Performance Measures Descriptions

**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$411,300	\$0	\$452,856	\$0
<b>Total GF/non-GF</b>	<b>\$411,300</b>	<b>\$0</b>	<b>\$452,856</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$411,300</b>		<b>\$452,856</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 2023: 25041 YFS - Domestic Violence Crisis Services

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

In their lifetimes, 1 in 4 women and 1 in 9 men will experience domestic violence. To serve a diverse community of survivors, our system must be collaborative. Domestic and Sexual Violence Coordination provides planning, coordination, evaluation, and support for the continuum of domestic and sexual violence services in Multnomah County

### Program Description

**ISSUE:** Domestic violence is 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. Domestic violence is a complex issue that requires a coordinated countywide response that focuses on prevention and support for survivors.

**PROGRAM GOAL:** The goal of the program is to address domestic and sexual violence and support the full continuum of domestic and sexual violence services. Coordination is a key piece of the response. This supports system-wide collaboration and leadership for our community. It also supports our system to work toward improving our services, making them more accessible, and ensuring that the voice of survivors is at the center of our efforts.

**PROGRAM ACTIVITY:** This program undertakes 4 key activities. First, we coordinate system-wide collaboration for the continuum of domestic and sexual violence services. We staff several advisory bodies centering the lived experience of survivors, especially BIPOC survivors and those from underserved communities. We also connect with service providers from across the system to lead system improvement efforts. Second, we lead community engagement work with participants and service providers. This includes engaging survivors from diverse backgrounds as leaders and experts. Third, we provide contract support for the full continuum of funded service providers. We support contract compliance as well as problem solving and connection with program staff. Finally, our work focuses on system-wide quality improvement and planning for future programming.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of survivors from BIPOC and/or underserved communities engaged in community advisory bodies	58%	50%	50%	50%
Outcome	Percentage of non-profit partners receiving higher scores on the 'Performance Indicator tool'	100%	100%	100%	100%
Output	Number of DV Continuum collaborative meetings staffed by the DSVCO	172	150	150	150
Outcome	Percentage of contracted providers reporting that the DSVCO is responsive and supportive of their work	N/A	N/A	N/A	85%

### Performance Measures Descriptions

The Performance Indicator Tool, developed by the Vera Institute of Justice's Center on Victimization and Safety, helps domestic and sexual violence organizations to track their progress in serving survivors who have disabilities.

Contracted providers will be surveyed this fiscal year on the support they receive from the DSVCO

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$587,637	\$198,544	\$627,018	\$89,519
Contractual Services	\$36,623	\$92,849	\$25,927	\$25,800
Materials & Supplies	\$12,228	\$0	\$13,529	\$0
Internal Services	\$120,189	\$27,407	\$114,492	\$4,869
<b>Total GF/non-GF</b>	<b>\$756,677</b>	<b>\$318,800</b>	<b>\$780,966</b>	<b>\$120,188</b>
<b>Program Total:</b>	<b>\$1,075,477</b>		<b>\$901,154</b>	
<b>Program FTE</b>	3.75	1.15	3.77	0.45

Program Revenues				
Fees, Permits & Charges	\$0	\$3,600	\$0	\$3,600
Intergovernmental	\$0	\$315,200	\$0	\$94,588
Other / Miscellaneous	\$0	\$0	\$0	\$22,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$318,800</b>	<b>\$0</b>	<b>\$120,188</b>

Explanation of Revenues

This program generates \$4,869 in indirect revenues.  
 \$50,000 - City of Portland Intergovernmental Agreement (Local)  
 \$44,388 - US Department of Justice, Office on Violence Against Women (Federal)  
 \$22,000 - Weston Grant (Local)  
 \$3,600 - Domestic Partnership Fees (Local)  
 \$200 - Misc Charges/Recoveries (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25044A YFS - Domestic and Sexual Violence Coordination

Reduction of 0.68 FTE is due to a grant funded Program Specialist Senior ending 9/30/23

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Domestic violence is a complex issue, often requiring legal intervention to address client safety and offender accountability. The legal system is complex and navigating it can be traumatic for survivors. High quality legal services assist survivors who choose a legal intervention and need support through the process.

### Program Description

**ISSUE:** The court system can be difficult to navigate without professional legal representation and the cost of legal representation can be a barrier. There are very few resources for legal support available for low income survivors. As a result, survivors are often forced to appear in court without representation or legal advocacy. Survivors and provider agencies report that legal services are one of the highest unmet needs in the service continuum.

**PROGRAM GOAL:** Civil legal services help survivors navigate the court system. Funded programs provide support, consultation and legal representation for survivors.

**PROGRAM ACTIVITY:** Program activities focus on the provision of legal support. These specialized legal services for survivors help ensure better outcomes in legal proceedings. Services include support with restraining order hearings, custody and parenting time, immigration, housing, and other victim's rights related issues.

This program also supports services based in the Multnomah County Courthouse. The Restraining Order Services Room advocates assist survivors in obtaining protection orders. The Court Care program provides childcare in the Courthouse for families attending legal proceedings. Due to the COVID-19 pandemic, courthouse services have moved to remote operation, and Court Care has suspended operation temporarily. In-person courthouse services will resume in line with Oregon Health Authority guidance.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of domestic violence survivors assisted with courthouse-based restraining order advocacy	800	850	1,000	800
Outcome	Percentage of retained cases with a court action filed or contested by an attorney	85%	75%	85%	75%
Output	Percentage of participants who identify as BIPOC	40%	40%	40%	40%

### Performance Measures Descriptions

In FY23, Legal Aid Services of Oregon received some additional funding reallocated from underspent contracts and were consequently able to serve more participants through this contract.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$198,847	\$35,000	\$216,401	\$35,000
<b>Total GF/non-GF</b>	<b>\$198,847</b>	<b>\$35,000</b>	<b>\$216,401</b>	<b>\$35,000</b>
<b>Program Total:</b>	<b>\$233,847</b>		<b>\$251,401</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

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

Explanation of Revenues

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

Significant Program Changes

Last Year this program was: FY 2023: 25046 YFS - Domestic Violence Legal Services

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Domestic violence is a leading cause of violent victimization, accounting for more than 40% of all reported violent crime and 25% of homicides in Multnomah County. Survivors need access to trauma-informed services when the time is right for them. The Domestic Violence Crisis Response Unit (DVCRU) serves survivors in complex and high-risk cases. The DVCRU works with law enforcement to provide crisis response and victim advocacy. This co-located program also helps to ensure that law enforcement has the tools they need to best serve survivors.

### Program Description

**ISSUE:** Complex cases of ongoing, severe abuse require an immediate collaborative response. Strong collaboration between law enforcement and trained advocates can help prevent domestic violence homicides.

**PROGRAM GOAL:** The goal of the DVCRU program is to increase victim safety and offender accountability. DVCRU focuses efforts where there is high risk of homicide or concern of immediate/severe violence.

**PROGRAM ACTIVITIES:** DVCRU advocates are co-located with the Portland Police Bureau Special Victims Unit, and include bilingual/bicultural advocates in an effort to reflect the population of survivors served. Daytime and after-hours victim advocates provide crisis response and support following domestic violence crimes. As essential employees, DVCRU advocates have provided in-person services since the start of the COVID-19 pandemic.

DVCRU includes four program components:

- Domestic Violence Enhanced Response Team (DVERT) coordinates high-risk cases of domestic violence. These cases involve multiple systems and service providers to address survivors' needs. DVERT advocates provide coordination, ongoing support, and advocacy.
- Domestic Violence Response Advocates (DVRA) provide after-hours crisis support following police response to domestic violence related crimes. Advocates are available seven days a week, including late nights and holidays.
- Elder & Vulnerable Adults Advocate collaborates with the Elder Crimes unit. This advocate supports adults over 55 or who have a disability. Advocates provide financial assistance, safety planning and help accessing protection orders.
- Domestic Violence Reduction Unit advocates collaborate with the investigation unit of Portland Police Bureau. DVRU advocates provide advocacy, court accompaniment, and coordination with community agencies.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of survivors receiving multi-disciplinary, intensive intervention	197	250	250	250
Outcome	Percentage of police officers who agree that DV survivors benefit from having DVRA's on the scene	N/A	N/A	N/A	60%
Output	Number of domestic violence survivors referred by police to afterhours victim advocates	417	500	500	500

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$930,077	\$340,903	\$988,119	\$348,827
Contractual Services	\$60,000	\$7,200	\$60,000	\$0
Materials & Supplies	\$7,760	\$0	\$7,940	\$0
Internal Services	\$259,281	\$0	\$222,923	\$0
<b>Total GF/non-GF</b>	<b>\$1,257,118</b>	<b>\$348,103</b>	<b>\$1,278,982</b>	<b>\$348,827</b>
<b>Program Total:</b>	<b>\$1,605,221</b>		<b>\$1,627,809</b>	
<b>Program FTE</b>	8.00	3.00	8.00	3.00

Program Revenues				
Intergovernmental	\$0	\$348,103	\$0	\$348,827
<b>Total Revenue</b>	<b>\$0</b>	<b>\$348,103</b>	<b>\$0</b>	<b>\$348,827</b>

Explanation of Revenues

\$348,827 - City of Portland General Fund (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25047 YFS - Domestic Violence Crisis Response Unit

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

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

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

### Executive Summary

Domestic violence is a complex issue, with both individual and community-level effects. Experiencing racism or other forms of oppression intensifies the trauma of domestic and sexual violence. Culturally-specific services address this critical intersection through relationship-based advocacy and support. Trusted community-based providers administer these programs. They provide high-quality, holistic services to survivors and their families.

### Program Description

**ISSUE:** The experience of domestic and sexual violence can differ depending on the community. Cultural considerations are an important factor in effective service delivery. Survivors report an increased level of comfort when they are able to access services from within their own community.

**PROGRAM GOAL:** To prevent and address domestic violence in under-served communities by providing access to high-quality, relationship-based advocacy services.

**PROGRAM ACTIVITY:** This program funds domestic violence services for the following populations: African American, Latinx, Native American, immigrants and refugees, LGBTQ, older adults and people with disabilities. Culturally-specific services are reflective of the needs and values of survivors from these communities. Survivors can access safety planning, advocacy, case management, and help navigating systems. Programs offer support accessing housing, legal support, and financial assistance. Programs also connect survivors with natural support networks in their community. This supports long-term healing and healthy relationships.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals receiving culturally/population-specific domestic violence services	514	450	450	450
Outcome	Percentage of adult survivors who engage in safety planning with an advocate	89%	90%	93%	90%
Output	Percentage of participants who identify as BIPOC	79%	80%	75%	75%

### Performance Measures Descriptions

\*79% BIPOC and of the 21% identifying as White Alone, Non-Hispanic, 17% also identified as LGBTQ+ and/or Slavic, two of the other populations served through this program

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$761,366	\$0	\$837,198	\$0
<b>Total GF/non-GF</b>	<b>\$761,366</b>	<b>\$0</b>	<b>\$837,198</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$761,366</b>		<b>\$837,198</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: FY 2023: 25048 YFS - Culturally Specific and Underserved Domestic & Sexual Violence

**Department:** County Human Services

**Program Contact:** Alix Sanchez

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

In the wake of a sexual assault, many support services require a survivor to engage with the criminal justice system. Sexual assault survivors need access to advocacy, regardless of whether they choose to prosecute their offender. This program supports community-based sexual assault advocacy to address the unique needs of survivors. These services are mobile, and available 24/7. All services are provided by contracted, community-based nonprofit agencies.

**Program Description**

**ISSUE:** Oregon has the second-highest lifetime prevalence of sexual assault in the country. Crisis lines in Multnomah County report more than 2,000 calls each year seeking sexual assault services. 75% of survivors choose to avoid working with the criminal justice system. Because of this, they are not eligible for traditional sexual assault victim services. Many 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 to survivors regardless of their choice to engage with the criminal justice system.

**PROGRAM ACTIVITY:** This program funds services to survivors of rape or sexual assault. Mobile advocates connect with survivors in a variety of non-traditional settings including hospitals, health clinics, urgent care centers, shelters, and schools. Funded positions include 24/7 crisis response, as well as bilingual/bicultural advocacy.

Sexual assault advocates provide medical and legal advocacy, case management, and flexible client funds for emergency needs. Limited relocation funds are also available. Contracted providers work with a variety of partners to coordinate our community's response to sexual assault.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of sexual assault survivors who receive specialized crisis services	175	100	100	150*
Outcome	Percentage of adult survivors who engage in safety planning with an advocate	88%	90%	90%	90%

**Performance Measures Descriptions**

Additional contracted FTE were added to this PO in FY23

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$136,189	\$0	\$173,413	\$0
Contractual Services	\$607,304	\$0	\$668,661	\$0
Internal Services	\$0	\$0	\$20,904	\$0
<b>Total GF/non-GF</b>	<b>\$743,493</b>	<b>\$0</b>	<b>\$862,978</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$743,493</b>		<b>\$862,978</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 2023: 25049A YFS - Sexual Assault Services

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

**Related Programs:** 30303B

**Program Characteristics:**
**Executive Summary**

The Gateway Center is a drop-in service center which serves as a primary access point for domestic and sexual violence services in Multnomah County. Gateway Center provides a wide range of critical services to survivors and their children. These services ensure that survivors can learn about and access available resources, and get support navigating complex systems. The Gateway Center contracts for services from a wide variety of culturally-specific partners. This supports equitable access for a diverse population of survivors.

**Program Description**

**ISSUE:** Domestic violence is 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. Domestic violence is a complex issue. Survivors often need support to access available resources and understand their options.

**PROGRAM GOAL:** The goal of the Gateway Center is to address the impact of domestic and sexual violence, and prevent further harm. Gateway provides access to critical services and safety planning in a trauma-informed, culturally-responsive and welcoming environment. The Gateway Center seeks to interrupt the cycle of power and control that survivors experience by centering survivor autonomy and choice, and improving access to services and resources.

**PROGRAM ACTIVITY:** This program funds the Gateway Intake Team and contracted navigation/support services, and legal advocacy services. The Gateway Intake Team coordinates a complex service delivery system. This consists of 16 on-site partners including civil attorneys, prosecutors, DHS, and 12 nonprofits. The intake team is the initial point of contact for every survivor served by the Gateway Center (more than 10,000 in 2021). The Intake team assesses, triages and refers each survivor to the appropriate services. The team also manages a busy satellite courtroom in partnership with the Multnomah County Circuit Court. This allows survivors to access protection orders remotely, with support from trained advocates.

Contracted services include Navigators trained to provide high quality domestic violence advocacy. Navigators provide a broad spectrum of services including safety planning, support with restraining orders, access to financial assistance, and economic empowerment services. During the COVID-19 pandemic, Gateway Center services have been primarily offered remotely. However, at least one staff member is present during regular hours of operation to ensure emergency walk-in participants can be accommodated if needed.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of community members who are able to access protection orders at the Gateway Center <sup>1</sup>	1,375	1,300	1,300	1300
Outcome	Percentage of participants reporting increased knowledge of and access to resources	87%	85%	85%	85%
Output	Number of domestic violence and/or sexual assault survivors seen at intake for legal consultation	412	375	375	375
Output	Number of retained cases with immigration relief actions filed by legal service attorneys	22	14	14	14

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$205,833	\$583,438	\$218,535	\$578,429
Contractual Services	\$136,261	\$711,597	\$150,028	\$518,888
Materials & Supplies	\$12,273	\$7,500	\$8,350	\$0
Internal Services	\$258,983	\$75,513	\$339,382	\$30,731
<b>Total GF/non-GF</b>	<b>\$613,350</b>	<b>\$1,378,048</b>	<b>\$716,295</b>	<b>\$1,128,048</b>
<b>Program Total:</b>	<b>\$1,991,398</b>		<b>\$1,844,343</b>	
<b>Program FTE</b>	2.00	4.00	2.00	5.00

Program Revenues				
Intergovernmental	\$0	\$1,378,048	\$0	\$1,128,048
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,378,048</b>	<b>\$0</b>	<b>\$1,128,048</b>

Explanation of Revenues

\$1,128,048 - City of Portland Intergovernmental Agreement (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25050A YFS - Gateway Center

1.00 FTE Case Manager 2 is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. This position was added during FY 2023 per budget modification DCHS-008-23. See program 30303B for the associated costs and program information.

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30407A  
**Program Characteristics:**

**Executive Summary**

The Youth and Family Services Division (YFS) aims to provide high quality, equitable, and culturally relevant services that help people thrive. The YFS Administration provides strategic division-wide leadership to support this goal. This means using a racial equity lens to oversee daily operations, develop budgets, design programs, and manage contracts. YFS Administration also supports its staff so that they can experience safety, trust, and belonging in the workplace.

**Program Description**

**ISSUE:** The Youth and Family Services Division supports the County’s investments in five areas: Energy Services, Housing Stability, Education Supports, Early Childhood, and Domestic & Sexual Violence. It is also the County’s Community Action Program office. The YFS Administration supports 29 programs and has been vital to COVID relief efforts in Multnomah County.

**PROGRAM GOAL:** The YFS Administration is committed to equity, accountability, and quality of service. It provides the infrastructure needed to guide programs, drive policy, and build partnerships. Together with staff, YFS Administration seeks to uplift the Department’s North Star: That every person at every stage of life has equitable opportunities to thrive.

**PROGRAM ACTIVITY:** Anchored by racial equity, the YFS Administration supports the division in a few ways. 1) Ongoing budget development and monitoring. This includes ensuring that YFS activities adhere to funding guidelines. 2) Overseeing daily operations for the division. This includes supervising staff and creating structures that foster innovation and creativity. 3) Supporting staff and improving workplace culture, with staff experience at the core. 4) Convening and supporting partners in the community. 5) Uplifting Department priorities, such as the WESP and the North Star. YFS Division Administration and staff have continue to support partners and community providers in long term pandemic response and relief activities in each of the Division’s five core areas.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of invoices processed within 30 days.	1,033	N/A	90%	90%
Outcome	Percent of staff & managers who report receiving support for their career and professional development goals. (1)	N/A	60%	60%	60%

**Performance Measures Descriptions**

(1) This was a new measure for the division for FY23, created in response to feedback from BIPOC staff regarding a desire for more professional development and mentorship opportunities.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,980,146	\$0	\$2,130,431	\$0
Contractual Services	\$51,020	\$0	\$51,020	\$0
Materials & Supplies	\$36,561	\$0	\$41,785	\$0
Internal Services	\$364,378	\$0	\$318,428	\$0
<b>Total GF/non-GF</b>	<b>\$2,432,105</b>	<b>\$0</b>	<b>\$2,541,664</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,432,105</b>		<b>\$2,541,664</b>	
<b>Program FTE</b>	13.00	1.00	13.00	1.00

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 2023: 25118A YFS - Youth & Family Services Administration

The 1.00 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30407A for the associated costs and program information.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

Youth & Family Services Division (YFS) manages funding from multiple sources. In FY 2022, YFS had over 70 grants, from both Federal and State sources. A strong staffing infrastructure is critical for Youth and Family Services (YFS) to meet the needs of our internal and external partners, staff, Departmental needs and requests from elected officials. The Division staff support has not increased to match the significantly increased funding, contracting and project management activities expected by the Division.

**Program Description**

**ISSUE:** A strong staffing infrastructure is critical for YFS to meet the needs of our internal and external partners, staff, the entire Department, and requests from elected officials. The Division staff support has not increased to match the significantly increased funding in the Division (General Fund and COVID related). Our needs for budget related information, contract amendments, procurement and specialized data have increased. YFS serves as a pilot division for innovative programming, and we often manage new procurements and support contractors new to the County. These 2 positions build our capacity to respond to these needs and create balance in existing workloads. As a Division that is largely administrative, staff capacity is stretched as the amount of revenue increases, impacting number of contracts, data collection and reporting needs.

**PROGRAM GOAL:** The goal of YFS Staff Capacity Increase is to effectively meet the needs of our internal partners, staff, Departmental needs and requests from elected officials.

**PROGRAM ACTIVITY:** The Division is responsible for providing, contracting for, and/or coordinating the County's investments in five core areas: Energy Services, Housing Stability, Education Supports, Early Childhood, and Domestic and Sexual Violence. The Division functions as the County's legislatively mandated Community Action Program Office. YFS Staffing Capacity Increase will be responsible for the following activities: 1) Write contracts, liaison with contracted partners, and manage agency budgets and invoices; and 2) Develop data dashboards, presentations, infographics and related materials for presentations and other dissemination to share the work of YFS.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of invoices processed within 30 days.	N/A	N/A	N/A	250
Outcome	Dashboards and infographics produced to monitor spending and track activities	N/A	N/A	N/A	6

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$258,819	\$0
Materials & Supplies	\$0	\$0	\$28,425	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$287,244</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$287,244</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:

In FY 2024, this program adds 1.00 FTE Program Specialist (6021) and 1.00 FTE Data Analyst (6073).

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

In order for people to have quality of life, they need to have enough heat in their home, the lights on, and hot water. Functional utilities help ensure that a young person can learn at home, an older adult is safe, and families remain stable. This is even more important during the COVID-19 pandemic, where staying home means saving lives. The Energy Assistance Program (EAP) supports housing stability by providing financial help to people who live on a fixed or low income. The EAP emphasizes providing equitable access for all people who need help meeting their energy needs.

**Program Description**

**ISSUE:** The average energy burden for low-income households is 8.2% - 3 times higher than higher-income households. Many low-income households use expensive heating fuels. Their homes are often older and less efficient, and they face barriers to accessing the technology that would help reduce their energy costs. Additionally, Black, Indigenous, and Communities of Color bear a further disproportionate energy burden. In 2016, the American Council for Energy Efficient Economy found that almost half of all energy-poor households in the US were Black. We also know that people in BIPOC households were more likely to lose their jobs or experience a reduction in wages during the COVID-19 pandemic. These added economic hardships can make it even more difficult for households to meet their basic energy needs.

**PROGRAM GOAL:** The Energy Assistance Program provides one-time annual energy bill payments for households who live on a fixed or low income and who are struggling with energy costs. This will help keep these families in stable housing.

**PROGRAM ACTIVITY:** The Energy Assistance Program provides direct utility payments to income-eligible households. The EAP also provides energy education, case management, and other services. This helps households manage and pay for their energy costs, as well as learn about other services. The EAP consists of seven community nonprofit agencies who deliver the energy bill payments for fixed and low-income households. On average, program participants received \$670 in utility help last year. To better meet community needs, the EAP is prioritizing culturally-specific outreach to BIPOC populations, as well as elders and families who may need energy cost help.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served. <sup>1</sup>	30,193	16,500	30,000	30,000
Outcome	Percentage of households served after receiving shutoff notice who avoid disconnection.	100%	100%	100%	100%

**Performance Measures Descriptions**

<sup>1</sup> Increased output reflects additional one time funding sources as part of COVID-19 relief efforts.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$962,106	\$0	\$1,159,808
Contractual Services	\$0	\$11,103,767	\$0	\$14,960,391
Materials & Supplies	\$0	\$170,129	\$0	\$477,383
Internal Services	\$0	\$352,134	\$0	\$319,787
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,588,136</b>	<b>\$0</b>	<b>\$16,917,369</b>
<b>Program Total:</b>	<b>\$12,588,136</b>		<b>\$16,917,369</b>	
<b>Program FTE</b>	0.00	8.40	0.00	10.00

Program Revenues				
Intergovernmental	\$0	\$12,588,136	\$0	\$16,917,369
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,588,136</b>	<b>\$0</b>	<b>\$16,917,369</b>

Explanation of Revenues

This program generates \$142,886 in indirect revenues.

\$9,036,377 - OHCS D Low Income Energy Assistance Program - Energy (LIEAP) (Federal). Increased by \$3.7 million from FY 2023.

\$7,321,479 - OHCS D Oregon Energy Assistance Program (OEAP) (State). Increased by \$1.4 million from FY 2023.

\$479,513 -Federal LIH Water Assistance Program (LIHWA) Consolidated Appropriations (Federal). Decreased by \$780K from FY 2023.

\$80,000 - PDX Water/Sewer D/A (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25119 YFS - Energy Assistance

In FY 2024, decreased by 2.40 FTE Weatherization Experts that moved to program offer YFS - Weatherization (25121A).

In FY 2024, increased by 4.00 FTE (3.00 Program Technicians and 1.00 FTE Program Specialist) that moved from program offer COVID-19 Energy & Housing Services (25491). In FY 2023, these FTE were budgeted in the Coronavirus (COVID-19) Response Fund (1515). In FY 2024, these FTE are budgeted in the Federal/State Fund (1505).

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

People's homes need to be safe, comfortable, and energy efficient. Energy efficiency creates healthier, safer living environments. It also saves people living on fixed and low incomes money so that they can keep it for when they need it most. The Weatherization Program uses County staff and contracted vendors to provide energy use audits, weatherization services, furnace repair and replacement, and appliance replacement to fixed and low-income households.

### Program Description

**ISSUE:** According to the Department of Energy, every weatherized home saves its occupants about \$300 each year on energy bills, on average. Low-income people spend a higher percentage of their income on energy costs compared to people with higher incomes. Black, Indigenous, and People of Color are even more likely to experience these burdens because their communities receive less investment. The Weatherization Program reduces some of these challenges by saving people money and reducing pollution impacts. This improves health, helps fight the climate crisis, and, through the use of contracted vendors, helps people get back to work.

**PROGRAM GOAL:** The Weatherization Program aims to make homes more livable and affordable for low income residents. Weatherized homes help reduce energy consumption and lower utility bills. Those who are living in weatherized homes are also safer and healthier. Energy efficiency also reduces the energy burden and creates significant greenhouse gas savings.

**PROGRAM ACTIVITY:** The Weatherization Program provides home energy audits to low-income households. This includes older adults, people with disabilities, Veterans, communities of color, and families. The energy audits determine the scope of repairs and/or improvements needed for the home. These repairs reduce energy use and lower utility bills so that the home is more comfortable and safe. Weatherization services might include: insulating attics, floors, and walls; air and duct sealing; and repairing/replacing heating systems. Every household also receives energy education and information about other community services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served. <sup>1</sup>	174	200	200	250
Outcome	Percent of individuals served who identify as Black, Indigenous, and People of Color. <sup>2</sup>	48%	70%	70%	70%

### 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. The output is low due to the staffing capacity and supply chain issues. We anticipate that these impacts will continue for FY 2023. However, output for FY24 is estimated to be higher due to state & federal funding increases.

<sup>2</sup> This is a new measure for the program, in order to better center racial equity in outreach and other program activities.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$796,162	\$0	\$1,540,372
Contractual Services	\$0	\$3,911,696	\$0	\$5,290,619
Materials & Supplies	\$0	\$178,271	\$0	\$326,027
Internal Services	\$0	\$362,343	\$0	\$374,021
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,248,472</b>	<b>\$0</b>	<b>\$7,531,039</b>
<b>Program Total:</b>	<b>\$5,248,472</b>		<b>\$7,531,039</b>	
<b>Program FTE</b>	0.00	6.60	0.00	12.00

Program Revenues				
Intergovernmental	\$0	\$4,703,472	\$0	\$6,986,039
Beginning Working Capital	\$0	\$545,000	\$0	\$545,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,248,472</b>	<b>\$0</b>	<b>\$7,531,039</b>

Explanation of Revenues

This program generates \$189,773 in indirect revenues.  
 \$3,961,556 - OHCS D ECHO (SB1149) (State)  
 \$1,542,449 - OHCS D Low Income Energy Assistance Program - Weatherization (Federal)  
 \$915,857 - DOE Bipartisan Infrastructure (Federal)  
 \$540,000 - County Weatherization Rebates (Local)  
 \$461,629 - OHCS D DOE Weatherization (Federal)  
 \$84,548 - Low Income Energy Assistance Program - Client Education (Federal)  
 \$10,000 - Energy Conservation show rebates (Local)  
 \$10,000 - PDX Water and Sewer (Local)  
 \$5,000 - Beginning Working Capital (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25121A YFS - Weatherization

In FY 2024, increased by 2.40 FTE Weatherization Expert that moved from program offer YFS - Energy Assistance (25119).

In FY 2024, increased by 3.00 FTE (1.00 Weatherization Inspector, 1.00 Program Technician, and 1.00 Program Supervisor) that moved from program offer COVID-19 Energy & Housing Services (25491). In FY 2023, these FTE were budgeted in the Coronavirus (COVID-19) Response Fund (1515). In FY 2024, these FTE are budgeted in the Federal/State Fund (1505).

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

**Related Programs:** 10095

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

**Executive Summary**

This program continues a Wood Stove Replacement Program for Multnomah County. The program exchanges wood stoves for new furnaces or heat pumps. This program impacts air quality, health and climate change. It funds 2.00 limited duration assignment (LDA) staff to build and carry out the program. Funding for equipment and installation will come from American Rescue Plan (ARP) funds originally given to the Office of Sustainability. This program is modeled after a similar successful effort in Washington County.

**Program Description**

**ISSUE:** Clean air greatly affects the health and safety of people who live in Multnomah County. Smoke from burning wood to heat homes is a major cause of air pollution. Higher levels of wood smoke in the air have been connected to higher levels of sickness like heart and lung illnesses.

Wood smoke pollution is an environmental justice issue for Black, Indigenous and other People of Color. Black, Latinx and Indigenous people also have higher rates of asthma than other groups. Reducing wood smoke will benefit these groups. It is also a way for the county to have a positive effect on the heat problems we face due to climate change and on the lives of all people in the county.

**PROGRAM GOAL:** Improve the environment and lives of people in Multnomah County by providing more efficient heating that will reduce air pollution and result in better health of 1) those living in the homes with new heating, 2) those living in nearby areas, 3) BIPOC people who experience more pollution and higher rates of lung problems and 4) the county as a whole.

**PROGRAM ACTIVITY:** The Wood Stove Replacement Program provides a woodstove exchange program. Households can replace an old wood stove, fireplace or fireplace insert with a cleaner, more efficient option such as a new furnace or a heat pump. People who use wood as their main source of heat would receive the new heating. The program includes 2.00 LDA staff to carry out the program including reaching out to people heating with wood, signing them up, doing inspections and managing contracts to do the replacement work. Funding for equipment and installation will come from state ARP funds originally given to the Office of Sustainability. In addition, a small fund of client assistance is included to help support the change and pay for higher electric bills. This program is modeled after a similar successful effort in Washington County.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of wood stoves replaced	N/A	100	20	50
Outcome	Wood stove replacement project plan completed and implemented	N/A	100%	100%	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$244,283	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$244,283</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$244,283</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:** FY 2023: 25121C YFS - Wood Stove Replacement

In FY 2023 this program was funded with one-time-only General Fund (PO 25121C). The program is requesting one-time-only funding for a second year in FY 2024

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25139  
**Program Characteristics:**

**Executive Summary**

The Family Unification Project (FUP) is a culturally specific program and it addresses the consequences of systemic racism in the Child Welfare system--especially the high rates of Black, Indigenous and Children of Color. FUP helps secure safe and stable housing which is a foundation for reunification with the children. The program is a partnership with County Human Services, Youth & Family Services (DCHS/YFS), Oregon Department of Human Services (DHS), Home Forward (HF), Metropolitan Public Defenders and community agencies. Direct services are contracted to non-profits. YFS staff support FUP through program development by bringing service providers together, offering guidance and support to providers and contract monitoring.

**Program Description**

**ISSUE:** The legacy of systemic racism in Child Welfare profoundly affects families. Black, Indigenous, Native and families of color are overrepresented in the DHS child welfare system. Because of the impacts of racism, FUP uses culturally specific approaches of family engagement and support in order to help keep/regain custody of their child/children, including housing, education, employment, child care and parenting support.

**PROGRAM GOAL:** The program goal is to provide culturally specific services to support and empower families so they can remain intact and/or reunite, remain stably housed, and exit from DHS child welfare system involvement.

**PROGRAM ACTIVITY:** Each organization receiving FUP funds provides a key service to help families. This ensures families have a comprehensive and coordinated range of supports. Home Forward provides HUD-funded Housing Choice vouchers for families with DHS child welfare involvement. DCHS/YFS provides funds for case management through culturally specific and responsive community agencies, and DHS supports family reunification. Case managers use the Assertive Engagement model which recognizes the individual as the expert in their own life and helps families choose their own path and goals. Metropolitan Public Defenders help remove legal barriers, such as record expungement and mitigation of fines. Flexible service options are also available and may include payments for household and life-needs, supporting involvement in groups and activities and related services.

The range of services FUP provides help families, especially those from Black, Indigenous, and Communities of Color to reunite and remain stably housed.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of families who engage in services	88	135	135	135
Outcome	Percent of families that engage in case management	68%	80%	80%	80%

**Performance Measures Descriptions**

FY22 output is lower due to partner staffing capacity challenges.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$577,352	\$0	\$627,725	\$0
<b>Total GF/non-GF</b>	<b>\$577,352</b>	<b>\$0</b>	<b>\$627,725</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$577,352</b>		<b>\$627,725</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: FY 2023: 25130 YFS - Family Unification Program

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Multnomah County is in a severe housing crisis and many low-income residents lack housing and/or economic stability. Having legal issues and not having financial resources to address them are roadblocks to overall stability. It can prevent access to housing, employment, education and community involvement. Black, Indigenous, Native and Communities of Color and people with disabilities are disproportionately impacted by debt and legal barriers because of systemic racism and discrimination. Legal services and supports help remove legal issues that may be barriers to opportunity and stability.

### Program Description

**ISSUE:** Residents experiencing poverty, in particular Black, Indigenous and Communities of Color and people with disabilities often experience discrimination and more frequent contact with the criminal justice system. This systemic racism results in legal and financial barriers that prevent them from accessing housing, employment, education and other opportunities.

**PROGRAM GOAL:** Legal Services and Supports provide free legal services and advice to participants who need assistance with fines, fees and other legal issues. By reducing and/or eliminating the legal issues, it removes barriers to housing, employment, education, etc. and thus increases the potential for stability and opportunity

**PROGRAM ACTIVITY:** This program uses two strategies: Legal Service Days and Community Legal Clinics.

1) **Legal Service Days:** District Attorneys, Judges, Public Defenders and Social Services agencies collaborate to host legal clinics which help clients reduce or eliminate fees, fines and legal barriers. These legal clinics are located virtually, and when in-person, throughout the County, close to low-income residents and Communities of Color. This program has continued throughout the pandemic and there has been an increase in the number of community members served compared to pre-pandemic in-person events.

2) **Community Legal Clinics:** To increase trust and engagement, contracted legal services staff Attorneys work with culturally specific case managers and County program staff. and receive referrals to no cost barrier screening, representation and legal services. Participants are engaged in the Multnomah Stability Initiative (MSI), and the Family Reunification Program (FUP). Legal supports depend on the individual need and include expungement, eviction prevention, housing voucher hearings, reduction of fees and fines, drivers' license restoration, felony reduction, appeal of exclusions, gang designations and other legal barrier removal cases.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants engaged in services <sup>1</sup>	916	2,500	1,175	1,175
Outcome	Percentage of participants receiving legal advice or services resulting in barrier reduction	100%	90%	90%	90%
Output	Amount of fees and fines waived or reduced	\$2,468,191	\$1,000,000	\$1,000,000	\$1,000,000

### Performance Measures Descriptions

<sup>1</sup>Output is a combined total of individuals engaged in legal services and group based legal service days. FY23 estimate is higher due to one-time-only funds; these are not expected to continue into FY24.

**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$431,914	\$0	\$475,552	\$0
<b>Total GF/non-GF</b>	<b>\$431,914</b>	<b>\$0</b>	<b>\$475,552</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$431,914</b>		<b>\$475,552</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 2023: 25131 YFS - Legal Services & Supports

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Economically disadvantaged people and people of color are 20x more likely to be incarcerated, and even a single arrest can lead to the loss of housing, jobs, children, benefits, and education, creating immediate and intergenerational trauma. Incarceration causes irrevocable harm to about 70 million Americans, exacerbates inequity, and does not make our communities safer. Defense based case managers will provide necessary support to these individuals.

**Program Description**
**ISSUE:**

Individuals charged with a crime in Multnomah County often have a high level of need for services. While the type will differ for each client, the most common stabilizing services include housing (temporary, short-term, and long-term), behavioral health, medical, employment, and family/child care. However, given the scarcity of these services, as well as the complexities of accessing them, most clients will not engage with them without assistance.

**PROGRAM GOAL:**

Defense-based case managers are uniquely situated to provide that type of support to pretrial clients. In addition to assurances of confidentiality, defense-based case managers can effectively engage clients through shared experience. Case managers with lived experience and/or prior system involvement can connect with clients in ways that system actors, and even defense counsel cannot. They can offer clients advice based on their own struggles with substances, plug clients into existing recovery support networks, and overcome barriers of distrust and skepticism of the criminal legal system. Including a defense-based case manager in the process allows service coordination engagement at the outset of the criminal case.

**PROGRAM ACTIVITY:**

The case manager will inquire about service needs and assist the client in accessing them. A strengths and needs evaluation can be conducted quickly and will assess all of the relevant service needs for each client. Depending on the client's needs, the information collected can be used for immediate referrals to services or be passed along to the defense attorney appointed for future referrals and/or release planning.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of clients connected to Peer Support Case Managers	N/A	200	200	200
Outcome	Percent of clients have been connected to services	N/A	N/A	N/A	75%

**Performance Measures Descriptions**

Program began in FY23; there are no performance measures for FY22.



**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$500,000	\$0	\$550,517	\$0
<b>Total GF/non-GF</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$550,517</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$500,000</b>		<b>\$550,517</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 2023: 25131B YFS - Peer Navigators

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

This program funds services that support renters so they can remain housed and avoid eviction. It provides access to up-to-date and accurate information about their rights as renters. It also provides legal representation to clear eviction notices.

**Program Description**

**ISSUE:** COVID-19 has deepened the housing crisis and increased housing instability for many in Multnomah County with disparate impacts of health, employment and housing instability for Black, Indigenous, Latinx and other Communities of Color. A lack of affordable housing along with job loss, confusion related to changes in the law, and the health consequences of COVID-19 are some of the factors that contribute to the current crisis. Accessing resources and navigating the evolving legal protections has also been difficult and renters can benefit from services that help them take advantage of existing eviction protections. Additionally, once eviction protections end, there will be a higher need for eviction support services.

**PROGRAM GOAL:** Renters in Multnomah County will have a resource that provides accurate and timely information. It will also help them access the legal protections and rental assistance they may be entitled to for eviction protection.

**PROGRAM ACTIVITY:** There are two primary program activities. The first activity focuses on providing updated legal information and education services to renters in the County. To make it easy to access, services will be provided in multiple formats including, but not limited to a Renters Right Hotline, website, social media, and hard copies. Additional education services are available and/or can be created to ensure information is up to date, accurate, and tailored to the diverse communities needing eviction protections, during the pandemic recovery period and beyond. These programs offer culturally specific services and has community connections and relationships with culturally specific organizations. The second activity is legal services. These will capitalize on existing services and capacity as well as develop new resources to provide comprehensive eviction prevention support.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people receiving legal information, education and referral services	1,458	1,500	1,500	1,500
Outcome	Renters who engage with legal representation to achieve dismissal of their case.	182	300	300	300

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$400,000	\$0	\$411,428	\$0
<b>Total GF/non-GF</b>	<b>\$400,000</b>	<b>\$0</b>	<b>\$411,428</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$400,000</b>		<b>\$411,428</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 2023: 25131C YFS - Eviction Prevention Support

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 25131E  
**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. Having legal issues and/or not having financial resources to address them are roadblocks to overall stability and prevent access to housing, employment, education and community involvement. Black, Indigenous, Native and communities of color and people with disabilities are disproportionately impacted by debt and legal barriers because of systemic racism and discrimination. Expanding capacity for Legal Services Days and making them all virtual will increase participation and engagement.

**Program Description**

**ISSUE:** Residents experiencing poverty, in particular people of color, experience discrimination and disproportionate contact with the criminal justice system. This systemic racism results in legal and financial barriers that prevent them from accessing housing, employment, education and other opportunities.

**PROGRAM GOAL:** Provide low barrier, easy access to virtual legal services in order to reduce legal barriers to safe housing, employment and educational opportunities.

**PROGRAM ACTIVITY:** Provider will conduct outreach about Legal Services Days to communities of color disproportionately affected by the justice system including but not limited to outreach to culturally specific providers of County programs. They will also hold virtual legal service days and at least one in-person legal service day (pandemic permitting), for low income residents of Multnomah County. Throughout the pandemic the virtual legal service days have proven to be more effective in engaging more people of color than pre-pandemic in-person events. Travel to a site, waiting in line and re-arranging schedules are three areas that virtual events have become more available. Services provided shall include, but are not limited to: Reduction or waiver of fees and fines; expungement of convictions, arrests and dismissed cases; resolution of bench warrants; early termination of successful probation; dismissal of up to three TriMet fare violations; dismissal of marijuana violations; screening of records; driver's license restoration; navigation of court orders and obligations; reduction of qualifying marijuana convictions; review of open or pending cases and warrants; connection with community organizations for fulfillment of community service hours; approval of completion of community service hours; and other services as needed.

The full expungement process includes eligibility analysis, paperwork preparation, court filing, fingerprint processing, and representation at court if required.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants engaged in services	N/A	700	814	700
Outcome	% of participants receiving legal advice or services resulting in barrier reduction	N/A	90%	100%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$262,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$262,500</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$262,500</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: FY 2023: 25131D YFS - Expungement and Legal Services Days

In FY 2023 this program was funded with one-time-only General Fund.



**Program #25131E - YFS - Expungement and Legal Services Expansion** FY 2024 Adopted

**Department:** County Human Services **Program Contact:** Peggy Samolinski  
**Program Offer Type:** New **Program Offer Stage:** 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. For many renters, a criminal conviction on their record can be a barrier to securing and maintaining stable housing. This offer provides one time only funding to enhance record expungement activities to reduce expungement process wait time and backlogs that currently exist in the District Attorney's office.

**Program Description**

**ISSUE:** Residents experiencing poverty, in particular people of color, experience discrimination and disproportionate contact with the criminal legal system. This systemic racism results in legal and financial barriers that prevent them from accessing housing, employment, education and other opportunities. Recent legislative efforts to address the issue have created an unintentional bottleneck in the DA's office, particularly for people who apply for expungement and who don't have an attorney (pro se applicants).

**PROGRAM GOAL:** Provide a staff attorney who can help expedite the expungement process, with a focus on pre-screening cases for pro se applicants. This prescreening is intended to relevant cases from the backlog and create efficiencies in the current system.

**PROGRAM ACTIVITY:** Provider will work on existing record expungement processes in partnership with the County DA's office. They will meet with pro se expungement applicants to better understand whether they actually qualify for expungement, have completed the correct paperwork and resolve any other issues that may create a delay in the process. The full expungement process includes eligibility analysis, paperwork preparation, court filing, fingerprint processing, and representation at court if required. Creating efficiencies where possible will benefit this entire system and most importantly resolving the backlog that is creating unprecedented delays in expungement hearings.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals served	N/A	N/A	N/A	200
Outcome	Reduce expungement wait time	N/A	N/A	N/A	50%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$140,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$140,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$140,000</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

**Program Offer Stage:** Adopted

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

### Executive Summary

Racism, a lack of affordable housing, and a global pandemic have contributed to housing instability, especially for Black, Indigenous, Native and other Communities of Color. In addition, for those with low or fixed incomes, the lack of affordable housing has been especially devastating. Yet housing is a foundation to individual, family and community stability and well-being. This program provides eviction prevention services to people with low incomes, and focuses on families with children, older adults and people with disabilities. The goal is to both prevent eviction as well as support those who are evicted to secure stable housing.

### Program Description

**ISSUE:** Significant rent increases, a shortage of affordable housing and a global pandemic have contributed to housing instability for many. Individuals and families with low or fixed incomes can benefit from stable housing. Stable housing is also a racial justice issue. Because of the on-going and cumulative impacts of racism, we know many of those who struggle with housing stability are Black, Indigenous, Native and other People of Color.

**PROGRAM GOAL:** This program offers a range of services to both prevent eviction as well as help those who are evicted to secure stable housing.

**PROGRAM ACTIVITY:** This program offer represents two program areas: Short Term Rent Assistance and the Housing Stability Team.

1. Short-Term Rent Assistance program (STRA) is a joint effort between Multnomah County, the City of Portland, and Home Forward. Each organization contributes funds. STRA funds are then given to local social service agencies who work with families who are at risk of homelessness. Because of the impacts of racism, this program prioritizes support to communities of color. Funds can be used for rent assistance, mortgage payment, and emergency hotel vouchers. Assistance is available for up to 24 months. These services help County residents find homes, maintain housing, avoid homelessness, and work on creating a path to economic stability.

2. The Housing Stability Team (HST) provides additional help with housing for people engaged in County programs. Services include eviction prevention, housing stabilization, Assertive Engagement case management, landlord retention services, utility payments, short-term rent assistance, and move-in flexible funds.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households engaged in STRA <sup>1</sup>	1,504	1,000	1,000	1,000
Outcome	Percentage of households engaged who remain in permanent housing six months after exit	91%	70%	70%	70%

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$159,049	\$0	\$152,597	\$0
Contractual Services	\$1,148,956	\$2,053,505	\$1,204,952	\$2,986,607
Materials & Supplies	\$11,018	\$0	\$7,179	\$0
Internal Services	\$35,259	\$0	\$21,216	\$0
<b>Total GF/non-GF</b>	<b>\$1,354,282</b>	<b>\$2,053,505</b>	<b>\$1,385,944</b>	<b>\$2,986,607</b>
<b>Program Total:</b>	<b>\$3,407,787</b>		<b>\$4,372,551</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,053,505	\$0	\$2,986,607
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,053,505</b>	<b>\$0</b>	<b>\$2,986,607</b>

Explanation of Revenues

- \$1,669,782 - OHCSO Emergency Housing Assistance (State)
- \$1,186,880 - State Homeless Response and Prevention Services (HR-PS) (State)
- \$125,762 - State of Oregon Elderly Rent Assistance (State)
- \$4,183 - State Service Provider Investment Program (SPIP) (State)

Significant Program Changes

Last Year this program was: FY 2023: 25133 YFS - Housing Stabilization for Vulnerable Populations (HSVP)

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

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

This program offer funds 1.00 FTE Program Specialist Senior to lead rent assistance projects with Youth & Family Services. Stable housing is linked to a number of positive health and social outcomes for individuals, families and communities--and rental assistance is a key strategy to support renters. The economic and social impact of the pandemic will remain for years to come. This has led to high levels of housing instability and even deeper racial disparities and challenges to pay rent. Additional staff capacity is needed to lead and manage rent assistance programming for the Division and the community.

**Program Description**

**ISSUE:** The shifting housing landscape for renters in the County (with COVID and beyond) has placed a deep emphasis on eviction prevention strategies to support renters to remain stably housed. This work has dominated our Division over the past 3 years, and will continue to do so in the future. Prior to COVID, planning, supporting, aligning and partnership development was only a part of one FTE's portfolio. That piecemeal approach has become unsustainable. YFS needs an FTE that is focused on rent assistance programs, planning, alignment, system partnerships, contracts, reporting, and monitoring.

**PROGRAM GOAL:** Provide eviction prevention leadership, planning and management support through staff capacity.

**PROGRAM ACTIVITY:** These funds will support 1.00 FTE to lead and manage eviction prevention and rent assistance program and planning. This position will be focused on rent assistance programs, planning, alignment, system partnerships, contracts, reporting, and monitoring. Supports will be internal to YFS and will support the ongoing cross jurisdictional collaboration and alignment processes.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Staff hired	N/A	N/A	N/A	1
Outcome	Aligned partnership and system development with partners.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$148,346	\$0
Materials & Supplies	\$0	\$0	\$3,091	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$151,437</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$151,437</b>	
<b>Program FTE</b>	0.00	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:

This program adds 1.00 FTE Program Specialist Senior.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

**Related Programs:** 25490B, 25490C

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

**Executive Summary**

Stable housing is linked to a number of positive health and social outcomes for individuals, families and communities--and rental assistance is a key strategy to support renters. Housing instability as a result of the pandemic and economic impacts continue to place heavy burdens on renters in order to maintain their housing. Governor Kotek declared a state of emergency during her first week in office, and advocated for funding to support eviction prevention. This program implements that Emergency Order for Multnomah County.

**Program Description**

**ISSUE:** Thousands of Multnomah County residents are unable to pay their monthly rent due to the economic impacts of the COVID-19 pandemic. Racial disparities existed before COVID-19 and current national and state trends indicate that the economic hardships of the global pandemic are widening racial inequalities. These trends are mirrored at the local level. For instance, in Multnomah County, the majority of people who rent are BIPOC (Black, Indigenous and People of Color) and are at high risk for eviction

**PROGRAM GOALS:** Provide eviction prevention support through rent assistance payments so that households can remain stably housed.

**PROGRAM ACTIVITIES:** These funds will support eviction prevention for households who meet any of these criteria as directed by the Emergency Order: those with an eviction notice, written notice to vacate, or otherwise in imminent risk of eviction. The Rapid Response Eviction Prevention program led by Bienestar de la Familia will provide outreach, intake and social support services for households who are referred and meet the criteria. This approach prioritizes those who have an eviction notice through several referral sources: the Eviction court docket, 211info, culturally specific organizations and/ or self referrals. Staff will conduct outreach to people's homes to apprise them of the rent assistance support, in addition to sending texts and phone calls to reach tenants at risk and then work with them through the application process.

There are several key partners who are part of the Rapid Response Eviction Prevention program including the Oregon Law Center, Metropolitan Public Defender, 211info and culturally specific nonprofit organizations.

Funds must be expended by 1/10/24.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served	NA	NA	NA	1,426
Outcome	Number of evictions prevented	NA	NA	NA	1,426

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$668,076
Contractual Services	\$0	\$0	\$0	\$4,652,931
Materials & Supplies	\$0	\$0	\$0	\$70,722
Internal Services	\$0	\$0	\$0	\$82,307
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$5,474,036</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$5,474,036</b>	
<b>Program FTE</b>	0.00	0.00	0.00	6.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$5,474,036
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$5,474,036</b>

Explanation of Revenues

This program generates \$82,307 in indirect revenues.  
 \$5,474,036 State Executive Order Oregon Eviction Diversion and Prevention Program

Significant Program Changes

Last Year this program was:

This program includes 2.50 FTE that were in program offer 25490A in FY 2023 and 2.50 FTE that were in 25490C in FY 2023. In FY 2023, these FTE were budgeted in the Coronavirus (COVID-19) Response Fund (1515). In FY 2024, these FTE are budgeted in the Federal/State Fund (1505).

It also converts a position that was limited duration in FY 2023 to 1.00 FTE in FY 2024.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Fair housing audit testing is a tool used to gauge housing discrimination. Locally, the City of Portland funds testing within city limits but Gresham, Fairview, Troutdale and Wood Village are outside the boundaries. This program will extend similar testing to areas in Multnomah County. It will provide insights into housing discrimination experienced by those classified as 'protected class' by the Fair Housing Act. The Fair Housing Act of 1968 considers protected classes to include discrimination based on race, religion, national origin, sex (and as amended) handicap and family status. The results can inform policies and ensure we can identify who is experiencing it, by whom, and that we end housing discrimination.

**Program Description**

**ISSUE:** Discrimination continues to prevent equal access to housing opportunities. Fair housing testing is a tool used to detect discrimination in the housing market. To test for discrimination, people from different backgrounds (different races, ages, abilities, etc.) pretend they will rent or buy a home. They document what information they are given by landlords, the bank, etc. Since the 'testers' have different backgrounds (race, age, ability, etc.) we can compare the information, services and treatment people in protected classes received to what those in non-protected classes received and look for patterns of different treatment in the housing market.

**PROGRAM GOAL:** Build on the City's fair housing testing and expand testing to include East Multnomah County, including Gresham, Fairview, Troutdale and Wood Village.

**PROGRAM ACTIVITY:** This program will fund fair housing testing in East Multnomah County to better understand the level of discrimination in the housing market. The results can inform policies that work to eliminate and prevent housing discrimination.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of fair housing tests conducted in East Multnomah County	15	75	70	70
Outcome	Number of alleged housing discrimination investigations, advocacy & support conducted	10	55	25	25
Output	Number of Fair Housing training and outreach events for direct service staff	11	15	10	10

**Performance Measures Descriptions**

Outputs for FY22 were low due to late program start up and staffing capacity. Outputs for FY24 have been updated to better reflect contracted program performance.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$110,000	\$0	\$121,113	\$0
<b>Total GF/non-GF</b>	<b>\$110,000</b>	<b>\$0</b>	<b>\$121,113</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$110,000</b>		<b>\$121,113</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: FY 2023: 25134 YFS - Fair Housing Testing

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25399R  
**Program Characteristics:**

**Executive Summary**

Everyone should be able to grow up in an environment free of danger and abuse. Youth victims of sex trafficking need a system of care that is culturally-relevant and trauma-informed. Services support healing and a transition into safe and stable adulthood. This program is part of a collaborative that provides survivors with advocacy, shelter, and case management.

**Program Description**

**ISSUE:** The Pacific Northwest has a troubling reputation as a hub for sex trafficking of minors. An estimated 400-600 youth experience trafficking each year in Multnomah County. Youth are often trafficked through gang involvement, or as a result of exploitation in romantic or family relationships. Due to exploitation and abuse, youth often need intensive support to leave these situations.

**PROGRAM GOAL:** The Sex Trafficked Youth services system ensures that youth have support to heal from the trauma of sexual exploitation. New Day services also address economic and housing instability through a collaborative service model. Programming is provided by a collaborative of contracted service providers, including representation from the homeless youth continuum, domestic violence continuum, and culturally-specific organizations.

**PROGRAM ACTIVITY:** This program funds direct services to youth survivors of sex trafficking. It also funds collaboration across Multnomah County to prevent and address trafficking at a system level.

Direct services include drop-in support, mobile crisis services, housing support, and case management. Housing support includes access to one-year housing subsidy and ongoing case management support. Services are holistic and provided by highly-trained advocates. Services are available when youth are ready to engage and tailored to youth based on their specific needs.

System-level collaboration efforts include the Department of Community Justice, law enforcement, courts, Oregon Department of Human Services Child Welfare, the Homeless Youth Continuum, and community-based service providers. This collaboration seeks to prevent and address sex trafficking through coordination, policy, and legislation. Survivors and direct service providers are a critical part of this collaboration. Their expertise and lived experience are essential to our efforts to prevent trafficking.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth engaged in case management supports	94	90	90	85
Outcome	Percentage of youth who know how to access safe and supportive resources	88%	80%	85%	80%
Outcome	Number of youth served who identify as BIPOC	84%	N/A	80%	80%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$611,862	\$310,000	\$673,681	\$0
<b>Total GF/non-GF</b>	<b>\$611,862</b>	<b>\$310,000</b>	<b>\$673,681</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$921,862</b>		<b>\$673,681</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$310,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$310,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

**Last Year this program was:** FY 2023: 25135 YFS - Sex Trafficked Youth Services

In FY 2022, the New Day Collaborative was funded by the Portland Police Bureau (PPB) at \$310,000 in this program. The FY 2023 budget assumed this funding would continue, but the PPB rescinded this funding and it was backfilled with American Rescue Plan (ARP) Direct County Funding at \$70,000 (25399R).

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** Backfill State/Federal/Grant, One-Time-Only Request

**Executive Summary**

Everyone should be able to grow up in an environment free of danger and abuse. Youth victims of sex trafficking need a system of care that is culturally-relevant and trauma-informed. Services support healing and a transition into safe and stable adulthood. This program is part of a collaborative that provides survivors with advocacy, shelter, and case management. This offer backfills a reduction made by the Portland Police Bureau in FY 2022.

**Program Description**

**ISSUE:** The Pacific Northwest has a troubling reputation as a hub for sex trafficking of minors. An estimated 400-600 youth experience trafficking each year in Multnomah County. Youth are often trafficked through gang involvement, or as a result of exploitation in romantic or family relationships. Due to exploitation and abuse, youth often need intensive support to leave these situations. Last fiscal year, Portland Police Bureau chose to rescind its support for the program, and the County stepped in to backfill the deficit with ARPA funding.

**PROGRAM GOAL:** The Sex Trafficked Youth services system ensures that youth have support to heal from the trauma of sexual exploitation. New Day services also address economic and housing instability through a collaborative service model. Programming is provided by a collaborative of contracted service providers, including representation from the homeless youth continuum, domestic violence continuum, and culturally-specific organizations.

**PROGRAM ACTIVITY:** New Day is a collaborative providing services to youth survivors of sex trafficking (ages 14-24). This program funds direct services to youth survivors of sex trafficking. It also funds collaboration across Multnomah County to prevent and address trafficking at a system level. Direct services include drop-in support, mobile crisis services, housing support, and case management. Housing support includes access to one-year housing subsidy and ongoing case management support. Services are holistic and provided by highly-trained advocates. Services are available when youth are ready to engage and tailored to youth based on their specific needs. System-level collaboration efforts include the Department of Community Justice, law enforcement, courts, Oregon Department of Human Services Child Welfare, the Homeless Youth Continuum, and community-based service providers. This collaboration seeks to prevent and address sex trafficking through coordination, policy, and legislation. Survivors and direct service providers are a critical part of this collaboration. Their expertise and lived experience are essential to our efforts to prevent trafficking.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth engaged in specialized case management supports	NA	NA	NA	60
Outcome	Percentage of youth who know how to access safe and supportive resources	NA	78%	80%	80%
Output	Number of youth engaged in outreach services	NA	100	100	100

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$334,800	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$334,800</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$334,800</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

In FY 2022, this program was funded by the Portland Police Bureau (PPB) at \$310,000. In FY 2023, the PPB rescinded this funding and it was backfilled with American Rescue Plan (ARP) Direct County Funding at \$70,000.

Significant Program Changes

Last Year this program was: FY 2023: 25399R ARP - YFS Sex Trafficked Youth Services - New Day Collaborative

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Federal immigration laws and policies have created barriers for many immigrants and refugees. Funding for this program supports contracts to culturally specific organizations who serve Latinx immigrants and refugees. They provide culturally appropriate services that help reduce barriers and increase access to information, legal services and other resources for housing, health, education and employment. YFS staff support program development by hosting meetings with providers, consulting and providing program guidance and help with contracts.

### Program Description

**ISSUE:** Immigrant and refugee communities face many challenges. Even getting information about what is available can be difficult and without it, it can increase fear, be isolating and prevent people from receiving care. In addition, for many reasons it may be difficult to access help and navigate support services. 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 systemic barriers. When fewer families get health care, education or the assistance necessary to become safely housed or employed, it impacts the wellness of the entire community. COVID-19 has amplified the disparities in such access.

**PROGRAM GOAL:** The goal of the program is to ensure that immigrant and refugee families can receive accurate information, and access services that are culturally specific.

**PROGRAM ACTIVITY:** There are three key activities. First: work with agencies who provide culturally specific services and help them increase their ability to serve immigrant and refugee families, especially those they believe are most at risk. Second, increase access to information and education that is culturally specific. Third, offer training and education for immigrants and refugees so they understand their rights and can access legal services.

Culturally specific providers are essential to helping families navigate the legal system. They have ensured there is access to information and services in their own language. This work has ensured that immigrants and refugees who do not speak English have access to legal services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants engaged in intake assessment for navigation services	486	370	370	370
Outcome	Percent of individuals and families who engaged in individualized legal navigation services	38%	40%	40%	40%
Output	Number of community trainings or workshops	63	20	20	20
Output	Number of individuals and families receiving timely and accurate information, referral, education, services.	1418	570	570	570

### Performance Measures Descriptions

Outputs are generally higher than anticipated due to the volume of requests for services. We will work with contractors to adjust outputs to more accurately align with services delivered. Given staff and funding capacity, cannot provide individualized legal nav services to all who request them.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$264,940	\$0	\$291,709	\$0
<b>Total GF/non-GF</b>	<b>\$264,940</b>	<b>\$0</b>	<b>\$291,709</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$264,940</b>		<b>\$291,709</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: FY 2023: 25136 YFS - Culturally Specific Navigation Services for Immigrant Families

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** 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. Successful Families (SF) agencies provide culturally specific, community-based services and support for children of color age 12-17 and their families. SF agencies are currently supporting basic needs, self-care, social-emotional learning, and well-being. This is in response to the disproportionate impact the pandemic has had on communities of color - the population SF serves.

### Program Description

**ISSUE:** Educational barriers for children and youth of color in Multnomah County are extensive. Youth of color regularly experience racism, systemic oppression, and intergenerational trauma. This contributes to disparate outcomes in health, education, and well-being for these youth. During the pandemic, youth engagement and classroom participation has also decreased significantly. As youth feel more isolated, social emotional supports are needed now more than ever.

**PROGRAM GOAL:** Investing in culturally responsive and culturally specific practices reduces educational barriers. This is especially true when done in partnership with schools. SF improves culturally responsive, specific, and relevant services so that children of color can learn better. The initiative aims to increase school readiness and academic achievement so that youth can transition into adulthood successfully.

**PROGRAM ACTIVITY:** SF uses a collective impact model to serve communities of color in ways that best reflect their culture and identity. This requires strong partnership between culturally specific organizations, school districts, and Multnomah County. Successful Families offers one-on-one support to youth, group activities, family engagement and more. These activities might include: leadership development, homework help, cultural identity promotion, and recreation. SF uses the strong relationships and trust built with the community to successfully support youth and families. An important piece of SF during the pandemic has been connecting youth and families to critical resources. SF staff have helped families understand public health information, including vaccine information. According to SF providers, families have appreciated the flexibility and virtual approaches grown out of necessity during the pandemic. SF primarily serves two school districts: Reynolds and David Douglas.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth served	349	1,000	1,000	1,000
Outcome	Percent students served who attended school regularly (are not chronically absent) <sup>1</sup>	Not Available	80%	80%	80%
Output	Number of parents/legal guardians/regular caregivers served <sup>2</sup>	62	700	700	700
Outcome	% of parents/legal guardians/regular caregivers who are engaged w/ schools and monitoring progress <sup>2, 3</sup>	Not Available	75%	75%	75%

### Performance Measures Descriptions

Output data is low due to agency staff capacity and continued COVID protocols in school buildings in FY22, that impacted student and family engagement.

Outcome data is not available for FY22 due to contractor start up with the work and establishing relationships with the school districts and MESD for student-level data sharing.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$126,306	\$0	\$134,960	\$0
Contractual Services	\$2,351,747	\$0	\$2,589,353	\$0
Materials & Supplies	\$50	\$0	\$1,920	\$0
Internal Services	\$25,060	\$0	\$21,216	\$0
<b>Total GF/non-GF</b>	<b>\$2,503,163</b>	<b>\$0</b>	<b>\$2,747,449</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,503,163</b>		<b>\$2,747,449</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 2023: 25137 YFS - Successful Families

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Youth Stability and Homelessness Prevention Services program serves youth under the age of 18. The program offers services to both prevent homelessness as well as support those who are homeless. For those at risk of leaving their current home, the services can help them stabilize their living situation and prevent homelessness. For those who have left, been kicked out or cannot return, the program can provide a rapid response and ensure youth have support and emergency housing. The services are contracted to non-profits who have track records of serving youth with high quality and culturally appropriate services. YFS supports program development by hosting meetings with providers, consulting and providing program guidance and help with contracts.

### Program Description

**ISSUE:** The dynamics and consequences of homelessness can be different for youth than adults. For instance, for youth, homelessness impacts their education and ability to attend or stay in school. Youth need support and services that are tailored to their age, developmental stage, culture and specific circumstances.

**PROGRAM GOAL:** This program addresses the need for services that are tailored to youth who are at risk of or who are experiencing homelessness. The program supports youth so they can stay in school and works to prevent involvement in juvenile justice and child welfare systems.

**PROGRAM ACTIVITY:** This program contracts with community organizations who serve youth under age 18 and prioritizes funding culturally specific organizations. The services focus on three areas:

- 1) Access and Outreach: Text and phone services that are available around the clock, 7 days a week. Mobile response is also available to connect with youth in person and provide transportation if needed. Outreach is conducted at schools as well as youth-serving organizations, DHS and law enforcement.
- 2) Crisis and Stability Support: Needs and safety assessment, emotional support, crisis intervention, safety planning, family mediation and reunification (when possible and appropriate). It also includes connecting youth to a range of other services to promote safety and stability.
- 3) Emergency Housing: Overnight emergency housing options and short-term case management services for youth who are in emergency housing.

During this global pandemic organizations have had to quickly shift the ways they serve youth to follow social distance guidelines. And the need for services that support youth and keep them safe and healthy has deepened during COVID-19.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth engaged in service	104	75	75	75
Outcome	Percent of youth who identify at least one supportive adult outside of the YSHP program, at exit	96%	80%	80%	80%

### Performance Measures Descriptions

Output remains the same across fiscal year as the program is only able to serve 75 youth.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$1,279,564	\$46,651	\$1,408,844	\$46,651
<b>Total GF/non-GF</b>	<b>\$1,279,564</b>	<b>\$46,651</b>	<b>\$1,408,844</b>	<b>\$46,651</b>
<b>Program Total:</b>	<b>\$1,326,215</b>		<b>\$1,455,495</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$46,651	\$0	\$46,651
<b>Total Revenue</b>	<b>\$0</b>	<b>\$46,651</b>	<b>\$0</b>	<b>\$46,651</b>

Explanation of Revenues

\$46,651- OCCF Youth Investment (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25138A YFS - Youth Stability & Homelessness Prevention Services

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30407A  
**Program Characteristics:**

### Executive Summary

The Multnomah Stability Initiative (MSI) is an antipoverty program that offers a range of culturally specific and responsive services. It supports families by recognizing that they are experts in their own lives and they are resilient. It also assumes that families should make their own goals around stability and income. A key to MSI is the ability to provide culturally responsive services and flexibility while supporting families. As part of leading with racial equity, 60% of funds are for culturally specific organizations. This ensures that the program meets the unique needs and norms of families and communities,

### Program Description

**ISSUE** There is a lack of culturally specific services that provides flexibility for the unique needs of families in poverty.

**PROGRAM GOAL:** MSI addresses the need to recognize that families are experts and know what they need and want for themselves. By providing culturally specific and flexible services to help them achieve the goals they select, this program empowers families and is a key to family and community stability.

**PROGRAM ACTIVITY:** Culturally specific and appropriate services are delivered by contracted partner staff using an Assertive Engagement approach. This model recognizes the individual as the expert in their own life and instills hope. MSI offers families a selection of services and supports to choose from. Families identify their interests, strengths, choices, and goals and are connected with resources and services that help them. 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.

During the COVID-19 pandemic, culturally specific providers have played a critical role in supporting families to navigate complex systems. Services provided through MSI ensure that families, especially those from Black, Indigenous, and People of Color communities have the tools and resources needed to maintain economic stability.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served in MSI case management	322	750	750	750
Outcome	Percentage of households served that remain in permanent housing six months after exit	86%	75%	75%	75%

### Performance Measures Descriptions

<sup>1</sup>Output is lower due to staffing capacity challenges.

<sup>2</sup> Outcome is higher in FY2022 compared to target and previous years. We will analyze this trend and adjust in future years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$92,997	\$61,986	\$109,859	\$60,541
Contractual Services	\$2,610,745	\$1,079,300	\$2,853,669	\$1,099,557
Materials & Supplies	\$20,100	\$0	\$6,148	\$0
Internal Services	\$27,107	\$8,702	\$43,732	\$7,459
<b>Total GF/non-GF</b>	<b>\$2,750,949</b>	<b>\$1,149,988</b>	<b>\$3,013,408</b>	<b>\$1,167,557</b>
<b>Program Total:</b>	<b>\$3,900,937</b>		<b>\$4,180,965</b>	
<b>Program FTE</b>	0.60	1.40	0.64	1.36

Program Revenues				
Intergovernmental	\$0	\$1,149,988	\$0	\$1,167,557
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,149,988</b>	<b>\$0</b>	<b>\$1,167,557</b>

Explanation of Revenues

This program generates \$7,459 in indirect revenues.  
 \$880,000 - OHCS D Community Development Block Grant (Federal)  
 \$287,557 - OHCS D Housing Stabilization Program (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25139 YFS - Multnomah Stability Initiative (MSI)

1.00 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30407A for the associated costs and program information.

Moved 0.04 FTE Program Specialist Senior from Federal/State Fund (1505) to General Fund.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Safe, quality and affordable homes are essential for family and community health and stability. The Federal Community Development Block Grant program is a resource for supporting this. This grant can be used to expand affordable housing in low and moderate-income communities in unincorporated areas in East Multnomah County. Racism and racist policies have shaped patterns of residential segregation and poverty and this service area has a high concentration of poverty and Black, Indigenous, Native and Communities of Color. YFS staff manage all aspects of this grant. Some key activities include: community outreach, application development, creating a public advisory group, hosting meetings, site reviews, monitoring and grant reporting.

### Program Description

**ISSUE:** East Multnomah County has a high concentration of Black, Indigenous and Communities of Color. In addition, because of racism, rates of poverty are also high in East County. Federal funding formulas do not provide adequate affordable housing and infrastructure in low- and moderate-income communities. As a result, the people and families in East Multnomah County (most of whom are Black, Indigenous and other people of color) continue to have limited access to affordable housing and lack the infrastructure for public works projects.

**PROGRAM GOAL:** The goal of the Community Development program is to create opportunities for neighborhood revitalization. The program provides funding for public services and housing rehabilitation services in low and moderate income (LMI) households in the unincorporated areas of East Multnomah County. Rehabilitation services include critical home repair services.

**PROGRAM ACTIVITY:** The Community Development Block Grant (CDBG) program includes the administration of the Community Development Block Grant. It is a collaboration between DCHS, the cities of Wood Village, Fairview, Troutdale, Marywood Park and the community. The program co-hosts events and workshops with Portland and Gresham on CDBG planning activities.

A unique aspect of this program is the use of a community advisory board. Because residents of East Multnomah County and unincorporated areas outside of Portland and Gresham are the key stakeholders, they also serve on the advisory board. Thus, community members are empowered to make policy and funding recommendations for the CDBG project. The advisory board guides decisions about how the CDBG program funds for public services and housing rehabilitation service to low- and moderate-income households, will be used.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of public works projects completed	1	1	1	1
Outcome	Number of housing units rehabilitated	29	30	30	30

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$86,812	\$52,004	\$122,793	\$28,490
Contractual Services	\$0	\$305,249	\$0	\$425,620
Materials & Supplies	\$1,250	\$0	\$1,770	\$0
Internal Services	\$25,060	\$7,303	\$21,990	\$3,510
<b>Total GF/non-GF</b>	<b>\$113,122</b>	<b>\$364,556</b>	<b>\$146,553</b>	<b>\$457,620</b>
<b>Program Total:</b>	<b>\$477,678</b>		<b>\$604,173</b>	
<b>Program FTE</b>	0.63	0.37	0.81	0.19

Program Revenues				
Intergovernmental	\$0	\$364,556	\$0	\$457,620
<b>Total Revenue</b>	<b>\$0</b>	<b>\$364,556</b>	<b>\$0</b>	<b>\$457,620</b>

Explanation of Revenues

This program generates \$3,510 in indirect revenues.  
 \$457,620 - HUD Community Development Block Grant (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25140 YFS - Community Development

Moved 0.19 FTE Program Specialist Senior from Federal/State Fund (1505) to General Fund.

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

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

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

### Executive Summary

The Supplemental Nutrition Assistance Program (SNAP) is one of the best resources to help people and families with food security. The SNAP outreach program provides information, referral, and application assistance to households seeking SNAP benefits. Participation in SNAP provides a better quality diet and nutrition for children and adults across their life compared to people with low incomes who do not participate.

### Program Description

**ISSUE:** According to the Multnomah County Poverty Report (2019), 15% of Multnomah County residents are food insecure. Children and communities of color experience hunger at even greater rates. Food insecurity and poverty are linked. In Multnomah County, the highest poverty rates are in East County and North/Northeast Portland areas where residents are predominantly Black, Indigenous, Native and other communities of color. While SNAP benefits can help, the application can be difficult to complete and benefits can be hard to access. The economic impact of the pandemic has increased economic hardships and the number of people needing help accessing food.

**PROGRAM GOAL:** The SNAP Outreach program provides targeted outreach ensures that communities with the highest rates of poverty and geographic barriers have access to food. The focus is serving those with the highest levels of food insecurity and lowest participation rates: Black, Indigenous, Latinx and People of Color, immigrant and refugees and college-age students primarily in North/Northeast Portland and East Multnomah County, so that poverty does not mean going hungry.

**PROGRAM ACTIVITY:** SNAP outreach activities help increase awareness about the SNAP program and offer assistance with the application. Staff work with other County departments and community organizations in many settings. This includes schools, colleges, local workforce offices, community events and fairs and farmers markets. They also help people complete the application and guide them through the process. Because the application can be complex, it can be a barrier. The SNAP staff help answer questions and address any barriers. A unique and key aspect of their work is the relationships and trust they build with those they serve. This helps people complete the application as well as maintain the benefits when it's time to renew them. In addition, they stay connected with people and they feel comfortable reaching out when they need help. This increases access to SNAP benefits for first time applicants and those who need to renew benefits.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of consumers engaged through Outreach activities.	5,531	5,000	5,000	5,000
Outcome	Number of SNAP applications completed.	541	250	250	250

### Performance Measures Descriptions

These measures align with the state SNAP grant expectations and reporting requirements. YFS staff exceed grant expectations annually.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$129,904	\$115,770	\$128,281	\$128,281
Materials & Supplies	\$1,235	\$0	\$470	\$0
Internal Services	\$53,169	\$16,254	\$40,345	\$21,144
<b>Total GF/non-GF</b>	<b>\$184,308</b>	<b>\$132,024</b>	<b>\$169,096</b>	<b>\$149,425</b>
<b>Program Total:</b>	<b>\$316,332</b>		<b>\$318,521</b>	
<b>Program FTE</b>	1.06	0.94	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$132,024	\$0	\$149,425
<b>Total Revenue</b>	<b>\$0</b>	<b>\$132,024</b>	<b>\$0</b>	<b>\$149,425</b>

Explanation of Revenues

This program generates \$16,390 in indirect revenues.  
 \$149,425 - Oregon Supplemental Nutrition Assistance Program (SNAP) (State)

Significant Program Changes

**Last Year this program was:** FY 2023: 25141 YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach  
 Moved 0.03 FTE Program Specialist Senior and 0.03 FTE Program Technician from General Fund to Federal/State Fund (1505).

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** Measure 5 Education

### Executive Summary

Schools Uniting Neighborhoods Community Schools (SUN CS) employs culturally responsive practices to reduce learning barriers. SUN CS builds on student and family assets, promotes racial equity, and supports family stability. By contracting with community-based organizations, SUN CS is able to respond to the unique needs of each community and honor their cultures and preferences. YFS staff support program development by convening stakeholders and responding to their needs. YFS staff work with providers to leverage the power of community to ensure that all children are healthy, educated, and prosperous.

### Program Description

**ISSUE:** Educational disparities are pervasive throughout Multnomah County and the State of Oregon. These disparities have the greatest impact on students and families of color. Students of color experience daily and pervasive racism, systemic oppression, and intergenerational trauma. The pandemic has made these disparities worse due to unequal access to resources. Inequities in technology, food, housing, employment, and health have made it more and more difficult for students to learn. Addressing these disparities requires a coordinated and collaborative approach.

**PROGRAM GOAL:** Students can thrive in school if their needs are met, they feel like they belong, and their culture and identity are honored. The goal of SUN CS is that all students and families, especially those from BIPOC communities, are healthy, educated, and prosperous. SUN CS supports this goal by reducing learning barriers, building on student and family assets, and uniting the community.

**PROGRAM ACTIVITY:** SUN CS supports students and their families by: 1) prioritizing relationships; 2) centering student learning; 3) integrating supports to help meet basic needs; and, 4) collaboration and leadership. There are 92 SUN schools in Multnomah County. Each Community School has a site manager who leads and coordinates the program. Site managers lead after school programming, engage and support families, and collaborate with school staff and community partners. Students in SUN CS have shared that they love SUN because "it is fun" and "there are people who look like me there". Community Schools center students and meet them where they are at. This, in turn, leads to great engagement in schools and success in schools and beyond.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of children (ages 5-18) served <sup>1</sup>	15,590	18,400	18,400	18,400
Outcome	Number of students who attend 30 days or more after school programming	7,500	9,200	9,200	9,200

### Performance Measures Descriptions

Program outcome is changed for FY22 due to the delay in getting academic data from MESD for FY22.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$575,006	\$0	\$609,472	\$0
Contractual Services	\$7,403,091	\$3,111,828	\$7,601,574	\$2,816,335
Materials & Supplies	\$2,315	\$0	\$21,110	\$0
Internal Services	\$104,569	\$0	\$89,839	\$0
<b>Total GF/non-GF</b>	<b>\$8,084,981</b>	<b>\$3,111,828</b>	<b>\$8,321,995</b>	<b>\$2,816,335</b>
<b>Program Total:</b>	<b>\$11,196,809</b>		<b>\$11,138,330</b>	
<b>Program FTE</b>	4.00	0.00	4.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,111,828	\$0	\$2,816,335
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,111,828</b>	<b>\$0</b>	<b>\$2,816,335</b>

Explanation of Revenues

- \$1,181,454 - Portland Public Schools SUN Community School Support (Local)
- \$693,629 - City of Portland Parks & Recreation (Local)
- \$331,206 - Reynolds School District (Local)
- \$270,981 - David Douglas School District (Local)
- \$176,405 - Gresham Barlow School District (Local)
- \$157,660 - Parkrose School District (Local)
- \$5,000 - Centennial School District (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25145A YFS - SUN Community Schools

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** Backfill State/Federal/Grant

**Executive Summary**

Request new General Fund to maintain SUN Community Schools in 2 School Districts, where five\*year federal grants are expiring. YFS is requesting full funding for Meadows Elementary and Centennial High in Centennial School District. YFS requests half of the cost for Hogan Cedars and Hollydale who were fully funded by 21st Century grant.

**Program Description**

**ISSUE:** Four SUN Community Schools (CS) in east Multnomah County are losing their federal 21CCLC grant funds at the end of June 2023. Of the two school districts, Centennial has indicated they cannot contribute funds to maintain the sites. Gresham Barlow will match County dollars to retain the sites.

**PROGRAM GOAL:** Students can thrive in school if their needs are met, they feel like they belong, and their culture and identity are honored. The goal of SUN CS is that all students and families, especially those from BIPOC communities, are healthy, educated, and prosperous. SUN CS supports this goal by reducing learning barriers, building on student and family assets, connecting families to services that meet their basic needs and uniting the community.

**PROGRAM ACTIVITY:** SUN CS supports students and their families by: 1) prioritizing relationships; 2) centering student learning; 3) integrating supports to help meet basic needs; and, 4) collaboration and leadership. There are 92 SUN schools in Multnomah County. Each Community School has a site manager who leads and coordinates the program. Site managers lead after school programming, engage and support families, and collaborate with school staff and community partners. During the pandemic and now living with the long term economic and social impacts of COVID, site managers have been critical in helping families navigate complex resource systems and provide safe culturally responsive enrichment. Students in SUN CS have shared that they love SUN because "it is fun" and "there are people who look like me there". Community Schools center students and meet them where they are at. This, in turn, leads to great engagement in schools and success in schools and beyond.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of children (ages 5-18) served <sup>1</sup>	566	800	800	800
Outcome	Number of students who attend 30 days or more after school programming	183	400	400	400

**Performance Measures Descriptions**

Numbers served are lower due to agency staff capacity.

Program outcome is changed for FY22 due to the delay in getting academic data from MESD for FY22.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$275,644	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$275,644</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$275,644</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:

This program backfills four SUN Community Schools Federal grant funding that ends in June 2023. It requests full funding for two schools in the Centennial School District and half of the funding for two schools in the Gresham Barlow School District.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Child & Family Hunger Relief Program improves access to fresh and healthy foods. It increases food security by providing summer meals and food assistance programs via SUN Community School so that all children can reach their full potential. Children must have their basic needs met to be ready and able to learn. The COVID-19 pandemic has created many food access barriers for families, especially Black, Indigenous, and families of color. To better meet these growing food needs, the Hunger Relief Program coordinates with federal programs, nonprofit providers, SUN Community Schools, school districts, and other community partners.

### Program Description

**ISSUE:** Healthy nutrition is vital to brain development and learning. Child food insecurity and a lack of access to fresh and healthy foods are barriers to health and learning. In Multnomah County, children experience food insecurity at a rate of 20%. Communities of color also experience hunger at rates higher than the general population. This food insecurity has continued to skyrocket as a result of the COVID-19 pandemic. Despite Oregon's high hunger rate, millions of Federal food funding dollars for children go unused.

**PROGRAM GOAL:** The program has two goals. First, to reduce child and family food insecurity and hunger so children can be healthy and learn. Second, to increase collaboration and use of available funds to meet hunger needs.

**PROGRAM ACTIVITY:** The Child & Family Hunger Relief program is a partnership with the Oregon Food Bank, six school districts, Portland Parks & Recreation, Multnomah County Library, Portland Children's Levy, and Partners for a Hunger-Free Oregon. The program provides summer meals and food assistance programs via SUN Community Schools. This ensures an environment for families that is accessible and non-stigmatizing. For 8-12 weeks, underserved communities in Mid and East County receive summer meals. Summer meals is a combination of 10 SUN CS sites and 3 County libraries. Food assistance programs include 23 school-based food pantries and 7 Free Food Markets. During the pandemic, partners have offered more outdoor, drive-up, and meal delivery options. Food distribution sites have also become a place for families to check-in and receive other important health and resource information. The program also engages in policy work, including supporting the Child & Family Food Security Coalition. The Coalition leverages community partnerships to increase food security and food access, with a focus on culturally specific populations.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of meals provided to children and families <sup>1</sup>	3,219,624	1,500,000	1,500,000	1,500,000
Outcome	Retail dollar equivalent for every \$1 County General Fund invested in SUN Food Distribution sites	\$13	\$10	\$10	\$10

### Performance Measures Descriptions

<sup>1</sup> Number of meals includes meals served through extended weeks of summer meals program, emergency food pantries, and Free Food Markets fresh produce to families. FY22 numbers represent a 50% increase from FY21.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$156,340	\$0	\$149,978	\$0
Contractual Services	\$278,191	\$0	\$304,382	\$0
Materials & Supplies	\$700	\$0	\$1,160	\$0
Internal Services	\$25,289	\$0	\$21,551	\$0
<b>Total GF/non-GF</b>	<b>\$460,520</b>	<b>\$0</b>	<b>\$477,071</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$460,520</b>		<b>\$477,071</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 2023: 25147 YFS - Child & Family Hunger Relief

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

Request new General Fund to support extending summer meals and activities for youth in designated SUN Community Schools and Multnomah County Libraries in east county. Summer school in SUN schools last only four weeks, these funds would be used to keep providing meals to youth in the area as well as provide enrichment activities for a few more weeks during the summer. Sites chosen would be in neighborhoods without summer meal site designation.

**Program Description**

**ISSUE:** Many families who qualify for free or reduced lunch rely on the access to free or reduced meals to support their financial stability. Due to the increased cost of food and start of the reduced SNAP benefits many families will be looking for relief in the summer.

**PROGRAM GOAL:** Provide additional weeks of summer meals for youth and opportunities to have engaging activities.

**PROGRAM ACTIVITY:** Library sites and SUN Community School sites will be selected to provide additional weeks of summer meals depending on interest from sites and proximity from other free summer meal sites in Multnomah County. Library sites would be providing summer meals for 8 weeks while SUN Community School sites would be providing an additional 4 weeks of summer meals and activities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of summer meal sites	N/A	N/A	N/A	8
Outcome	Total meals provided per site	N/A	N/A	N/A	4,800

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$29,829	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$29,829</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$29,829</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

**Program Offer Stage:** Adopted

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

### Executive Summary

SUN Youth Advocacy (SYA) is a youth development program that provides social emotional and academic supports. When youth feel safe, have a sense of belonging, and their culture and choices are honored, they achieve better outcomes. As one Youth Advocate describes, "we are working to disrupt the 'falling behind' narrative and to ensure that student needs and relationship come first". The program prioritizes students who face the most barriers in education: those living in poverty, students of color, immigrants, and refugees. Last year the youth served in SYA spoke over 33 different languages at home, and 97% identified as Black, Indigenous, and Youth of Color.

### Program Description

**ISSUE:** For too many children, income levels and the color of their skin impact what educational opportunities they have. Multnomah County has low educational attainment rates and poorer health outcomes. At the same time, the County also has high rates of unemployment and hunger. Despite making progress, Oregon is still below the national average of graduation rates. Significant disparities exist for students of color in both Multnomah County and Oregon overall - a gap that has grown due to the pandemic. By providing services to meet basic needs, youth are more able to focus on school. SYA also supplies caregivers with the resources they need to support their child's educational success.

**PROGRAM GOAL:** SYA's goals are to increase student sense of safety, belonging and positive cultural identity. Each of these are known to increase school attendance, credit attainment, and graduation for all students. Research shows having a positive relationship with a supportive adult increases graduation rates. This is especially true for students of color, who may not have people who reflect their culture and identity in the school building. SYA also provides additional opportunities for students to learn outside of the classroom. This is another promising practice for reducing the achievement gap.

**PROGRAM ACTIVITY:** Youth Advocates build strong relationships with youth, their families, and schools. These relationships are culturally-grounded and use strengths-based approaches. For students, advocates focus on the key areas of social emotional support, wrap-around services, and academic help. Students receive help identifying, working toward, and accomplishing their personal and academic goals. SYA also provides culturally-specific enrichment activities, homework help, and peer support time. For families, advocates can refer them to services, assist with basic needs, and help families navigate systems of care.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of students (ages 6-18) served <sup>1</sup>	771	1,420	1,420	1,420
Outcome	Percent of students who make progress or achieve individualized action or success plan goals, by the end of	94%	65%	65%	65%

### Performance Measures Descriptions

- Output is lower due to agency staff capacity issues.
- Outcome has changed for FY22 because of the delay in getting academic data from MESD for FY22.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$2,654,236	\$200,000	\$2,920,508	\$200,000
<b>Total GF/non-GF</b>	<b>\$2,654,236</b>	<b>\$200,000</b>	<b>\$2,920,508</b>	<b>\$200,000</b>
<b>Program Total:</b>	<b>\$2,854,236</b>		<b>\$3,120,508</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 (Federal)

Significant Program Changes

Last Year this program was: FY 2023: 25149 YFS - SUN Youth Advocacy Program

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Parents are child's first teachers and are vital partners in their child's education. Parent Child Development Services (PCDS) removes barriers for families so that children can get a strong start in school. PCDS provides services that are reflective of and responsive to the cultural values and norms of the families it serves. PCDS contracts to non-profit partners. Sixty-percent of PCDS funding goes to culturally specific populations. YFS staff support PCDS providers by providing technical assistance and program development activities.

### Program Description

**ISSUE:** Multnomah County has 34,000 children under the age of six in families with low incomes. Families with low incomes, BIPOC families, immigrants, and refugees 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 success in school. The COVID-19 pandemic has increased these barriers for children and their families. It has heightened the need for support meeting basic needs, as well as social, emotional, and mental health supports.

**PROGRAM GOAL:** PCDS provides resources and tools to families with children under the age of 6 so that children can learn and grow. The program aims to increase kindergarten readiness and ensure healthy child development. PCDS helps build the skills families need to be ready for and succeed in school.

**PROGRAM ACTIVITY:** Part of the SUN Service System, PCDS offers a variety of services to families so that parents and their children can thrive. These services include: developmental screening, immunization status checks, resource connection, and skill building. PCDS also hosts playgroups so that parents can connect with other families of children in a similar age group. As the impact of the pandemic continues to impact people's lives, PCDS providers have continued to provide virtual services, and limited in-person. This includes virtual home visits, community building and group events, and other supports. Providers focus on helping families navigate resource and health information systems.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of children served <sup>1</sup>	370	641	641	641
Outcome	Percent of children up to date on immunizations at exit <sup>2</sup>	77%	95%	95%	95%

### Performance Measures Descriptions

Output is lower due to agency staffing capacity issues, and ongoing concerns about in-person (home visit) activities by many families.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$44,768	\$26,223	\$80,148	\$0
Contractual Services	\$1,586,787	\$349,917	\$1,743,943	\$454,923
Materials & Supplies	\$1,850	\$0	\$2,180	\$0
Internal Services	\$14,011	\$3,682	\$11,433	\$0
<b>Total GF/non-GF</b>	<b>\$1,647,416</b>	<b>\$379,822</b>	<b>\$1,837,704</b>	<b>\$454,923</b>
<b>Program Total:</b>	<b>\$2,027,238</b>		<b>\$2,292,627</b>	
<b>Program FTE</b>	0.32	0.18	0.50	0.00

Program Revenues				
Intergovernmental	\$0	\$262,366	\$0	\$263,923
Other / Miscellaneous	\$0	\$117,456	\$0	\$191,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$379,822</b>	<b>\$0</b>	<b>\$454,923</b>

Explanation of Revenues

\$263,923 - OCCF Federal Family Preservation (Federal)  
 \$191,000 - United Way Early Learning (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25151 YFS - SUN Parent & Child Development Services

Moved 0.18 FTE Program Specialist Senior from Federal/State Fund (1505) to General Fund.

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

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

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

### Executive Summary

Research shows that when schools connect with parents in culturally appropriate ways, their children do better in school. YFS Early Learning programs support the transition from early learning into kindergarten. This includes empowering families and working to build positive family-school relationships. These programs also link partners from early learning and the K-12 system so that the transition from one to the other is smooth. The early learning programs are contracted to non-profit partners. YFS staff support these providers, and facilitate collaboration between partners and schools.

### Program Description

**ISSUE:** Once fully implemented, Multnomah County's Preschool for All will ensure that all families have access to high quality early learning opportunities. However, access to high quality early learning is not enough. To sustain the benefits of high-quality preschool beyond kindergarten, the transition between preschool and elementary school needs to be strong and well-supported. This can have long-term benefits for a child, and can also support their academic achievement in early elementary school. Families should be treated as important partners in their child's education. They have valuable information to share about their child's behavior, learning preferences, and cultural background. Strong family engagement and high quality, culturally responsive early learning should go hand in hand.

**PROGRAM GOAL:** The goal of the YFS Early Learning Programs is to help children successfully transition to kindergarten. This requires fostering diverse family engagement and parent leadership prior to and during the early elementary school years.

**PROGRAM ACTIVITY:** YFS has two early learning components that are built into the SUN Community School (SUN CS) model. This builds upon the trusted relationships and deep community connection of SUN CS. The two early learning components are: Early Kindergarten Transition (EKT) and P-3 (Prenatal to 3rd Grade). EKT is a school-based summer program for children entering kindergarten. During this program, children get time in a kindergarten classroom with a kindergarten teacher. Parents and caregivers also receive the opportunity to get to know the school and build relationships. EKT prioritizes children of color and English Language Learners for these programs. P-3 funds early parent engagement at 9 SUN Community Schools. P-3 coordinators connect families to school before kindergarten. The contracted providers empower parents to be effective leaders in their school community. P-3 also connects parents to resources as needed, and helps parents connect to other parents in their child's school.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of children who participate in summer Early Kindergarten Transition.	516	810	739	810
Outcome	Percent of parents who report comfort with activities they can engage in at home to support their child in school. <sup>2</sup>	90%	90%	90%	90%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$76,336	\$49,972	\$115,824	\$22,257
Contractual Services	\$270,175	\$832,853	\$281,128	\$1,022,800
Materials & Supplies	\$450	\$0	\$8,020	\$0
Internal Services	\$26,080	\$7,013	\$21,644	\$2,743
<b>Total GF/non-GF</b>	<b>\$373,041</b>	<b>\$889,838</b>	<b>\$426,616</b>	<b>\$1,047,800</b>
<b>Program Total:</b>	<b>\$1,262,879</b>		<b>\$1,474,416</b>	
<b>Program FTE</b>	0.60	0.40	0.84	0.16

Program Revenues				
Intergovernmental	\$0	\$97,500	\$0	\$122,800
Other / Miscellaneous	\$0	\$792,338	\$0	\$925,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$889,838</b>	<b>\$0</b>	<b>\$1,047,800</b>

Explanation of Revenues

This program generates \$2,743 in indirect revenues.  
 \$925,000 - United Way Early Learning (Local)  
 \$122,800 - Portland Public Schools SUN Community School Support (Local)

Significant Program Changes

Last Year this program was: FY 2023: 25152 YFS - Early Learning Family Engagement and Kindergarten Transition  
 Moved 0.23 FTE Program Specialist Senior from Federal/State Fund (1505) to General Fund.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Sexual & Gender Minority Youth Services (SGMY) program centers, honors, and supports LGBTQ2IA+ youth where they are at. It intentionally builds spaces that are welcoming, physically and emotionally safe, and supportive. The program provides basic needs support, case management, and skill building opportunities to LGBTQ2IA+ youth. Part of the SUN Service System, SGMY staff also train community partners and schools. These trainings aim to expand the number of affirming spaces and experiences LGBTQ2IA+ youth have in their communities. YFS staff provide technical assistance and support to New Avenues for Youth, the agency contracted for this program.

### Program Description

**ISSUE:** LGBTQ2IA+ youth experience discrimination, violence, and harassment that puts their safety at risk. These youth are more likely to experience homelessness due to unsupportive caregivers. SGMY youth participants describe experiences of anxiety and fear as they try to access basic needs services, including health and mental health resources. Without access to these supports, LGBTQ2IA+ youth are three times more likely to attempt suicide. Because of the pandemic, SGMY youth are more isolated and in greater need of affirming adults, supportive peers, and safe gathering spaces.

**PROGRAM GOAL:** This program aims to connect youth to resources that help them meet their goals. The program works to create an environment where youth can build positive relationships with peers and adults. SGMY also educates the community so that LGBTQ2IA+ youth can have better experiences and feel safer.

**PROGRAM ACTIVITY:** SGMY focuses on 3 areas of support for LGBTQ2IA+ youth: 1) Case management and basic needs help 2) Creating a safe and supportive space and 3) Providing training and education to the community so that they may provide competent and relevant services to these youth. SGMY centers youth voice and developing youth leadership. The program elicits feedback from a youth steering committee called the Queering Committee. Based on the feedback received, SGMY has prioritized connecting one on one with youth weekly. This occurs either virtually or in-person and includes social support meet ups as well as wellness check-ins. SGMY advocates help youth with things like food boxes, gender affirming clothing, and hygiene supplies. They also help youth create goals and connect to other resources. For many LGBTQ2IA+ youth, the one on one check-ins and social support are an essential part of their safety plans, especially during the pandemic.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth who participate in case management.	20	75	75	75
Outcome	Percent of youth who remain in or re-enroll in school.	86%	75%	75%	75%
Output	Number of community provider and school staff trained. <sup>1</sup>	0	300	300	300
Outcome	Percent of training participants who report an increase in knowledge of SMGY issues/cultural competency.	N/A	85%	85%	85%

### Performance Measures Descriptions

<sup>1</sup> Output is low due to agency staff capacity issues. The provider did not engage in training during FY22 due to staff capacity issues as well as the fact that schools maintained strict COVID protocols in the 2022 school year and restricted access into the building by outside people. Training activities have resumed in FY23.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$330,167	\$0	\$363,525	\$0
<b>Total GF/non-GF</b>	<b>\$330,167</b>	<b>\$0</b>	<b>\$363,525</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$330,167</b>		<b>\$363,525</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: FY 2023: 25155 YFS - Sexual & Gender Minority Youth Services

**Department:** County Human Services

**Program Contact:** Nabil Zaghoul

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Bienestar de la Familia provides a range of culturally specific social services in many different languages. They target support to those who are most impacted by racism and poverty--Latinx, immigrants and refugees, Somalis and other families of color in the Cully neighborhood. They have worked without interruption during the pandemic. Their willingness to maintain, expand and provide new services during this pandemic has been essential to supporting our community.

### Program Description

**ISSUE:** Bienestar de la Familia is located in the Cully neighborhood. Many families within the immediate area live in poverty, face housing instability and food insecurity. In addition, because of the cultural and racial diversity in this neighborhood, there is a need for services that are culturally appropriate and to have resources in multiple languages. This need has only increased and deepened during the pandemic.

**PROGRAM GOAL:** The goal of Bienestar de la Familia is to ensure access to culturally specific social services and prioritize Latinx, Somali and communities of color. Bienestar promotes the well-being of families and the services provided help reduce poverty, promote self-efficacy, prosperity, and success. Bienestar offers housing stability services for families and individuals who are homeless or at risk of homelessness. They also provide substance abuse and mental health services, food supports, and other safety net programs that are culturally appropriate and responsive.

**PROGRAM ACTIVITY:** Bienestar provides a range of services that are culturally and linguistically specific and appropriate. Some of the key services include: case management, housing stabilization, rental assistance, 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; 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 and SNAP outreach staff enable families to immediately sign up for SNAP benefits. Bienestar has a Community Advisory Council that provides guidance and ensures that Bienestar is responsive to the needs of the diverse community.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served <sup>1</sup>	512	1,000	1,000	1,000
Outcome	Percent of clients who report that services they received improved their situation.	93%	85%	85%	85%
Output	Number of individuals served by Mercado <sup>2</sup>	18,380	18,000	18,000	18,000

### Performance Measures Descriptions

Output shifted reporting from "individuals served" to "household served" which reduces total number served. Number is lower also because of staff vacancies due to staff shifting roles to support emergency rent assistance.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,370,740	\$235,306	\$1,630,322	\$89,537
Contractual Services	\$16,500	\$280,437	\$16,500	\$425,212
Materials & Supplies	\$70,634	\$0	\$69,371	\$0
Internal Services	\$358,521	\$33,036	\$395,758	\$11,030
<b>Total GF/non-GF</b>	<b>\$1,816,395</b>	<b>\$548,779</b>	<b>\$2,111,951</b>	<b>\$525,779</b>
<b>Program Total:</b>	<b>\$2,365,174</b>		<b>\$2,637,730</b>	
<b>Program FTE</b>	10.60	2.00	11.91	0.69

Program Revenues				
Intergovernmental	\$0	\$548,779	\$0	\$525,779
<b>Total Revenue</b>	<b>\$0</b>	<b>\$548,779</b>	<b>\$0</b>	<b>\$525,779</b>

Explanation of Revenues

This program generates \$11,030 in indirect revenues.  
 \$358,905 - OHCSO Emergency Housing Assistance (Federal); \$166,874 - OHCSO Housing Stabilization Program (State)

Significant Program Changes

Last Year this program was: FY 2023: 25156A YFS - Bienestar Social Services

Reduced vacant 1.00 Case Manager Senior  
 Moved 0.31 FTE Case Manager Senior from Federal/State Fund (1505) to General Fund.

**Department:** County Human Services

**Program Contact:** Nabil Zaghoul

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

This program offer requests County General Funds to restore 1.00 FTE Bilingual-Spanish Case Manager Senior for the Bienestar de la Familia program at the Ortiz Community Center. Bienestar de la Familia provides a range of culturally specific social services in many different languages. They target their help to those who are harmed by racism and poverty-- Latinx, immigrants and refugees, Somalis and other families of color in the Cully neighborhood. They have worked without interruption during the pandemic.

### Program Description

**ISSUE:** The Latino community in the Cully neighborhood continues to experience barriers to access social services, health care, education, food, housing, and energy assistance. Most of the Hispanic clients who come to the center seeking Bienestar services are low-income families and live in poverty. The Coalition of Communities of Color finds that in Multnomah County, Latino individual poverty levels are 77% higher than whites, and Latino family poverty levels are 152% higher.

**PROGRAM GOAL:** The goal of Bienestar de la Familia is to ensure access to culturally specific social services and prioritize Latinx, Somali and communities of color. Bienestar promotes the well-being of families and its services help reduce poverty, promote self-efficacy, prosperity and success. To do this, Bienestar offers housing stability services for families and individuals who are homeless or at risk of homelessness. This case management position is an integral part of service delivery.

**PROGRAM ACTIVITY:** The bilingual-Spanish case manager senior provides a range of direct client services, manages an annual caseload of hundreds of Spanish-speaking individuals, families and their children as well as social services that are culturally and linguistically specific and appropriate. These supports include assessment, service linkage, resource navigation, translation support, energy assistance, to name a few. All of these help address families' needs ranging from basis to crisis.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served	N/A	300	300	300
Outcome	% of clients who reported they were satisfied or very satisfied with Bienestar services	N/A	85%	85%	85%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$112,734	\$0	\$129,037	\$0
<b>Total GF/non-GF</b>	<b>\$112,734</b>	<b>\$0</b>	<b>\$129,037</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$112,734</b>		<b>\$129,037</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 2023: 25156A YFS - Bienestar Social Services

This program offer restores 1.00 FTE Case Manager Senior in program offer 25156A

**Department:** County Human Services      **Program Contact:** Peggy Samolinski  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 25118, 30407A  
**Program Characteristics:**

**Executive Summary**

The YFS Data and Evaluation Team provides recommendations for program and process improvement. YFS and DCHS leadership use these recommendations to make programs stronger and more effective. Data and evaluation activities help highlight disparities that may be occurring within programs. They also ensure the programs are having the desired impact and uplifting our community, especially Black, Indigenous, and People of Color. YFS Data and Evaluation activities include: data collection, report development, analysis, end user training, and program evaluation. This team supports over 29 unique programs.

**Program Description**

**ISSUE:** Historically, data and evaluation activities have been rooted in oppressive practices. These practices have harmed communities of color, especially Black, Indigenous, and People of Color. The Data and Evaluation Team seeks to dismantle and undo these harmful practices. This team centers racial equity and community voice as they gather and analyze data

**PROGRAM GOALS:** The primary goal of the Data and Evaluation Team is to lead with racial equity in all activities. The team's priorities are to center provider and participant voice.

**PROGRAM ACTIVITY:** The Data and Evaluation Team supports all YFS programs and community partners. The team works to understand the impact of programs and service delivery. When programs and practices are not effective, the team helps suggest new approaches so that the community is better served. The team has three main functions:

- 1) Training, technical assistance, data management, and reporting
- 2) Research and evaluation activities to help understand impact and improve program delivery.
- 3) Support division wide process, evaluation and data projects.

The team works with program staff and providers to ensure that the data collected is meaningful, high quality, and necessary. Staff also take part in Division and Department workgroups to support data quality, transparency, and governance. The key to success in each of these areas is the strong relationships the team builds with providers, partners, and the community.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of new end users trained to use ServicePoint & ART that support accurate data entry and report usage.	238	150	150	150
Outcome	Percent of ServicePoint users who report overall satisfaction with the YFS Data and Evaluation Team.	76%	90%	90%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,432,915	\$0	\$1,333,033	\$0
Contractual Services	\$219,246	\$0	\$225,509	\$0
Materials & Supplies	\$13,555	\$0	\$90,681	\$0
Internal Services	\$225,540	\$0	\$245,576	\$0
<b>Total GF/non-GF</b>	<b>\$1,891,256</b>	<b>\$0</b>	<b>\$1,894,799</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,891,256</b>		<b>\$1,894,799</b>	
<b>Program FTE</b>	10.00	1.50	9.00	1.50

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 2023: 25160A YFS - Data and Evaluation Services

The 1.50 FTE in Other Funds is funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services. See program 30407A for the associated costs and program information.

Reduced vacant 1.00 FTE Research Evaluation Analyst Senior

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

Data collection, management, reporting and disaggregation are all critical elements that support program improvement for Schools Uniting Neighborhoods Community Schools (SUN CS). SUN Community Schools employ culturally responsive practices to reduce learning barriers and build on student and family assets, promote racial equity, and support family stability. Having a new database system that employs new technologies, and supports data collection and reporting for SUN CS daily operations and programming, will greatly enhance data collection, reporting, and evaluation efforts.

**Program Description**

**ISSUE:** The cost to fully implement the new SUN Community School database is higher than anticipated. When YFS proposed an amount for FY 2023, it was an estimate, and was dependent on the selected vendor. That vendor has been selected, and Division staff have been working with the vendor to build out the implementation - process and costs - so that the database is built and maintained in a way that meets our needs. This has resulted in a higher than estimated ongoing cost.

**PROGRAM GOALS:** YFS has worked closely with County IT services to identify and procure a new data collection platform for SUN Community Schools so that we can more effectively collect and report data for SUN Community Schools.

**PROGRAM ACTIVITY:** This fully funds the customization and implementation of the new SUN Community Schools database. With a new database system that employs the latest technologies, students and families will be able to search and register for afterschool activities within their respective sites, SUN Site Managers will be able to easily track student enrollment and attendance, and program staff (internally and externally) will have easy access to data for reporting, program improvement and evaluation purposes.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	New SUN Community Schools data system is implemented.	N/A	N/A	N/A	1
Outcome	Percentage of SUN Site Managers that report satisfaction with the new technology solution	N/A	95%	N/A	90%

**Performance Measures Descriptions**

New data system will be fully implemented in summer 2023.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$80,229	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$80,229</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$80,229</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:** Leslee Barnes  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Multnomah County voters passed Measure 26-214, “Preschool for All,” in November of 2020. Preschool for All will give 3- and 4-year-olds in Multnomah County access to free, high-quality, inclusive, culturally affirming preschool experiences. It requires careful financial planning, administrative capacity, and a thoughtful approach to creating accessible services.

**Program Description**

**ISSUE:** The measure directs the Department of County Human Services (DCHS) to lead Preschool for All. This is a large new initiative.

**PROGRAM GOAL:** These investments will help Preschool for All run more efficiently.

**PROGRAM ACTIVITY:** Preschool for All administrative costs include funding for four positions in DCHS Business Services and one position in DCHS Human Resources. These positions will help the program run smoothly by providing essential administrative support, such as completing contracts quickly and paying preschool providers in a timely way.

The Preschool & Early Learning Division partnered with County IT on the purchase of a preschool application and enrollment tracking system. This cloud-based software system allows parents to apply to Preschool for All and be matched with a preschool provider. It also stores key information, including enrollment and attendance. This data supports program operations and evaluation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of executed contracts *	8	44	40	50
Outcome	% of accounts payable invoices paid in 30 days or less	90%	95%	95%	95%
Outcome	% of families applying to PFA who report being satisfied or highly satisfied with the application process **	92%	80%	80%	80%

**Performance Measures Descriptions**

\* As the program grows, the number of Preschool for All contracts will also increase over time.

\*\* Families have an opportunity to complete a satisfaction survey after submitting the online family application.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$593,181	\$0	\$764,017
Contractual Services	\$0	\$0	\$0	\$0
Materials & Supplies	\$0	\$22,800	\$0	\$172,160
Internal Services	\$0	\$647,512	\$0	\$478,232
Unappropriated & Contingency	\$0	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,263,493</b>	<b>\$0</b>	<b>\$1,414,409</b>
<b>Program Total:</b>	<b>\$1,263,493</b>		<b>\$1,414,409</b>	
<b>Program FTE</b>	0.00	4.00	0.00	5.00

Program Revenues				
Taxes	\$0	\$112,000,000	\$0	\$152,592,000
Beginning Working Capital	\$0	\$79,402,080	\$0	\$210,020,210
<b>Total Revenue</b>	<b>\$0</b>	<b>\$191,402,080</b>	<b>\$0</b>	<b>\$362,612,210</b>

Explanation of Revenues

This program generates \$27,352 in indirect revenues.  
 \$152,592,000 - Preschool for All Fund (Local)  
 \$210,020,210 - Preschool for All Fund - Beginning Working Capital one-time-only carryover funds

PFA expenses are also allocated in two other County departments:  
 DCM (Department of County Management) 72052A/B - \$6,601,264  
 MCHD (Multnomah County Health Department); 40099B - \$1,731,715

Significant Program Changes

Last Year this program was: FY 2023: 25200 PEL - Administration & System Support

Added 1.00 FTE Contract Specialist Senior

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The revenue source for Measure 26-214, "Preschool for All," is a personal income tax on the highest income earners who live or work in Multnomah County. Personal income tax revenue can vary between fiscal years. Reserve and contingency funds have been established to provide fiscal stability for Preschool for All and a consistent level of service, despite year-to-year variability.

**Program Description**

**ISSUE:** The Preschool for All personal income tax revenue will fluctuate from year to year.

**PROGRAM GOAL:** Reserve and contingency funds will help to provide ongoing fiscal stability for the initiative.

**PROGRAM ACTIVITY:** Preschool for All (PFA) is funded by a personal income tax. This revenue source will fluctuate from year to year. During this early stage of implementation of a new initiative, it is also important to be flexible, especially when responding to the needs of preschool providers.

Reserve and contingency funds will create ongoing stability for Preschool for All (PFA) and protect the program from unexpected revenue declines from economic fluctuations and unexpected costs. These fiscal stability approaches are informed by government accounting best practices and by Multnomah County's Financial and Budget Policies.

The reserve and contingency funds were established in FY 2022. Each year, funding will be added to the reserve so that the total amount is 15% of anticipated PFA tax revenue for that fiscal year. The reserve fund will ensure the long-term financial stability of the program.

Preschool for All tax revenue will also be added to the contingency fund so that the total is 10% of anticipated PFA tax revenue for that fiscal year. The contingency fund will allow the Preschool & Early Learning Division to address unforeseen expenses during FY 2024.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	% of reserve goal met	N/A	100%	100%	100%
Outcome		N/A	N/A	N/A	N/A

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Unappropriated & Contingency	\$0	\$28,000,000	\$0	\$38,148,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$28,000,000</b>	<b>\$0</b>	<b>\$38,148,000</b>
<b>Program Total:</b>	<b>\$28,000,000</b>		<b>\$38,148,000</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: FY 2023: 25200B PEL - Contingency and Reserves

In FY 2024, reserves and contingency total \$38.1 million as follows:  
 \$22,888,800 - reserves (15% of Preschool for All tax revenue)  
 \$15,259,200 - contingency (10% of Preschool for All tax revenue).

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Preschool for All will give 3- and 4-year-olds in Multnomah County access to free early education. The number of children served each year will increase until publicly funded preschool is universally available in 2030. Revenue smoothing dollars are an important fiscal strategy to ensure stability and consistent service levels for the initiative as it grows.

**Program Description**

**ISSUE:** Over the full implementation of the program, revenues and expenses are aligned, but there are individual years in which expenses are expected to exceed revenues. To smooth the revenue use across the entire program implementation, revenue from surpluses in the early years will be set aside to fund slots during future years.

**PROGRAM GOAL:** Revenue smoothing dollars will help to ensure long-term stability and consistent service levels for Preschool for All. This will allow Preschool for All to meet its goal of universal access in 2030.

**PROGRAM ACTIVITY:** As Preschool for All program implementation progresses, expenditures start to outpace annual revenue. Based on current revenue and cost estimates, there will be a 10 year period during Fiscal Years 2029- 2038 when the costs are higher than the anticipated revenue. Over time, the gap between revenues and expenses narrows. In Fiscal Year 2039, projected revenue catches-up with anticipated expenses.

The money set aside during the early years of Preschool for All implementation when slot numbers remain lower will be used as “revenue smoothing” dollars to ensure that PFA can provide consistent levels of high-quality preschool experiences for Multnomah County families. The total gap between anticipated revenue and anticipated expenditures between Fiscal Year 2029 and Fiscal Year 2038 is over \$400 million. The gap has increased since last fiscal year due to inflation and updated cost information from the first year of implementation.

\$132.9 million of new revenue smoothing dollars will be added in Fiscal Year 2024. This includes \$57.8 million of Fiscal Year 2024 tax revenue. The additional \$75.1 million is tax revenue from Fiscal Year 2022 that was higher than the original revenue estimate. The Fiscal Year 2024 investment will bring the total amount of revenue smoothing dollars to \$237.1 million and help to ensure that Preschool for All can keep its commitment to voters.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Based on projections, program is on track to cover future expenses	N/A	Yes	Yes	Yes
Outcome		N/A	N/A	N/A	N/A

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Unappropriated & Contingency	\$0	\$104,227,522	\$0	\$237,138,947
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$104,227,522</b>	<b>\$0</b>	<b>\$237,138,947</b>
<b>Program Total:</b>	<b>\$104,227,522</b>		<b>\$237,138,947</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: FY 2023: 25200C PEL - Revenue Smoothing

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

The Department of County Human Services established the Preschool & Early Learning Division in January 2021 in order to implement Preschool for All (PFA). The staff in the Preschool & Early Learning Division are creating the foundation for PFA's success. This work includes developing systems, processes, and partnerships to select and support preschool providers, recruit families, and create positive preschool experiences for children.

**Program Description**

**ISSUE:** The Preschool for All ballot measure named the Department of County Human Services as the program administrator. The Preschool & Early Learning Division is responsible for implementation of Preschool for All.

**PROGRAM GOAL:** The structure of the Preschool & Early Learning (PEL) Division was informed by the experiences of other preschool systems across the country and the internal expertise of County staff. The PEL Division will hire and retain a diverse staff committed to early learning and racial justice. This will help to build trust in the community and to successfully implement the equity goals of Preschool for All.

**PROGRAM ACTIVITY:** The PEL Division will center the voices of Black, Indigenous, and all families and providers of color to implement the community-built Preschool for All vision. The PEL Division staff includes: a Division Director (1.00 FTE), an Operations Team focused on the application system for families, budgets, and contracts (9.00 FTE), a Policy & Partnerships Team focused on policy areas that will build the capacity and quality of PFA (13.00 FTE), and staff focused on administrative, evaluative and communications functions of Preschool for All (9.00 FTE).

The Preschool and Early Learning Division will staff the advisory committee included in the Preschool for All ballot measure. The Preschool for All Advisory Committee is a diverse group of community members from the different geographic areas of the County. The committee will review program expenditures, advise program evaluation, review data, and make policy recommendations.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Preschool for All Advisory Committee Meetings	3	4	4	4
Outcome	% of Advisory Committee who identify as Black, Indigenous, and People of Color	N/A	50%	73%	50%
Outcome	% of PEL Division employees who identify as Black, Indigenous, and People of Color	87%	50%	70%	50%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,756,903	\$0	\$4,930,169
Contractual Services	\$0	\$65,000	\$0	\$65,000
Materials & Supplies	\$0	\$110,300	\$0	\$184,503
Internal Services	\$0	\$1,154,010	\$0	\$882,143
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,086,213</b>	<b>\$0</b>	<b>\$6,061,815</b>
<b>Program Total:</b>	<b>\$4,086,213</b>		<b>\$6,061,815</b>	
<b>Program FTE</b>	0.00	19.00	0.00	32.00

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

Explanation of Revenues

This program generates \$176,500 in indirect revenues.

Significant Program Changes

**Last Year this program was:** FY 2023: 25201 PEL - Program Development & System Support

This program adds 6.00 FTE that were added during FY 2023 per budget modification DCHS-010-23: 2.00 Program Specialists, 1.00 Program Specialist Sr, 1.00 Operations Process Specialist, 2.00 Program Supervisors.

FY 2024 adds 1.00 FTE Data Analyst Senior, 1.00 FTE Evaluation Manager, 1.00 FTE Business Process Consultant, 1.00 FTE Program Communications Specialist, 1.00 FTE Program Specialist, 1.00 FTE Contract Specialist, 1.00 FTE Program Manager 2

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Community based organizations strengthen the work of Preschool for All through their cultural knowledge, positive relationships in the community, and experience building partnerships. Community based organizations play two key roles in Preschool for All: (1) Intermediary Organizations partner with small child care businesses to support their participation. (2) Family Connector Organizations outreach to families and guide them through the application and enrollment process.

**Program Description**

**ISSUE:** Historically, in-home preschool providers have faced challenges as small business owners. COVID-19 worsened these challenges and providers are still working to recover from the pandemic. Many providers will be new to having a contract for preschool slots. Families who have the least access to high-quality preschool may be hard to reach and enroll in a new program.

**PROGRAM GOAL:** Including in-home preschool providers and prioritizing children who experience barriers accessing preschool are important in order to achieve Preschool for All’s racial equity goals. Intermediary Organizations support small preschool providers who want to participate. Family Connector Organizations increase access to Preschool for All.

**PROGRAM ACTIVITY:** The Preschool & Early Learning Division holds contracts with larger preschool centers and with school districts. Intermediary Organizations hold contracts with in-home providers and small centers. In-home providers are the most diverse group of preschool providers in the community. They give children rich learning environments and build strong relationships with families. Intermediary Organizations work closely with the PFA administration to ensure that in-home providers’ needs are met and that their businesses can thrive.

Culturally specific organizations hire Family Navigators to help families with the Preschool for All application and enrollment process. This includes outreach to families who currently have the least access to high-quality preschool and support to complete the application. Family Navigators also connect interested families to community resources, such as food, energy, and housing assistance.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of new Preschool for All applications completed by Black, Indigenous, and families of color each year	N/A	500	774	750
Outcome	% of small providers who say that the Intermediary Org supports their participation in PFA	N/A	85%	85%	85%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,460,000	\$0	\$1,460,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,460,000</b>	<b>\$0</b>	<b>\$1,460,000</b>
<b>Program Total:</b>	<b>\$1,460,000</b>		<b>\$1,460,000</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: FY 2023: 25202 PEL - Preschool Access: Family & Provider Navigation

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

### Executive Summary

Having more preschool facilities is necessary for Preschool for All to meet its goals. In order to increase the number of early learning spaces, Preschool for All will invest in a facilities fund for preschool programs. This funding will help to build future preschool capacity in Multnomah County.

### Program Description

**ISSUE:** High-quality environments support children's learning. There are not enough early learning spaces in Multnomah County for universal preschool access. Child care providers struggle to find facilities that meet their needs and money to cover the cost.

**PROGRAM GOAL:** Funding for preschool facilities will create access to capital dollars for preschool providers and increase the number of preschool slots in Multnomah County.

**PROGRAM ACTIVITY:** Well-designed spaces can enhance learning and child development. However, many providers experience challenges when trying to open a new facility or improve their existing space. The Preschool & Early Learning Division will establish a facilities fund for providers. The facilities fund will invest in the construction and renovation of early learning spaces, as well as offer technical assistance to preschool programs.

Many banks are unwilling to provide loans to child care providers, because of their low profits and lack of collateral. This challenge is exacerbated for Black, Indigenous and providers of color who experience systemic barriers to traditional bank loans and business supports. A facilities fund will increase child care providers' access to capital dollars and support providers ready to improve their learning environments and expand their programs.

Facilities funds will help providers improve their spaces and expand into bigger or new locations. Investments in child care facilities will give families more preschool choices and increase the number of preschool slots available.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Establish a PFA Facilities Fund and funding process for providers	N/A	1	1	1
Outcome	% of facilities fund investments that go to Black, Indigenous, or Business Owners of Color and CSOs*	N/A	50%	N/A**	50%

### Performance Measures Descriptions

\* CSOs= culturally specific organizations

\*\* The Facilities Fund will be established in FY 2023, but funds will likely not be distributed until FY 2024

**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$0	\$8,000,000	\$0	\$17,800,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,000,000</b>	<b>\$0</b>	<b>\$17,800,000</b>
<b>Program Total:</b>	<b>\$8,000,000</b>		<b>\$17,800,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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 2023: 25203 PEL - Preschool Infrastructure Capacity Building

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Preschool for All (PFA) will give 3- and 4-year-olds in Multnomah County access to free early education. The number of children served each year will increase until it is universally available in 2030. PFA Coaches will collaborate with preschools to strengthen the quality of their programs. Coaching is a key strategy to ensure that preschool experiences are high-quality, inclusive, and culturally affirming.

**Program Description**

**ISSUE:** The number of high-quality preschool slots in our community must increase dramatically for Preschool for All to be available to all families in 2030. Preschool providers are undervalued and have not received regular or robust support.

**PROGRAM GOAL:** Preschool for All will invest in coaching as a key strategy to create high-quality preschool experiences. Research shows that relationship-based, individualized professional development is an effective way to build teachers' skills and knowledge.

**PROGRAM ACTIVITY:** Preschool for All will offer coaching and support to providers. Mt. Hood Community College Child Care Resource & Referral will hire, train, and lead a team of coaches to partner with in-home and center-based preschool providers. Multnomah Educational Service District will have a Preschool for All coach to work with school districts. Preschool for All coaching will be relationship-based and tailored to meet the needs of individual educators. Coaches will collaborate on goal setting and help providers be at their best. The active recruitment and support of Black, Indigenous, and Coaches of Color is essential to the success of Preschool for All.

Additional support for preschool providers will include training, financial incentives for ongoing participation in coaching, and business development coaching. Coaching, professional development and other support are for providers who meet PFA requirements and providers who will be ready to implement PFA in future years. Building a pipeline of future providers will help Preschool for All become universally available in 2030. It will also allow families to choose the early learning setting that's right for their child.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of early educators participating in coaching and other supports	198	300	300	350
Outcome	% of BIPOC providers and staff who report progress on their goals due to coaching and supports	N/A	80%	80%	80%
Outcome	% of Coaches supporting Preschool for All who identify as Black, Indigenous and People of Color	73%	50%	70%	50%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$10,664,000	\$0	\$10,664,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,664,000</b>	<b>\$0</b>	<b>\$10,664,000</b>
<b>Program Total:</b>	<b>\$10,664,000</b>		<b>\$10,664,000</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: FY 2023: 25204 PEL - Program Quality: Coaching & Provider Supports

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Preschool for All (PFA) Pilot Sites will provide high-quality, culturally responsive, inclusive preschool. PFA slots in the first few years will be offered at child care centers, Head Starts, family child care providers, and school districts. Pilot Sites will work closely with the Preschool & Early Learning Division to share feedback and refine the program. PFA support will include funding to stabilize infant and toddler slots in these settings.

**Program Description**

**ISSUE:** The Preschool & Early Learning Division will work in partnership with Pilot Sites to refine program details. Collaborating with providers will result in innovative and effective policies for a stronger early care and learning system in Multnomah County. Preschool expansions in other communities have led to decreases in infant and toddler slots. This is largely because of the high costs associated with care for this age group.

**PROGRAM GOAL:** Key areas for Pilot Site implementation include start-up costs for providers, funding for preschool slots, inclusion, and infant and toddler stabilization. These investments represent the first PFA slots that will be available for families. The funding will also protect infant and toddler care in Multnomah County and help to ensure that Pilot Sites can support children that have developmental delays and disabilities.

**PROGRAM ACTIVITY:** Over 675 Preschool for All slots began in September 2022 and the number of slots will grow each year. Pilot Sites must work to build positive relationships with families, with a specific focus on Black, Indigenous, and Families of Color. Pilot Sites must be responsive to feedback from families and partner with a coach to improve their program. The cost paid for each slot ranges between \$15,750 and \$22,050 for the year, depending on the program's schedule and calendar year.

Infant and toddler stabilization dollars will focus on higher wages for Pilot Site educators who are not funded through Preschool for All. Additional strategies for Pilot Sites to maintain or grow their infant and toddler slots will also be explored.

Organizations and businesses selected as Pilot Sites will be working closely with PFA coaches and administrators. Pilot Sites will help Multnomah County to finalize program details and build a program that providers want to participate in.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of Preschool for All slots	N/A	675	718	1,400
Outcome	Percentage of Preschool for All slots filled (enrolled)	N/A	N/A	92%	85%

**Performance Measures Descriptions**

\* Outcome removed: Staff Retention % at PFA Pilot Sites.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$19,700,000	\$0	\$36,592,060
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$19,700,000</b>	<b>\$0</b>	<b>\$36,592,060</b>
<b>Program Total:</b>	<b>\$19,700,000</b>		<b>\$36,592,060</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: FY 2023: 25205 PEL - Preschool for All Pilot Sites

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

### Executive Summary

Increasing the number of early educators is essential to creating universal preschool access in Multnomah County. Preschool for All will invest in workforce development to grow the number of early educators and support the professional development of existing preschool staff. This funding will help to build future preschool capacity in Multnomah County.

### Program Description

**ISSUE:** Early educators are essential to children's learning and are currently poorly paid, undervalued, and required to navigate confusing and disconnected systems and regulations. Recovery from the COVID-19 pandemic has been slow for the child care industry, making an already existing child care workforce crisis worse. Staffing shortages continue to be a major issue for preschool programs in Multnomah County.

**PROGRAM GOAL:** Workforce development programs will bring new people into early education careers and support existing preschool staff to continue their professional learning. Investments in programs that focus on Black, Indigenous, and early educators of color will help to ensure a diverse workforce.

**PROGRAM ACTIVITY:** Workforce development funds will be used to increase training and education opportunities. These opportunities will be for existing preschool providers and future educators. There will be a focus on programs that serve teachers who speak diverse languages and those who are Black, Indigenous and people of color.

The Preschool for All workforce development investments will help to make higher education easier to navigate and to afford. Additional investments may include early childhood certifications, pathways to employment, and support for educators participating in professional development. Increasing the number of early educators will allow for additional preschool locations to open and support existing sites to have consistent staffing levels. Workforce development strategies will provide opportunities for parents, high school students, and educators who have left the child care profession to achieve a fulfilling career and will help to increase the number of high-quality preschool programs in Multnomah County.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of early educators participating in Preschool for All workforce development programs	N/A	500	*	500
Outcome	% of educators participating in workforce programs who identify as Black, Indigenous, and People of Color	N/A	60%	*	60%

### Performance Measures Descriptions

\* Funding will be released in the 2nd half of FY 2023, so there will not be educators participating in FY 2023. Investments will be in place for FY 2024.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$5,000,000	\$0	\$5,000,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,000,000</b>	<b>\$0</b>	<b>\$5,000,000</b>
<b>Program Total:</b>	<b>\$5,000,000</b>		<b>\$5,000,000</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: FY 2023: 25206 PEL - Early Educator Workforce Development

**Department:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Multnomah Mothers' Trust Project (MMTP) Year 3 - ensures that current Trust members are able to receive a full two years of unconditional monthly basic income, and continue to serve as participant researchers in equity and human centered collaborative design processes. Approximately 100 Black female-headed households with children currently receiving services from one of two community-based programs, will work towards the launch of the member designed program Finna Act Black (FAB) - a culturally and gender specific home ownership approach.

### Program Description

**ISSUE:** Hope is a research-based component for change. The challenge of supporting BIPOC families living on a low-income in building hope (and autonomy, self-determination, and mastery), using County provided resources, in the face of structural white supremacy is real. Success will require the willingness to question "what we know" and who is in poverty and why, and to take smart risks to test new approaches and strategies.

Our community's recovery from the pandemic must close or eliminate the African American racial wealth gap.

**PROGRAM GOAL:** MMTP was begun as a test of unconditional basic income and member led program design. Homeownership is the best pathway out of poverty, towards generational wealth building, then it's important to increase the number of African American (AA) households who own homes. Research from Urban Institute calls for 60% AA homeownership in order to stop the loss of AA assets. The Portland area is at 29% AA homeownership.

Current pathways to homeownership for first time buyers living on a low income look like - credit repair, debt elimination, savings, and a better paying job. Experience has shown that this doesn't work for many home buyers, especially African American families, and other people of color, as a result of historic and currently exclusion and white supremacy culture structures, policies, approaches.

Using wisdom gained from the members of the MMTP, we propose a new model that seeks to leverage an adequate down payment, through access to unconditional cash resources, so that the home buyer can afford a monthly mortgage with their current salary and any standing credit and debt challenges. FAB is a new idea for creating a real pathway to homeownership.

**PROGRAM ACTIVITY:** MMTP will continue to provide unconditional monthly basic income, compensate members for participant research, and determine feasibility to develop funding and activities for implementing FAB.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of Black female-headed HH with children served	N/A	100	97	100
Outcome	% of HH served who participate as MMTP researchers	N/A	50%	50%	50%
Outcome	% of HH served who report positive increase in quality of life, economic stability, and/or child educational success	N/A	80%	80%	80%

### Performance Measures Descriptions

Measures above, and others, are provided through comprehensive reports from the database organization. Both quantitative and qualitative data is measured, analyzed, and reported.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$134,245	\$0	\$154,934
Contractual Services	\$0	\$1,215,755	\$0	\$1,195,066
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,350,000</b>	<b>\$0</b>	<b>\$1,350,000</b>
<b>Program Total:</b>	<b>\$1,350,000</b>		<b>\$1,350,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$1,350,000	\$0	\$1,350,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,350,000</b>	<b>\$0</b>	<b>\$1,350,000</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$1,350,000

Significant Program Changes

Last Year this program was: FY 2023: 25399B ARP - Multnomah Mothers' Trust Project (MMTP)

This program addresses the County's priority of Crisis Response & Community Recovery. The pandemic has exacerbated long standing racial and economic injustices. Funds provide basic monthly income through unconditional cash transfer to 100 Black/African American mothers with families who have been negatively impacted by the pandemic, in addition to using design practices to plan for future implementation of Baby Bonds! and other asset building opportunities for these families.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Domestic violence is a multifaceted issue, with both individual and community-level effects. Because domestic violence does not present uniformly across racial/ethnic and other intersectional demographics, individuals seeking safety from domestic violence need access to client-centered and culturally-relevant services when the time is right for them. The COVID-19 pandemic has caused an increase in both the incidence and severity of domestic violence. This funding expands capacity in multiple areas of the domestic violence service continuum in an effort to meet the unique needs of survivors with both community-based and criminal justice responses.

**Program Description**

**ISSUE:** COVID-19 has caused an increase in both incidence and severity. A spectrum of community-based and systems-based responses are required to address this increase and ensure that survivors have access to the supports and services they need.

**PROGRAM GOAL:** Culturally-specific community-based advocacy services and system-based advocacy embedded with law enforcement are both vital components of the response to domestic violence in Multnomah County. The goal of this program is to prevent and address domestic violence by investing in these approaches to increase the overall capacity of the domestic violence services continuum.

**PROGRAM ACTIVITY:** This program funds two distinct programs activities--

1. Increased capacity for culturally-specific domestic violence service providers: 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.

2. Domestic Violence Enhanced Response Team (DVERT): DVERT is a multi-disciplinary approach to address high-lethality, complex domestic violence cases. Co-located with Portland Police Bureau, DVERT staff provide long-term case management, client assistance and advocacy. Case staffing with the multi-disciplinary team helps to ensure that survivors in these complex cases receive the services and support they need as they navigate multiple systems.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals receiving culturally/population-specific domestic violence services	91	200	200	200
Outcome	Percentage of adult survivors who engage in safety planning with an advocate by exit	100%	85%	85%	85%
Outcome	Number of survivors receiving multi-disciplinary, intensive intervention	114	150	150	150

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$215,000	\$0	\$229,351
Contractual Services	\$0	\$567,000	\$0	\$584,433
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$782,000</b>	<b>\$0</b>	<b>\$813,784</b>
<b>Program Total:</b>	<b>\$782,000</b>		<b>\$813,784</b>	
<b>Program FTE</b>	0.00	0.00	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$782,000	\$0	\$813,784
<b>Total Revenue</b>	<b>\$0</b>	<b>\$782,000</b>	<b>\$0</b>	<b>\$813,784</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$813,784

Significant Program Changes

Last Year this program was: FY 2023: 25399C ARP - Domestic Violence Services

This program addresses the Crisis Response & Community Recovery priority. These services add staff capacity - in County programs and in the community - for domestic violence survivors seeking safety from abuse.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Integrated support is a core component of the SUN Community School (SUN CS) model. Helping to meet basic needs and connecting families to resources increases family stability. The COVID-19 pandemic has disrupted family stability in many ways. These impacts have been most felt by students and families of color. Because basic needs help has increased so much, the demand on SUN CS site managers has also increased. The intensity of support required to help families with getting basic needs met has not decreased. Continuing the Family Resource Navigator (FRN) program in SUN CS at 81 sites allows sites to expand focus while ensuring family basic needs are met while a ramp down strategy is developed as funds will no longer be available after fiscal year 2024.

### Program Description

**ISSUE:** Academic performance is linked to a student's health, well-being, family, and community. Before learning can take place, a student's basic needs must be met. This is even more true for students and families of color, who experience daily structural racism and systemic oppression. The COVID-19 pandemic has exacerbated existing inequities in food, housing, employment, health, and more. All these inequities impact a student's ability to learn and thrive.

**PROGRAM GOAL:** The goal of the FRN program is to increase staffing capacity at each County supported SUN Community School. This will allow staff to further support COVID-impacted families in accessing needed resources. The program aims to build skills so that families know how to access the resources they need in the future.

**PROGRAM ACTIVITY:** Family Resource Navigators work alongside families to help reduce barriers in the home. FRNs work to build skills and confidence so that families can continue to get their needs met. Promoting this self-sufficiency helps students learn and families thrive. Through this program, a half-time Family Resource Navigator has been placed at each Community School site. This FRN is culturally responsive, and prioritizes support to families of color. FRNs collaborate with school staff, other SUN Service System programs, and community partners to identify families who might need extra support. Services provided include but are not limited to: case management, group skill building, reducing language barriers, and outreach.

As a complement to Case Management, Unconditional Client Assistance can be provided as a service within Family Resource Navigation, to increase household security particularly of Black, Indigenous, and People of Color (BIPOC) communities within Multnomah County by addressing the impacts of systemic racism and poverty. Through access to unconditional cash payments or unconditional client assistance as requested by the individual, the goal is to increase household security and support self-determination.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals who receive support from Family Resource Navigators	3,565	9,200	8,850	5,670
Outcome	Percent of people served who identify as Black, Indigenous, Families of Color, and immigrants/refugees	80%	70%	90%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$4,276,420	\$0	\$4,443,455
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,276,420</b>	<b>\$0</b>	<b>\$4,443,455</b>
<b>Program Total:</b>	<b>\$4,276,420</b>		<b>\$4,443,455</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,276,420	\$0	\$4,443,455
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,276,420</b>	<b>\$0</b>	<b>\$4,443,455</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$4,443,455

Significant Program Changes

**Last Year this program was:** FY 2023: 25399E ARP - SUN Community Schools: Family Resource Navigators

This program addresses the Crisis Response & Community Recovery priority. Adding staff capacity to SUN Community Schools creates opportunity for deeper connection with families and support as they navigate complex social service systems to access basic needs supports. SUN Community Schools are an integral part of 92 schools in Multnomah County.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

This offer requests new funding to support existing food pantries at SUN Community Schools. Higher volume of families seeking services, increased staff costs and a steep decline in volunteers is creating severe challenges to maintain pantry sites. These sites serve as an anchor strategy to deliver additional nutritional support for the SUN Service System. Since the onset of the pandemic, pantries and other food resources at SUN Community Schools have had increased participation in pantries. East County continues to see high rates of food insecurity, and this funding seeks to bolster the existing services at high volume service sites. This request for ongoing funding backfills and makes whole the temporary ARP funds that have been allocated to the SUN Food Pantry network.

### Program Description

**ISSUE:** SUN Food pantries have seen a tremendous increase in the number of families accessing pantry support. This increase, along with the increased costs of running sites means that additional resources are needed to keep pantries open. Funds also add a site in East County that has been funded through temporary funds from Oregon Food Bank. This new site has also seen a high volume of families. YFS staff have worked with the Oregon Food Bank to analyze the cost of operating a Food Pantry. They used to rely heavily on volunteers and since the pandemic the number of volunteers supporting food distribution has gone down; this has continued into this year. Having a stable staff member to manage the pantry is essential for its success.

**PROGRAM GOAL:** The program's goal is to reduce child and family food insecurity by increasing safe access to nourishing and culturally appropriate food and staffing at large distribution sites in East County. This offer continues the SUN supplemental COVID Hunger Relief services by 1) providing increased food assistance, including fresh and culturally responsive choices, through school-based distribution and 2) supporting the increased capacity needs of SUN Community Schools (SUN CS) staff to distribute food safely during the ongoing pandemic.

**PROGRAM ACTIVITY:** Pantry sites have seen an increase of need in staffing and supplies in order to continue supporting the community accessing food resources. These funds will support the added costs of staffing, food and supplies at sites experiencing large numbers of households accessing pantry sites in East County. Funds will be used to support food pantry sites who are addressing food access, this includes food pantries and Free Food Markets that partner with the Oregon Food Bank. Equitable access through innovative strategies such as food delivery, student backpacks, grocery gift cards and outreach will be implemented. These services will be especially vital to those who are ill or quarantined, lack transportation, are experiencing houselessness or have limited access to a kitchen/food storage, and when schools are closed.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of meals provided to children and families	N/A	450,000	450,000	450,000
Outcome	Percent of Black, Indigenous, and Families of Color who receive food security support	N/A	70%	70%	70%

### Performance Measures Descriptions

Number 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$150,000	\$0	\$179,235
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>	<b>\$179,235</b>
<b>Program Total:</b>	<b>\$150,000</b>		<b>\$179,235</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$150,000	\$0	\$179,235
<b>Total Revenue</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>	<b>\$179,235</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$179,235

Significant Program Changes

**Last Year this program was:** FY 2023: 25399S ARP - YFS Food Security / Pantry Enhancement

This program addresses the County's priority of Crisis Response & Community Recovery. The pandemic has exasperated food insecurity, particularly in communities of color. This program provides pass-through dollars to support food pantry sites in East Multnomah County.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Stable housing is linked to a number of positive health and social outcomes for individuals, families and communities--and rental assistance is a key strategy to support renters. The COVID-19 pandemic has resulted in unprecedented numbers of layoffs and furloughs; the economic and social impact of this will remain for years to come. This has led to high levels of housing instability and even deeper racial disparities and challenges to pay rent. This program offer continues the County's leadership role in providing rent assistance and related supports.

### Program Description

**ISSUE:** Thousands of Multnomah County residents are unable to pay their monthly rent due to the economic impacts of the COVID-19 pandemic. As moratoriums are lifted and people struggle to pay their bills, evictions are likely to increase and the need for rental assistance is unprecedented. Racial disparities existed before COVID-19 and current national and state trends indicate that the economic hardships of the global pandemic are widening racial inequalities. These trends are mirrored at the local level. For instance, in Multnomah County, the majority of people who rent are BIPOC (Black, Indigenous and People of Color).

**PROGRAM GOAL:** Provide eviction prevention support through rent assistance payments so that households can remain stably housed.

**PROGRAM ACTIVITY:** These funds will support two connected strategies: Eviction Prevention and Rent Assistance. Eviction Prevention and Diversion services are provided so that households who are facing imminent eviction will be connected to rent assistance funds. This will happen in three primary ways: outreach in the community, referrals from 211 and connecting with households through eviction court. Second, funding will support rent assistance to households throughout Multnomah County. Funds will be disbursed largely through the infrastructure set up through a YFS program (Bienestar de la Familia) and through non-profit organizations coordinated by the City of Portland (Expanded Partner Network) and Home Forward (Short Term Rent Assistance).

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households receiving rent assistance.	N/A	4,515	4,515	1,795
Outcome	% of households receiving rent assistance who are at 50% of Area Median Income.	N/A	75%	75%	75%

### Performance Measures Descriptions

FY23 estimate is based on average payment of \$4,500 per household.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$0
Contractual Services	\$0	\$22,785,668	\$0	\$8,078,059
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$22,785,668</b>	<b>\$0</b>	<b>\$8,078,059</b>
<b>Program Total:</b>	<b>\$22,785,668</b>		<b>\$8,078,059</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$22,785,668	\$0	\$8,078,059
<b>Total Revenue</b>	<b>\$0</b>	<b>\$22,785,668</b>	<b>\$0</b>	<b>\$8,078,059</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$8,078,059

The Revenue/Expense Detail table above only reflects emergency rent assistance that's funded by the ARP Direct County funding. The FY 2023 Adopted budget included an additional \$21,983,167 for emergency rent assistance that was not funded by the ARP Direct County funding and is not included in the Revenue/Expense Detail table above (see FY 2023 program offer 25490A).

Significant Program Changes

**Last Year this program was:** FY 2023: 25490B ARP - Emergency Rent Assistance

This program addresses the Crisis Response & Community Recovery priority. These funds provide emergency rent assistance to the thousands of county renters who are unable to pay rent due to the pandemic. This is particularly acute in communities of color.

This program offer only includes emergency rent assistance that is funded by the Multnomah County direct ARP allocation. The amount between years varies.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

**Executive Summary**

Stable housing is linked to positive health and social outcomes for individuals, families and communities--and rental assistance is a key strategy to support renters. The COVID-19 pandemic has resulted in unprecedented numbers of layoffs and furloughs; the economic and social impact of this will remain for years to come. This has led to high levels of housing instability and even deeper racial disparities and challenges to pay rent. This program offer continues the County's leadership role in providing rent assistance and related supports.

**Program Description**

**ISSUE:** Thousands of Multnomah County residents are unable to pay their monthly rent due to the economic impacts of the COVID-19 pandemic and rising costs of housing. As moratoriums are lifted and people struggle to pay their bills, evictions are likely to increase and the need for rental assistance is unprecedented. Racial disparities existed before COVID-19 and current national and state trends indicate that the economic hardships of the global pandemic are widening racial inequalities. These trends are mirrored at the local level. For instance, in Multnomah County, the majority of people who rent are BIPOC (Black, Indigenous and People of Color).

**PROGRAM GOAL:** Provide eviction prevention through staffing support with both legal and administrative functions, in tandem with rent assistance so that households can remain stably housed by paying rent.

**PROGRAM ACTIVITY:** These funds will support system partners and staff who support housing stability for those who are struggling to pay rent and remain stably housed. This includes system access and information and referral through 211info, legal navigation and support through Metropolitan Public Defenders and Oregon Law Center, centralized data entry, and rent assistance payments - both through jurisdictional partners. Staff capacity is provided by public and non-profit organizations.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of staff supported through leadership and management support	14	30	30	17
Outcome	Aligned and coordinated programmatic rent assistance models and guidance	100%	100%	100%	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,730,000	\$0	\$1,921,941
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,730,000</b>	<b>\$0</b>	<b>\$1,921,941</b>
<b>Program Total:</b>	<b>\$2,730,000</b>		<b>\$1,921,941</b>	
<b>Program FTE</b>	0.00	15.25	0.00	17.00

Program Revenues				
Intergovernmental	\$0	\$2,730,000	\$0	\$1,921,941
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,730,000</b>	<b>\$0</b>	<b>\$1,921,941</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$1,921,941

Significant Program Changes

**Last Year this program was:** FY 2023: 25490C ARP - YFS Rent Assistance Team Staffing Capacity

This program addresses the Crisis Response & Community Recovery priority. Funding for staff capacity in the Youth & Family Services Division's rent assistance team is critical to support the several programs the Division has to provide emergency rent assistance to the thousands of county renters who are unable to pay rent due to the pandemic.

**Department:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Through this funding DCHS proposes to provide water assistance and housing supports focused on low income households in Multnomah County.

### Program Description

**ISSUE:** Many households in Multnomah County have been impacted by social, emotional and economic impacts from the pandemic. Support services for low income households that assist households to remain in their homes are essential for long term stability.

**PROGRAM GOAL:** Social services provided to support individuals and families to meet basic needs and to remain stably housed.

**PROGRAM ACTIVITY:** This program has two primary service areas. First, assistance with utilities through water bill payment and Community Development Block Grant CV funds for rent assistance to support housing stability in mid and east Multnomah County.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households served with water bill payment assistance	N/A	1,300	1,300	375
Outcome	Percentage of households served who avoid water disconnection	N/A	100%	100%	100%

### Performance Measures Descriptions

Output and outcome changed for FY24 to reflect water bill assistance program.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$762,116	\$0	\$0
Contractual Services	\$0	\$3,373,072	\$0	\$1,762,843
Materials & Supplies	\$0	\$46,108	\$0	\$0
Internal Services	\$0	\$107,004	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,288,300</b>	<b>\$0</b>	<b>\$1,762,843</b>
<b>Program Total:</b>	<b>\$4,288,300</b>		<b>\$1,762,843</b>	
<b>Program FTE</b>	0.00	7.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,288,300	\$0	\$1,762,843
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,288,300</b>	<b>\$0</b>	<b>\$1,762,843</b>

Explanation of Revenues

- \$1,340,058 - State COVID-19 Energy Assistance Program (CEAP) (State)
- \$322,785 - ARPA Federal LIH Water Assistance Program (LIHWA) American Rescue Plan Act (Federal). Funding ends 9/30/2023, reducing the FY 2024 budget down to \$322,785 from \$987,066 in FY 2023.
- \$100,000 - COVID-19 Federal CDBG 20 CARES (Federal)
- \$0 - ARPA Federal LIHEAP Energy American Rescue Plan ended 9/30/2022, reducing the FY 2024 budget by \$2.5 million compared to FY 2023.
- \$0 - ARPA Federal LIHEAP WX American Rescue Plan ended 9/30/2022, reducing the FY 2024 budget by \$461,084 compared to FY 2023.

Significant Program Changes

Last Year this program was: FY 2023: 25491 COVID-19 Energy & Housing Services

This program offer falls under the County's Crisis Response & Community Recovery ARP Priority Area.

In FY 2024, 4.00 FTE moved to YFS - Energy Assistance (25119), and 3.00 FTE moved to YFS - Weatherization (25121A). In FY 2023, these FTE were budgeted in the Coronavirus (COVID-19) Response Fund (1515). In FY 2024, these FTE are budgeted in the Federal/State Fund (1505).

**Department:** County Human Services      **Program Contact:** Irma Jimenez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25033, 25038  
**Program Characteristics:**

**Executive Summary**

The Older Americans Act ARP funding provides meals to older adults, people with disabilities, and Veterans who may be at nutritional risk. The program meets diverse needs and expectations. Nutrition services increase health and reduce social isolation. The program uses culturally responsive and culturally specific services. These services help maintain participants' independence and improve their quality of life. A network of community partners provides nutrition education and nutritious meals. The Older Americans Act ARP funding also provides for effective administration of the Area Plan.

**Program Description**

**ISSUE:** The American Rescue Plan (ARP) provided Older Americans Act Funding to allow Area Agencies on Aging to support older adults in response to the COVID-19 pandemic. These funds are directed toward nutrition services, program support, and administrative costs. Communities of color have been greatly impacted by COVID-19. ADVSD disaster response seeks to respond to that impact.

**PROGRAM GOAL:** ARP funding has supported the increased cost for culturally specific meal providers to provide home delivered food programs during the pandemic. The program goal for FY 2024 will help culturally specific providers meet these increased costs as they shift back to congregate programs over the year. ARP funding will also support the administration of the Area Plan to build on a program model and contracting process that will meet the needs of diverse communities in Multnomah County.

**PROGRAM ACTIVITY:** The ARP funds will help culturally specific nutrition providers continue to provide home delivered nutrition services as they ramp back down to congregate meal sites. ARP funds will also result in the development of a contracting process that will build on the last contract cycle, include community feedback from the Area Plan and respond to the needs of diverse communities in an equitable manner

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of meals provided	N/A	23,609	23,609	11,820 <sup>1</sup>
Outcome	Percent of meals served to culturally specific consumers	N/A	100%	95%	95%

**Performance Measures Descriptions**

<sup>1</sup>OAA ARP funding will end on 9/30/24. As a result, funding and meals will reduce each year to provide a transition back to non OAA ARP service levels.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$754,593	\$0	\$577,300
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$754,593</b>	<b>\$0</b>	<b>\$577,300</b>
<b>Program Total:</b>	<b>\$754,593</b>		<b>\$577,300</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$754,593	\$0	\$577,300
<b>Total Revenue</b>	<b>\$0</b>	<b>\$754,593</b>	<b>\$0</b>	<b>\$577,300</b>

Explanation of Revenues

\$400,000 - ARP Federal Older Americans Act Title III-B Supportive Services (Federal) funding ends 9/30/2024  
 \$177,300 - ARP Federal Older Americans Act Title III-C Congregate/Delivered Meals (Federal) funding ends 9/30/2024

Significant Program Changes

Last Year this program was: FY 2023: 25492A COVID-19 ADVSD OAA ARP

This program offer falls under the County's Crisis Response & Community Recovery ARP Priority Area.

## Department Overview

The Joint Office of Homeless Services (JOHS) seeks to create an equitable community in which all people have safe, affordable, and accessible housing. It does this by working with community based organizations and governmental entities to provide participant-driven, coordinated, and equitable services focused on those who are experiencing, or at risk of, homelessness.

The department carries out this mission through five primary functions: Supporting the involvement of community stakeholders in the development and implementation of policies and programs that help address and end homelessness; Contracting local, State, and Federal funds to non-profit providers delivering a continuum of homeless and housing services to adults, veterans, youth, families with children, and survivors of domestic and sexual violence; Overseeing the development and operations of the community's emergency shelter system; Serving as the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) "Lead Agency"; and Leading Multnomah County's planning and implementation of programming funded by the Metro Supportive Housing Services Measure (SHS).

The JOHS services are based on the [Housing First](#) approach and through this lens, and with years of participant-driven planning that includes the creation and implementation of the [Multnomah County Local Implementation Plan](#) (LIP), the Joint Office has followed a clear road map that expands and builds upon services that reduce chronic and episodic homelessness. Furthermore, all work throughout the department is informed by strategies aimed at eliminating racial disparities while ending homelessness for individuals and families.

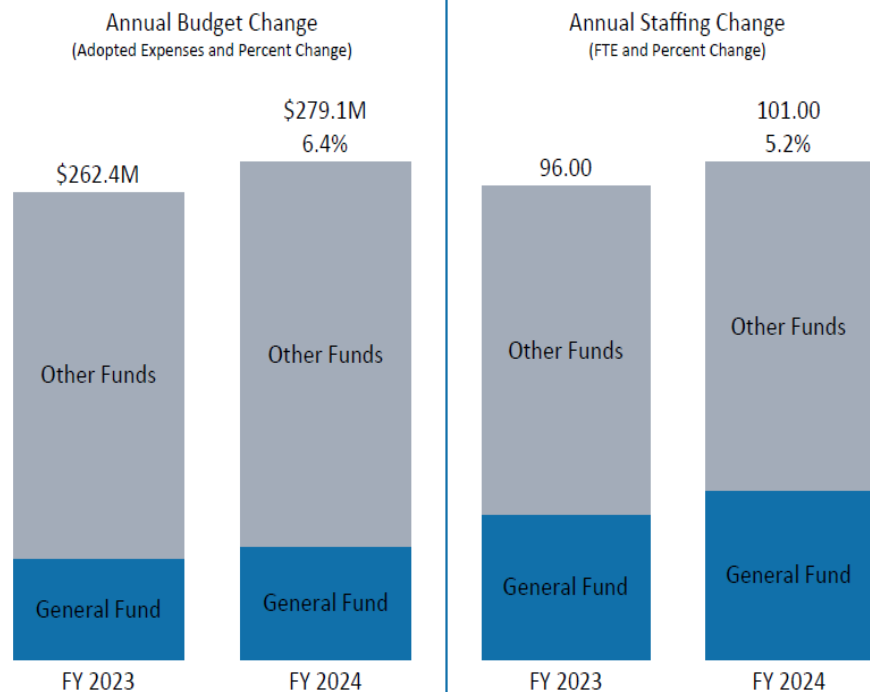
For FY 2024, the Joint Office of Homeless Services will be instrumental in implementing Housing Multnomah Now (HMN). This initiative will accelerate the placement of individuals experiencing homelessness into housing, and will further propel the mission of the Joint Office and Multnomah County. Specifically, this effort aligns with the Multnomah County Chair Jessica Vega Pederson's goal of "Responding to People Experiencing or Vulnerable to Homelessness". Three Hundred individuals experiencing homelessness will be housed through this initiative (30310).

The Joint Office of Homeless Services has five operating divisions that carry out core bodies of work that are essential in the deployment of the County's vision as a safety net organization: The Director's Office/Administration & Operations; System Support, Access & Coordination; Safety Off and On the Streets; Housing Placement and Retention; Supportive Housing; and Strategic Capital Investments.



### Budget Overview

The FY 2024 Joint Office of Homeless Services (JOHS) Adopted budget, excluding cash transfers, contingencies and unappropriated balances, is \$279.1 million of which \$63.6 million (23%) is County General Fund. Metro Supportive Housing Fund accounts for \$124.4 million or 45% of JOHS total budget, Federal/State Fund at \$68.1 million (24%) which includes \$40.7 million of City of Portland General Fund, American Rescue Plan at \$19.2 million (7%) (\$4.4 million County & \$14.9 million City of Portland) and Video Lottery Fund \$3.8 million (1%).



Supportive Housing Fund of \$139.1 million (including contingency) comprises \$96.2 million Metro Supportive Housing Measure (SHS) Funding of ongoing revenue based on Metro’s forecast, \$40.5 million of one-time-only (OTO) SHS funds and \$2.45 million Visitor Facilities Development (VFD) revenue. The VFD revenue supports services and programs for people experiencing homelessness, or who are at risk of becoming homeless, and services and programs addressing the community livability and safety concerns associated with homelessness.

Additionally, Metro Supportive Housing stabilization contingency of 5% and reserves of 10% totaling \$14.4 million are in program 30006A. Future Regional Long-term Rent Assistance liability contingency of \$303,439 is in program 30400E. For additional information around SHS funding and the JOHS budget please see the department transmittal letter.

American Rescue Plan (ARP) funding includes one-time-only \$4.4 million in direct County funds for expanded hygiene access and emergency rent assistance one-time-only (30902 and 30907). In FY 2024, \$14.9 million City of Portland American Rescue Plan funds will be provided to the of Joint Office to continue operations of the sleeping pods at the Queer Affinity and BIPOC

### Budget Overview (continued)

outdoor shelters. This funding also supports staff capacity and operations in the Joint Office of Homeless Services to continue work on the safe rest villages (30905).

The budget assumes the city is committed to continue to fund JOHS services and includes \$40.7 million of City of Portland General Funds including \$8.9 million of one-time-only funding. Since FY 2017, the City’s General Fund allocation to JOHS has included a continuation of serial one-time-only resources that fund core services like emergency shelter and outreach. The list below shows City General Fund investments by division.

- Administration & Operations \$377,403
- System Access, Assessment & Coordination \$1,723,196
- Safety off and on the Streets \$32,183,563
- Housing Placement & Retention \$1,591,727
- Supportive Housing \$4,839,925
- Total \$40,715,814

Shelter capital funds make up \$20.3 million of the FY 2024 budget across four programs (30010, 30208A/B/C). These funds are to expand the County’s capacity in congregate and non-congregate emergency shelter sites, as well as motel and alternative shelter sites. Capital funding is comprised of:

- \$11,550,000 one-time-only County General Fund
- \$5,145,685 one-time-only Federal/State Fund
- \$3,600,000 one-time-only Metro Supportive Housing Fund

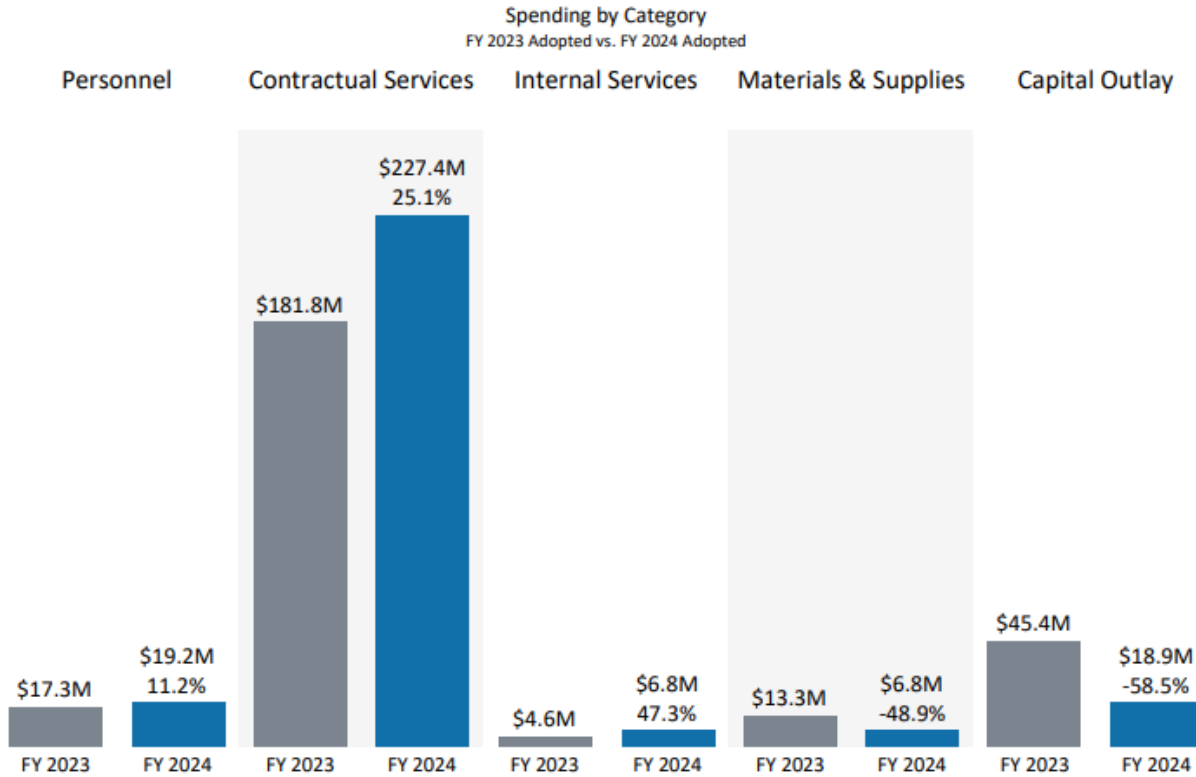
The budget includes a total of \$34.6 million of one-time-only County General funding across ten programs. The largest one-time-only General Fund investment of \$17,041,210 is program 30209 COVID-19 Emergency Response - Shelter Operations to provide support to six motel shelters, outreach supplies and expanded hygiene. The program was previously funded in FY 2023 with American Rescue Plan (ARP) funding. A list of these programs can be found in the Budget Director’s Message.

Budget Trends	FY 2022	FY 2023	FY 2023	FY 2024	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	74.17	97.00	96.00	101.00	5.00
Personnel Services	\$14,151,746	\$16,022,003	\$17,286,930	\$19,225,102	\$1,938,172
Contractual Services	114,366,085	147,188,365	181,818,049	227,422,870	45,604,821
Materials & Supplies	12,454,191	14,609,738	13,254,306	6,776,608	(6,477,698)
Internal Services	5,941,172	12,037,630	4,605,155	6,784,619	2,179,464
Capital Outlay	<u>4,962,207</u>	<u>13,508,324</u>	<u>45,395,821</u>	<u>18,860,685</u>	<u>(26,535,136)</u>
<b>Total Costs</b>	<b>\$151,875,401</b>	<b>\$203,366,060</b>	<b>\$262,360,261</b>	<b>\$279,069,884</b>	<b>\$16,709,623</b>

Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies, and unappropriated balances

### Budget Overview (continued)

The chart below provides a breakdown of the budget’s expense categories from FY 2023 to FY 2024. Contractual services is the largest component of the Joint Office of Homeless Services budget and grew the most between FY 2023 and FY 2024. The majority of contractual services increase was driven by County General Fund and Metro Supportive Housing Fund investments.



## Successes and Challenges

The Joint Office of Homeless Services is dedicated to listening and responding to the community; individuals with lived experience of homelessness; service providers; jurisdictional partners; and County leadership when designing and implementing programs, services, and policies to address the homeless crisis in Multnomah County. The Joint Office does this through a racial equity lens, with participant-driven perspectives and a person-centered approach.

At the conclusion of FY 2023, the Joint Office of Homeless Services successfully completed Year 2 (Phase 1) implementation of the Supportive Housing Services (SHS) Measure in Multnomah County. Guided by the Local Implementation Plan (LIP) to rapidly launch dozens of new and expanded programs in the areas of outreach, shelter, housing placement, employment, and permanent supportive housing.

In FY 2023, the Joint Office of Homeless Services established its first Community Budget Advisory Committee (CBAC). Additionally JOHS created a new Continuum of Care Board (CoC) that carries out advisory and oversight functions related to the role of the Collaborative Applicant for United States Housing and Urban Development's (HUD) Continuum of Care; a Supportive Housing Services advisory body which is a requirement of the Supportive Housing Services Measure; an advisory body for stakeholders that have lived experience of homelessness to advise on improving services and systems and an Equity Advisory Committee to advise programming based on their equity knowledge, lived experience, and expertise on improving systems and services.

One of the most significant risks facing the homeless response system continues to be the difficulty hiring and retaining the staff required to deliver interventions across the service system. Through the three years of the pandemic, this issue has grown in significance and today represents a real threat to the continuity of operations and the ability of providers to successfully build new programs and new capacity with the SHS Measure funds. The challenges are not necessarily spread equally across the homeless systems of care or community based providers. The problems are particularly acute in some parts of the shelter system and where the work of the homeless response system interfaces with the behavioral health system. While wages are only one component of the challenges facing our community based organizations, they are a significant one. Not surprisingly, the Joint Office of Homeless Services sees a clear correlation between the wage providers are able to offer and the hiring and retention challenges they face. Through the completion of the wage study commissioned in FY 2023, and the implementation of lessons learned, the JOHS will consider approaches that invest in capacity building and technical assistance for providers.

## COVID-19 and American Rescue Plan

Throughout FY 2024, the Joint Office continues with a mix of funding for the following programs as a response to the impact on the highly vulnerable populations who have unique physical, behavioral and social circumstances that require these intensive services. These interventions also provide crucial pathways from homelessness to housing. As JOHS continues to implement SHS and expand Permanent Supportive Housing (PSH) infrastructure, individuals served through ARP and COVID-19 programming will also transition to being served by the broader homelessness response system. These interventions are:

- Motel sheltering that provides both physical distancing and social isolation resources at five locations. This accounts for 295 beds/rooms
- Housing placement resources out of motel shelters
- Expanded hygiene access in the form of accessible restrooms, showers, and washrooms
- Culturally specific outreach
- Emergency Rent assistance
- Alternative shelter operating costs for two locations: BIPOC village and Queer Affinity village. This accounts for 73 units of capacity
- Safe Rest Village site operations costs at six locations. This accounts for 320 units of capacity.

These ARP and COVID-19 response interventions are included in the following programs:

- 30209 - COVID-19 Emergency Response - Shelter Operations: With the ongoing need for expanded shelter capacity, this program funds for the continuation of five leased motel shelters. Initial COVID-19 response efforts in FY 2020 included decompressing the congregate shelter system to allow for physical distancing by expanding the number congregate shelter sites and establishing non-congregate motel shelters. This prevented physical distancing requirements from resulting in a reduction of overall system capacity. For the duration that funding is available for this program, it will effectively serve as temporarily expanded capacity for the shelter system as congregate shelters return to pre-pandemic density with the relaxation of physical distancing requirements. The rooms are supported with basic amenities, including private bathroom and shower, meals, and access to laundry services. There is also 24/7 on-site staffing, in order to be able to routinely check on guests, as well as on-site access to technology and staff to support transitions out of motel shelter and into permanent housing as rapidly as possible. The motel shelters funded by this program include the culturally specific sheltering programming that is rare within the JOHS system of providers. Additionally, this program included an isolation motel shelter which supports congregate settings in having a safe, non-congregate setting to place shelter guests if/when there are outbreaks of communicable illnesses which would pose a threat to the overall health and safety of shelter guests.

### COVID-19 & American Rescue Plan (continued)

- 30302B - COVID-19 Emergency Response - Placement out of Shelter: This program funds adult-only households to exit shelter using limited duration rental assistance, innovative multi-agency mobile housing placement and retention support staffing, as well as culturally specific services. This funding prioritizes serving adult households experiencing chronic homelessness and at high-risk of complications from communicable diseases. In addition, the program funds for mobile shelter in-reach services to connect people in alternative and other shelter programs that lack housing placement capacity to permanent housing opportunities.
- 30902 - ARP - COVID-19 Emergency Response - Expanded Hygiene Access: For those experiencing unsheltered homelessness, access to basic hygiene services is one of the most challenging needs to meet. The importance of addressing basic hygiene needs was made even more apparent during the COVID-19 pandemic because of the importance of hand washing and basic sanitation to prevent the spread of the disease. This program continues investments in basic hygiene services for the unsheltered population, with a focus on increasing access to hygiene services in areas currently most underserved with those resources.
- 30210C - COVID-19 Emergency Response - Culturally Specific Outreach: This program maintains culturally specific services in one particularly critical area of the homeless services continuum of care. By investing in new culturally specific outreach capacity focused on overrepresented Communities of Color in East County, this program offer helps ensure that members of those communities who are living unsheltered in encampments, vehicles, or other places not meant for human habitation are connected to critical resources, including survival supplies, a range of shelter and support services, and, ultimately, permanent housing. Culturally specific outreach workers are able to build trust and tailor their work to the specific needs of their communities.
- 30907 - ARP - COVID-19 Emergency Recovery - Emergency Rent Assistance: This program funds culturally specific community based organizations to maintain their critical role in creating access for BIPOC households to vital emergency rental assistance resources. A portion of the funding in this program offer will also be available for use as direct rental assistance. Focusing this funding on an expanded partner network of community based organizations, especially culturally specific organizations, maintains the network of service providers and culturally specific service offerings in the County. This program funds staffing at culturally specific community based organizations to support housing placements and rent assistance.
- 30905 - ARP - COVID-19 Emergency Response - Outdoor Physical Distancing Shelters & Safe Rest Villages: In FY 2021, the City of Portland and Multnomah County worked quickly to expand non-congregate shelter options for people experiencing homelessness. As part of this response, the jurisdictions created three emergency outdoor shelters to keep people experiencing homelessness safe and socially distant. Additionally, this program funds the operations of the planned six Safe Rest Villages (SRV) sites. These SRV shelters will be operated by JOHS contractors and offer immediate safety off the streets for people living in encampments.



## Diversity, Equity, and Inclusion

The Joint Office of Homeless Services continues to commit to and prioritize eliminating the disproportionately high rates of homelessness among BIPOC communities and builds on the following strategies:

1. Improved data collection and outcome reporting using inclusive racial identities.
2. Created standards of practice for all contractors that include cultural responsiveness and/or culturally specific service provision.
3. Included a requirement for organizational equity assessments, plans, and progress reporting in all contracts.
4. Prioritized and increased funding to culturally specific organizations through local procurement processes and prioritization of culturally specific programs in competitive Federal applications.
5. Prioritized staff support to recruit culturally specific providers to apply for contracted service procurements, with the ultimate goal of diversifying the qualified pool of service providers and increasing the culturally specific service capacity across the system of care.
6. Implementation and building on the Departments Workforce Equity Strategic Plan (WESP).

As the Joint Office seeks to create an equitable community in which all people have safe, affordable and accessible housing, the JOHS Equity Team is committed to ensuring equitable, anti-racist, gender affirming, and culturally responsive systems for our patrons, workforce, and community. The Equity Team fulfills this vision through operationalizing five pillars of work: monitor and review of policy and equity plans; serving as project partners and providing subject matter expertise; coordinating and providing training and tools; workforce equity and the WESP; and community partner equity engagement. The equity manager sits on the executive team and provides advocacy and subject matter expertise in decision making.

The JOHS equity team, working with Government Alliance on Racial Equity (GARE) toolkit, Multnomah County's Equity and Empowerment Lens, as well as equity toolkits developed by other municipalities, developed and rolled out a Racial Equity Lens Tool (RELT) that is specific to the work and mission of the JOHS. The Equity Team has been providing training, coaching, and technical assistance on the usage of the RELT since the roll out of the tool in July 2022. The operationalization of the tool across our office included the requirement that a RELT be submitted with proposals to the Director, policy proposals or amendments, and Notice of Funding Allocations (NOFAs). As we work to operationalize the use of the RELT in our decision points, we required all staff submitting program offers to complete and submit a JOHS RELT or the County's Budget Equity Lens Tool alongside each program offer. The Equity Manager reviewed each RELT and program offer (along with the rest of the executive team) and provided feedback on how to reflect the RELT findings in the program offer narratives and performance measures. The review of these RELTs revealed that equity-mindedness was applied to the development and modification of our program offers, the measures we use to track our progress, and the identification of gaps in the programming offered. A RELT

### Diversity, Equity, and Inclusion (continued)

was also filled out with the submission of new program offers, and consistent with the SHS Local Implementation Plan emphasized the importance of expanding the number and capacity of culturally specific service providers, increasing funding to those providers, and the expansion of programming that serves Black, Indigenous, and other People of Color.

The Community Budget Advisory Committee (CBAC) for the Joint Office began meeting in December 2022 and held monthly, and two semi-monthly, meetings throughout the budget process. CBAC members heard directly from the Joint Office Director, managers and subject matter experts about the programs and services within the department. The Equity Manager provided three training sessions to the CBAC: one on the importance of equity in the Joint Office's work and the work of the Equity Team, and two on the RELT and how to use it in the CBAC's engagement with the budget process. Equipped with training on equity and its application in the Joint Office budget process, the CBAC members presented recommendation to the Board of Commissioners about how Multnomah County can best use its resources to serve the community.

The staff completing RELT and program offers are collecting and providing important feedback on improvements to that process for next year's budget cycle. Future plans include a longer period of work on the budget, as we know that inclusion and equity-minded thinking requires slowing down and giving processes the time they deserve, as well as building on the implications revealed in the RELTs from this year into our evaluation of our work next year.

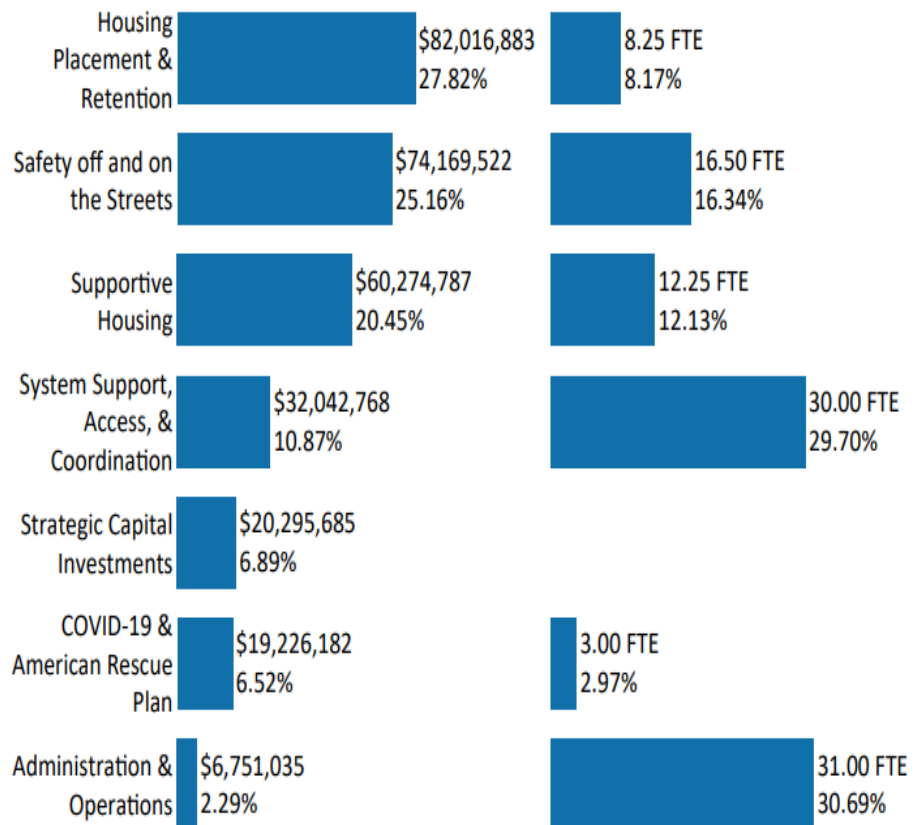
# Joint Office of Homeless Services

fy2024 adopted budget

## Budget by Division

Division Name	FY 2024 General Fund	Other Funds	Total Division Cost	Total FTE
Administration & Operations	\$4,118,341	\$2,632,694	\$6,751,035	31.00
System Support, Access, & Coordination	3,053,341	28,989,427	32,042,768	30.00
Safety off and on the Streets	27,167,508	47,002,014	74,169,522	16.50
Housing Placement & Retention	15,368,477	66,648,406	82,016,883	8.25
Supportive Housing	3,272,443	57,002,344	60,274,787	12.25
Strategic Capital Investments	11,550,000	8,745,685	20,295,685	0.00
COVID-19 & American Rescue Plan	-	<u>19,226,182</u>	<u>19,226,182</u>	<u>3.00</u>
<b>*Total Joint Office of Homeless Services</b>	<b>\$64,530,110</b>	<b>\$230,246,752</b>	<b>\$294,776,862</b>	<b>101.00</b>

\*Includes cash transfers, contingencies and unappropriated balances



## Administration & Operations

The Administration and Operations division provides executive leadership and strategic direction for the Joint Office of Homeless Services. It works with elected leaders across the region, community-based organizations, advisory bodies, and other stakeholders to develop, implement, and deliver homeless services. Administration and Operations includes:

- **Equity-focused Executive Leadership:** Provides strategic direction for the Department's programs and services.
- **Fiscal Business Services:** Development, management, and administration of the annual budget, management of local, State, and Federal funding, procuring and contracting, and processing invoices from and payments to contracted service providers.
- **Facilities & Operational Services:** Administrative and in-office operations to support the Joint Office, facilities asset planning, management, and development.
- **Human Resources:** Conducts internal and external recruitments, provides a structured onboarding process, and supports employee retention by providing training, employee relations, professional development, and ensuring safety, trust, and belonging for all staff.
- **Communications:** Manages both internal and external communications via newsletters; social media; targeted messages both written and videos.

## Significant Changes

Throughout FY 2023, the Joint Office was developing as a new County department with the establishment of the necessary structure and functional capabilities to carry out its growing set of responsibilities. Including implementing and supporting programs funded by the SHS Measure. In FY 2024 the Joint Office will continue to refine and further define its internal infrastructure to carry out these functions including office operations; emergency management; risk management; policy and procedure development; internal controls; quality improvement and management; facilities asset management and development; human resources processes; and business services processes.

Notably, the Joint Office of Homeless Services has experienced the transition of executive leadership in FY 2022 and FY 2023, with the long-time founding director stepping down in the Spring of FY 2022, and two interim directors serving through FY 2023. The new director was hired in the Spring of 2023.

### System Support, Access, & Coordination

The System Support, Access & Coordination division of the Joint Office of Homeless Services provides data quality support, analysis, outcomes reporting, policy and planning work, community engagement, and system-wide training to support equity-focused services practices and capacity building.

- Data, Research, and Evaluation staff oversee data collection by contracted service providers, develop and implement ongoing outcome reporting, and respond to requests for quantitative information from jurisdictional and community partners. This group also develops and implements, both directly and through outside contractors, the evaluation of specific programs, strategies, and systems of care.
- Policy, Planning, and Regional Coordination staff support a range of community-led policy and planning initiatives, including for the Supportive Housing Services (SHS) Measure implementation, the regional planning bodies associated with the SHS Measure, as well as the Continuum of Care, Lived Experience Committee, Equity Advisory Committee and other advisory bodies. This work focuses on soliciting and incorporating the perspectives of people with lived experience of homelessness, in particular people from Communities of Color, into the development of policy recommendations.
- Funding of equity-focused system development includes support for community-based organizations that seek to or are currently contracted to deliver services. The goal is to ensure that these organizations, in particular emerging and culturally specific organizations, have an equitable opportunity to successfully contract with the Joint Office and obtain critical resources to support their work in the community.
- This division includes internal staff and contracted services that improve access to homeless and housing services; contracts for online, telephonic, printed, and outreach-based information; and services navigation support. Coordinated Access staff lead the development and implementation of the process of assessing and prioritizing individuals and families for permanent supportive housing and certain rapid rehousing resources.

### Significant Changes

In FY 2023 the Joint Office of Homeless Services assumed the transfer of all Homeless Management Information System (HMIS) leadership responsibilities in the Continuum of Care from the Portland Housing Bureau. As part of this change, in FY 2024 the Joint Office will lead, in partnership with the Department of County Assets, the implementation of HMIS for the tri-county region of Multnomah, Clackamas, and Washington counties in keeping with the regional focus of the SHS Measure. This division includes the Regional Strategies Implementation Fund, which is the allocation of SHS Measure funding that will support the Tri-County Planning Body's regional plan.

## Safety off and on the Streets

Safety off and on the Streets includes short-term stay shelter options for people experiencing homelessness when permanent housing options are not accessible. This includes year-round 24/7 shelters, temporary winter and seasonal overnight shelters, severe weather shelters, alternative shelter models, and daytime services or resource centers. Emergency Shelters are vital to protecting the basic health and safety of individuals while they are experiencing homelessness, particularly those with disabling conditions, veterans, women, survivors of domestic and sexual violence, youth, and older adults. Alternative shelters provide a safe space to sleep and access to resources for those who are not currently served by traditional emergency shelters. Daytime Resource Centers provide basic safety off the streets, hygiene services, temporary storage, and access to an array of basic services during daytime hours for people who are not staying in 24/7 emergency shelters. Outreach and engagement are coordinated, person-centered, and bring housing placement and other support services directly to people experiencing homelessness. This includes coordinated efforts that bring services that meet basic needs and connect individuals to housing placement and retention services, other housing and support services, mental health outreach to individuals with severe and persistent mental illness, substance use screening, and assessment, culturally-specific outreach services, and housing readiness assistance.

## Significant Changes

Safety off and on the Streets has undergone short- and long-term changes as a result of the COVID-19 pandemic impacts and the implementation of the Supportive Housing Services Measure. During the pandemic, the Joint Office spaced out its emergency shelter system to allow for physical distancing and the safe provision of services during the pandemic. In the FY 2024 budget, the Joint Office is shifting its programming and operational focus from an emergency response strategy of significant shelter expansion to a shelter stabilization strategy as there is a return to pre-pandemic capacity levels across the emergency shelter system. The FY 2024 budget invests in all forms of shelter and transitional housing capacity. Investments continue to fund the operation of several congregate shelter sites, motel shelter programs, and operations of existing village-style alternative shelters, including sites in East Multnomah County, a safe park or village-style alternatives shelters, and a second micro-village. The FY 2024 budget continues investments in outreach and navigation services focused on assisting people who remain unsheltered to meet their basic needs and navigate to shelter and housing.

### Housing Placement & Retention

Housing Placement & Retention programming help people gain or retain housing, provides supportive services for housing stability, diverts those at risk of homelessness with accessible housing options, and assists households experiencing homelessness or housing instability with workforce support. For many experiencing homelessness, returning to permanent housing requires a combination of limited duration, flexible rent assistance, housing placement and retention support services, and access to income acquisition assistance. Through this programming, referred to as Rapid Rehousing (RRH) each year thousands of survivors of domestic violence, seniors, adults, women, families, youth, and veterans are housed and/or retained in housing they already have.

RRH assists households in exiting homelessness and gaining permanent housing. It includes flexible short- and medium-term rental assistance, move-in and barrier mitigation funds, and housing case management services and support. RRH helps achieve and maintain permanent housing stability as quickly as possible. Services include housing search and identification, negotiation with landlords to overcome barriers to housing access, financial assistance with rent and move-in expenses, and a range of post placement stabilization services, including support managing household finances, maintenance and habitability issues, and landlord disputes. Income acquisition supports include education, job training, and assistance in obtaining public benefits. RRH services are provided by a large network of community-based organizations, including culturally specific organizations serving Black, Indigenous, Latinx, and other Communities of Color that are overrepresented in the homeless population. This division of the JOHS helps achieve the Supportive Housing Services Measure Local Implementation Plan goal of increasing annual placements into housing by at least 2,500 individuals per year, and works to increase placements out of shelter.

### Significant Changes

In FY 2024, the Division will continue work toward housing placement capacity, housing case management, barrier mitigation, employment services, and a range of rent assistance options. The FY 2024 budget provides funding to continue teams dedicated to increasing placements out of shelter, including culturally specific teams, and teams focused on older adults. The FY 2024 budget includes investments in supporting a coalition of smaller, primarily culturally specific, community based organizations that helped deliver eviction prevention programming during the pandemic and to ensure that the economic impact of the pandemic does not lead to a new wave of households becoming homeless. Additionally, in FY 2024 the Division will be instrumental in supporting the implementation of the Housing Multnomah Now initiative and the State's Oregon All In initiative which further builds on the work of this division and the Joint Office.

## Supportive Housing

Supportive Housing (SH) commonly serves those with severe temporary or long-term disabilities, who are extremely low income and experiencing long-term homelessness. SH can take the form of both permanent supportive housing and recovery-oriented transitional housing.

Permanent Supportive Housing (PSH) is deeply affordable permanent housing with supportive services that assists persons with long-term disabilities, including chronic health conditions, mental illness, and addictions, who have experienced, or are at risk of, long-term or cyclical homelessness. It combines long-term rent assistance with ongoing wrap-around supportive services, including but not limited to behavioral and physical health services, benefits and income-related services, and in-home housing retention supports. Services are intensive, voluntary, individualized, and intended to assist participants in gaining and maintaining long-term housing stability. PSH can be provided in a building entirely dedicated to PSH (facility-based), as a cluster of units in a single building that also includes non-PSH units, and scattered across multiple sites, or clustered units, and can be integrated into private market and non-profit/publicly owned housing.

Recovery-oriented transitional housing (TH) provides temporary housing and supportive recovery-oriented services for people experiencing homelessness who have a substance use disorder and are seeking this type of program. The housing and services are short-term, typically 24 months or less, and designed to facilitate participant's transition to permanent housing.

## Significant Changes

The FY 2024 budget includes funding for approximately 1,500 SH units with SHS Measure funding, representing over 67% of the Local Implementation Plan (LIP) goal of 2,235 units. This includes investments in scattered-site and site-based SH including SH that is integrated into deeply affordable housing units financed by the Portland Housing Bond and Metro Housing Bond; SH for people identified through the Frequent Users System Engagement (FUSE) program; and SH that is specifically designed for various populations including people with significant behavioral health needs, BIPOC communities, older adults, youth, families with children, and households impacted by domestic violence. Additionally, the Joint Office maintained investments in cross-departmental housing-focused programming in partnership with the Department of County Human Services, the Health Department, and the Department of Community Justice. The FY 2024 budget invests in infrastructure to support SH programming including a Risk Mitigation Program.



### Strategic Capital Investments

This division is responsible for planned capital investments and potential future investments (30010, 30208A/B/C). The planned investments include an East County day center or shelter (estimated at 100 beds), the Arbor Lodge renovation (88 units/18 pods), development of new village-style alternative shelter sites or safe park sites (estimated at 60 pods/rooms), and capital improvements to various existing shelter programs supported by the Joint Office of Homeless Services.

Identification of future investments is underway. The process to identify these future investments will include geographic equity considerations, expanding the range of shelter options, and growth in overall shelter capacity. This division also contains funding for one-time renovation and improvement costs for the potential sites once they are acquired and for existing shelter programs that develop capital improvement needs during the course of the year.

### Significant Changes

This division includes \$9.75 million in new one-time County funding for strategic capital investments in program infrastructure needs of County departments that are responding to the critical need for shelter, transitional, and longer-term supportive housing options for those experiencing, or at risk of, homelessness, and who are struggling with serious disabling conditions (30010). New one-time only investment of \$900,000 of Metro Supportive Housing Services (SHS) carryover to fund Micro Villages Project (30208C).

### Joint Office of Homeless 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 2024 General Fund	Other Funds	Total Cost	FTE
<b>Administration &amp; Operations</b>					
30000	Administration and Operations	\$2,089,738	\$1,574,800	\$3,664,538	12.00
30001	Business Services	1,383,397	864,315	2,247,712	14.00
30002	Human Resources	645,206	193,579	838,785	5.00
<b>System Support, Access, &amp; Coordination</b>					
30003	Data, Research, & Evaluation	400,003	1,573,528	1,973,531	11.50
30004	Policy & Planning	172,016	1,004,380	1,176,396	6.50
30005A	Equity-Focused System Development & Capacity Building	1,217,468	546,985	1,764,453	5.00
30006A	Regional Coordination - Reserve and Contingency	0	14,428,539	14,428,539	0.00
30006B	Regional Coordination - Regional Strategies Implementation Fund	0	4,809,513	4,809,513	0.00
30006C	Regional Coordination - Homeless Management Information System	0	942,858	942,858	1.00
30100A	System Access, Assessment, & Navigation	1,263,854	5,683,624	6,947,478	6.00
<b>Safety off and on the Streets</b>					
30200	Safety off the Streets - Adult Shelter	1,419,579	30,496,558	31,916,137	4.50
30201	Safety off the Streets - Women's Shelter	1,198,116	1,094,387	2,292,503	0.00
30202	Safety off the Streets - Alternative Shelter for Adults	59,700	5,206,484	5,266,184	3.00
30203	Safety off the Streets - Family Shelter	1,750,486	2,220,200	3,970,686	1.00
30204	Safety off the Streets - Domestic Violence Shelter	1,321,649	608,083	1,929,732	0.50
30205	Safety off the Streets - Youth Shelter	2,232,598	111,052	2,343,650	0.50
30206	Safety off the Streets - Winter Shelter & Severe Weather	651,890	3,074,529	3,726,419	0.00
30207	Safety off the Streets - Bridge Housing	0	2,763,920	2,763,920	0.00
30209	COVID-19 Emergency Response - Shelter Operations	17,041,210	0	17,041,210	3.00
30210A	Safety on the Streets	146,477	539,396	685,873	1.00
30210B	Safety on the Streets - Navigation & Service Coordination	899,553	887,405	1,786,958	3.00
30210C	COVID-19 Emergency Response - Culturally Specific Outreach	446,250	0	446,250	0.00

# Joint Office of Homeless Services

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Housing Placement &amp; Retention</b>					
30300A	Housing Placement & Retention - Adults & Women Households	1,367,543	2,325,170	3,692,713	1.25
30300B	Housing Placement & Retention - Adults & Women Households - SHS	0	7,612,740	7,612,740	0.00
30301A	Housing Placement & Retention - Homeless Families	3,809,481	585,155	4,394,636	1.00
30301B	Housing Placement & Retention - Homeless Families - SHS	0	6,383,606	6,383,606	1.00
30302A	Housing Placement & Retention - Placement out of Adult Shelter	96,465	4,386,360	4,482,825	0.00
30302B	COVID-19 Emergency Response - Placement out of Shelter	0	6,472,330	6,472,330	0.00
30303A	Housing Placement & Retention - Domestic Violence	2,073,502	1,436,988	3,510,490	0.50
30303B	Housing Placement & Retention - Domestic Violence - SHS	0	2,675,199	2,675,199	1.00
30305	Housing Placement & Retention - Medical/Aging	0	704,905	704,905	0.00
30306	Housing Placement & Retention - Youth Services	4,254,995	1,960,607	6,215,602	0.50
30307	Housing Placement & Retention - Veterans	197,167	630,275	827,442	0.00
30309	Housing Placement & Retention - Incentives & Master Leases	0	4,366,530	4,366,530	0.00
30310	Housing Placement & Retention - Housing Multnomah Now	0	10,000,000	10,000,000	3.00
30311	State Executive Order 23-02 Oregon's ALL IN	0	13,374,203	13,374,203	0.00
30500	Diversion Services	1,336,876	1,522,548	2,859,424	0.00
30500B	Benefits and Entitlements Specialist Team (BEST) Expansion	250,000	0	250,000	0.00
30600	Employment Programs	1,982,448	2,211,790	4,194,238	0.00
<b>Supportive Housing</b>					
30400A	Supportive Housing	797,271	6,473,097	7,270,368	0.00
30400B	Supportive Housing - SHS	1,262,749	4,901,150	6,163,899	11.00
30400C	Supportive Housing - Local Bond Units and Site-Based Commitments	0	6,859,900	6,859,900	0.00
30400D	Supportive Housing - Tenant-Based Commitments	0	12,183,035	12,183,035	0.00
30400E	Supportive Housing - System Support	0	2,737,409	2,737,409	0.00
30400F	Supportive Housing - Local Bond Units and Site-Based Commitments - SHS Expansion	0	1,757,749	1,757,749	0.00

# Joint Office of Homeless Services

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Supportive Housing (cont.)</b>					
30401A	Supportive Housing - Behavioral Health/Medical Housing	0	4,890,579	4,890,579	0.25
30401B	Supportive Housing - Behavioral Health/Medical Housing - Service Coordination Team	0	2,507,628	2,507,628	0.00
30402	Supportive Housing - Local Long Term Rental Vouchers	442,414	440,810	883,224	0.00
30403	Supportive Housing - Families	770,009	1,095,973	1,865,982	1.00
30404	Supportive Housing - Youth	0	978,570	978,570	0.00
30405	Supportive Housing - Domestic Violence	0	632,625	632,625	0.00
30406	Supportive Housing - Frequent Users Systems Engagement	0	1,085,550	1,085,550	0.00
30407A	Supportive Housing - Countywide Coordination - Dept of County Human Services	0	2,381,517	2,381,517	0.00
30407B	Supportive Housing - Countywide Coordination - Health Department	0	6,568,657	6,568,657	0.00
30407C	Supportive Housing - Countywide Coordination - Dept of Community Justice	0	1,508,095	1,508,095	0.00
<b>Strategic Capital Investments</b>					
30010	Housing and Homeless Capital	9,750,000	0	9,750,000	0.00
30208A	Safety off the Streets - Emergency Shelter Strategic Investment	1,800,000	5,145,685	6,945,685	0.00
30208B	Safety off the Streets - Emergency Shelter Strategic Investment - SHS	0	2,700,000	2,700,000	0.00
30208C	Safety off the Streets - Micro Villages Project	0	900,000	900,000	0.00
<b>COVID-19 &amp; American Rescue Plan</b>					
30902	ARP - COVID-19 Emergency Response - Expanded Hygiene Access	0	750,000	750,000	0.00
30905	ARP - COVID-19 Emergency Response - Outdoor Physical Distancing Shelters & Safe Rest Villages	0	14,864,912	14,864,912	3.00
30907	ARP - COVID-19 Emergency Recovery - Emergency Rent Assistance	0	3,611,270	3,611,270	0.00
<b>Total Joint Office of Homeless Services</b>		<b>\$64,530,110</b>	<b>\$230,246,752</b>	<b>\$294,776,862</b>	<b>101.00</b>

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**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

This program offer funds administrative operations, program equity, community engagement, and communications for the Joint Office of Homeless Services (JOHS). The JOHS is the backbone department supporting a collective impact approach to preventing and ending homelessness in the City of Portland and Multnomah County. The City and the County consolidated resources and services under the JOHS to fund community initiatives to prevent and ultimately end homelessness for tens of thousands of individuals and families each year. The JOHS manages resources from Multnomah County, the City of Portland, Metro, and HUD to fund community initiatives and programs to address and end homelessness in the region.

**Program Description**

Homelessness is an ongoing crisis in the City of Portland and Multnomah County. In the last several years, the community has come together and responded in unprecedented ways. The JOHS represents a shared commitment between the City of Portland and Multnomah County to expand, improve, and simplify access to the range of services needed to address homelessness in the community. The JOHS administers contracts for homeless services, plans and manages systems of care, oversees system reporting and evaluation, conducts homeless street counts and one-night shelter counts, and writes proposals to and monitors funds issued by the U.S. Department of Housing and Urban Development. These operations affect the lives of tens of thousands of homeless singles, youth, families, and survivors of domestic violence in the community. Through the JOHS, funds are contracted to more than 50 nonprofit and public agencies to provide a comprehensive range of services to assist people experiencing homelessness or housing instability. The JOHS receives funding and policy direction from the City of Portland and Multnomah County as well as the City of Gresham and Home Forward. The JOHS, by integrating staffing and funding, offers the City and County enhanced operational coordination and effectiveness in the delivery of services.

The JOHS is committed to and has taken numerous steps to realize the department's goals of achieving racial equity in homeless services and eliminating disparate rates of homelessness on the basis of race and ethnicity. To that end, the JOHS has: (1) improved data collection and outcome reporting using inclusive racial identities; (2) created standards of practice for all contractors that include cultural responsiveness and/or culturally specific service provision; (3) included a requirement for organizational equity assessments, plans, and progress reporting in all contracts; (4) prioritized and increased funding to culturally specific organizations through local procurement processes and prioritization of culturally specific programs in competitive Federal applications; and (5) prioritized staff support to community advisory efforts, including most recently around planning for chronic homelessness and permanent supportive housing.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Lead community-based budget recommendation development	1	1	1	1
Outcome	Present Community Budget Advisory Committee budget recommendations*	N/A	1	1	1

**Performance Measures Descriptions**

\*This was a new measure in FY 2023

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$854,272	\$1,027,748	\$1,176,390	\$824,129
Contractual Services	\$10,000	\$100,000	\$0	\$105,000
Materials & Supplies	\$114,059	\$187,334	\$310,978	\$159,653
Internal Services	\$670,058	\$498,102	\$602,370	\$486,018
<b>Total GF/non-GF</b>	<b>\$1,648,389</b>	<b>\$1,813,184</b>	<b>\$2,089,738</b>	<b>\$1,574,800</b>
<b>Program Total:</b>	<b>\$3,461,573</b>		<b>\$3,664,538</b>	
<b>Program FTE</b>	4.00	8.00	6.55	5.45

Program Revenues				
Intergovernmental	\$0	\$2,836,547	\$0	\$1,574,800
Other / Miscellaneous	\$252,422	\$0	\$420,645	\$0
<b>Total Revenue</b>	<b>\$252,422</b>	<b>\$2,836,547</b>	<b>\$420,645</b>	<b>\$1,574,800</b>

## Explanation of Revenues

County General Fund plus: \$1,579,864 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$215,899 in Departmental Indirect Revenue.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30000A Administration and Operations

This program offer funds administrative operations, program equity, community engagement, and communications for the Joint Office of Homeless Services. In the FY 2023 Adopted budget, this program was funded across three program offers, 30000A, 30000B, and 30000C.

**Department:** Joint Office of Homeless Services      **Program Contact:** Antoinette Payne

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

This program offer funds business services functions for the Joint Office of Homeless Services (JOHS), including budget, grants management, accounts payable, contracts, and purchasing. The JOHS business services team is responsible for development, management, and administration of the annual budget, management of local, State, and Federal funding, procuring and contracting for the provision of homeless services, and processing invoices from and payments to contracted service providers.

**Program Description**

The JOHS business services team is responsible for development, management, and administration of the annual budget, management of local, State, and Federal funding, procuring and contracting for the provision of homeless services, and processing invoices from and payments to contracted service providers. As a multi-jurisdictional department, the JOHS participates in the annual budget process for both the City of Portland and Multnomah County. The business services team prepares annual budgets for both jurisdictions and completes related fiscal reporting throughout the year to ensure that spending occurs within the designated authority limits.

The business services team manages more than a dozen local, Federal, and State funding streams, which includes grant monitoring, reporting, and fiscal compliance. It supports the JOHS in conducting procurements, ensuring procurement authority to contract for services, and managing the lifecycle of contracts from initial development to annual renewal and mid-year updates. The JOHS maintains more than 50 contracts with more than 40 community-based organizations. The business services team supports the fiscal administration of homeless services contracts, working closely with community-based organizations to maintain contract budgets and invoice for services. It processes more than 900 invoices each year totaling more than \$125 million.

The business services team prioritizes equity by supporting low-barrier procurements and contracting activities, being responsive to the cash management needs and providing financial technical assistance and grants management support to small and culturally specific organizations. It supports the program teams in the provision of services that prioritize Black, Indigenous, and other People of Color and the JOHS commitment to eliminating racial disparities among people at risk of or experiencing homelessness.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of contracts managed, including culturally-specific organizations	50	60	60	70
Outcome	Number of invoices processed*	850	850	900	900
Outcome	Funding passed to community-based organizations, including culturally-specific organizations*	\$100.0 million	\$125.0 million	\$125.0 million	\$125.0 million
Outcome	Percent of financial reports submitted to the satisfaction of the grantor	99%	99%	99%	99%

**Performance Measures Descriptions**



## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,171,802	\$1,013,556	\$1,383,397	\$864,315
Contractual Services	\$0	\$150,000	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$1,171,802</b>	<b>\$1,163,556</b>	<b>\$1,383,397</b>	<b>\$864,315</b>
<b>Program Total:</b>	<b>\$2,335,358</b>		<b>\$2,247,712</b>	
<b>Program FTE</b>	7.40	6.60	8.50	5.50

Program Revenues				
Intergovernmental	\$0	\$1,163,556	\$0	\$864,315
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,163,556</b>	<b>\$0</b>	<b>\$864,315</b>

## Explanation of Revenues

County General Fund plus \$859,251 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30001A Business Services

This program offer funds business services functions for the Joint Office of Homeless Services. In the FY 2023 Adopted budget, this program was funded across two program offers, 30001A, and 30001B, which when combined amounted to \$2.2 million.

**Department:** Joint Office of Homeless Services      **Program Contact:** Shannon Goulter

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

The Joint Office of Homeless Services (JOHS) Human Resources (HR) team provides expertise, guidance, and leadership on all human resources functions for this new and rapidly growing County department. The JOHS HR team supports organizational planning and the development and management of human resources business processes. It supports all staff through the full employee lifecycle, including recruitment, onboarding, employee relations, retention, professional development, and training, with an overarching commitment to department and County equity values. The JOHS HR team is staffed with individuals of diverse educational, professional, cultural, and lived backgrounds that offer a high-level of expertise and competency, and that also reflect the department’s core values.

**Program Description**

Prior to its establishment as a department in FY 2022, the JOHS relied on central County human resources support provided by the Department of County Management and the Department of County Assets. Formed in FY 2022, the JOHS Human Resources Team (HR) team provides the department with internal expertise, support, guidance, and leadership on all human resources functions.

The total number of JOHS staff has grown from 32.00 FTE in FY 2022 to over 100.00 FTE in FY 2024. This has required intentional human resources leadership and strategic organizational planning and development, including the development of staffing and recruitment plans. It has also required additional capacity for all HR business processes, including recruitment, onboarding, employee relations, retention, professional development, training, and timekeeping. The HR team provides leadership and strategic planning, along with guidance on workforce diversity, equity, and inclusion to ensure fidelity to the department’s equity values and the County’s Workforce Equity Strategic Plan (WESP). The HR team does this in partnership with the JOHS Equity Committee and Equity Manager.

The HR team provides the full lifecycle of HR services for the department’s represented, non-represented, limited-duration, and on-call employees. This includes conducting internal and external recruitments, providing a structured and engaging onboarding process, and supporting employee retention by providing training, employee relations, professional development, and ensuring safety, trust, and belonging for all JOHS staff. It leads the development and management of human resources business processes, with a focus on equitable and inclusive practices. It develops position descriptions, performs position management, supports timekeeping, maintains human resources data systems, and interprets and ensures compliance with County Personnel Rules and Collective Bargaining Agreements.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percent of recruitments that are successful*	90%	90%	90%	90%
Outcome	Number of regular employees provided full range of HR services	60	98	98	102
Output	Percent of total recruitments that include candidates who identify as a person of color	N/A	100%	100%	100%
Output	Percent of JOHS staff negatively impacted by avoidable Workday errors**	35%	32%	27%	15%

**Performance Measures Descriptions**

\*A successful recruitment is a recruitment that ends in a hire.

\*\*Includes but limited too overpayments, schedule errors, telework payments and compensation errors.

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$499,762	\$236,502	\$645,206	\$193,579
<b>Total GF/non-GF</b>	<b>\$499,762</b>	<b>\$236,502</b>	<b>\$645,206</b>	<b>\$193,579</b>
<b>Program Total:</b>	<b>\$736,264</b>		<b>\$838,785</b>	
<b>Program FTE</b>	3.00	2.00	3.60	1.40

Program Revenues				
Intergovernmental	\$0	\$236,502	\$0	\$193,579
Other / Miscellaneous	\$0	\$0	\$223,023	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$236,502</b>	<b>\$223,023</b>	<b>\$193,579</b>

## Explanation of Revenues

County General Fund plus: \$193,579 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$223,023 in Departmental Indirect Revenue.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30002A Human Resources

This program offer funds Human Resources expertise, guidance, and leadership at the Joint Office of Homeless Services. In the FY 2023 Adopted Budget, this program was funded across two program offers, 30002A, and 30002B, which when combined amounted to \$364,809.

**Department:** Joint Office of Homeless Services      **Program Contact:** Lori Kelley  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

This program offer supports data-related operations for the Joint Office of Homeless Services (JOHS), including data quality support, technical assistance, end-user training, analysis, reporting and database administration support. The JOHS data team is responsible for training new and ongoing database users, improving the quality of homeless services data in multiple systems of care, providing technical assistance to both internal and external stakeholders, producing and managing a diverse portfolio of analytic tools and data reports, completing ad hoc data requests and analyses and supporting administrative functions related to the system’s primary database.

### Program Description

The JOHS data team is responsible for various data management and analytics operations across the data lifecycle that culminate in the provision of useful information for internal and jurisdictional stakeholders. The information provided by the team communicates system and program performance, advances racial equity, promotes transparency and accountability, informs policymaking and budgetary processes. The data team leads or supports a variety of administrative functions that train and assist users in database interaction, provide and curate data for various stakeholders, monitor and support the improvement of data quality, and assist in database administration.

As a multi-jurisdictional Department, the data team participates in essential reporting processes for both the City of Portland and the County. The data team leads the quantitative portion of the rating and ranking process for the U.S. Department of Housing and Urban Development’s annual competitive Continuum of Care Notice of Funding Availability, which brings nearly \$30 million to the local homeless services system of care.

The data team produces a quarterly report, the community’s primary tool for measuring system performance. Since 2019, the team has also led the production of the bi-annual report and associated tools for the Point-in-Time (PIT) Count of Homelessness. In FY 2023 the Data Team is participating in a Tri-County PIT (January 2023) that will release information in FY 2024 (by mid-2023).

In addition to these products, the team develops and manages a variety of analytic tools that promote and track goals toward racial and demographic equity, inform community leaders about program and system outcomes and contribute to the provision of information that supports the housing or sheltering of tens of thousands of community members annually.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of end-user trainings*	459	400	509	450
Outcome	Number of ad hoc data requests completed	54	50	31	40
Outcome	Number of outcomes-related presentations delivered	8	8	8	8
Outcome	Number of quarterly reports that disaggregate system performance by race and ethnicity	4	4	4	4

### Performance Measures Descriptions

\*Includes new-user, reporting-related, and refresher training sessions.  
 Creating more regular reports should result in the need for less adhoc data requests  
 Ongoing presentations to promote data transparency  
 Quarterly reports occur four times a year

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$571,463	\$971,838	\$400,003	\$1,315,330
Contractual Services	\$0	\$102,615	\$0	\$107,745
Materials & Supplies	\$0	\$3,806	\$0	\$18,533
Internal Services	\$0	\$65,698	\$0	\$131,920
<b>Total GF/non-GF</b>	<b>\$571,463</b>	<b>\$1,143,957</b>	<b>\$400,003</b>	<b>\$1,573,528</b>
<b>Program Total:</b>	<b>\$1,715,420</b>		<b>\$1,973,531</b>	
<b>Program FTE</b>	4.25	7.25	2.40	9.10

Program Revenues				
Intergovernmental	\$0	\$400,635	\$0	\$1,573,528
<b>Total Revenue</b>	<b>\$0</b>	<b>\$400,635</b>	<b>\$0</b>	<b>\$1,573,528</b>

## Explanation of Revenues

This program generates \$131,920 in indirect revenues.

County General Funds plus: \$904,521 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$377,403 City of Portland General Fund allocation and \$291,603 City of Portland's Federal Emergency Solutions Grant (ESG) award through Multnomah County's IGA with the City of Portland. The ESG required match is 100% match per § 576.201, which is met with City of Portland General Fund.

## Significant Program Changes

Last Year this program was: FY 2023: 30003A Data, Research, & Evaluation

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** Support      **Program Offer Stage:** Adopted

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) is dedicated to reducing homelessness through strategies that lead with racial equity. This offer funds JOHS staffing for the extensive and ongoing oversight and policy work - both local and regional - to organize and lead community-engaged planning through its community advisory structure, including the advisory bodies identified in the Metro Supportive Housing Services Measure (Measure) Local Implementation Plan (LIP), and for the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC). Additionally, the JOHS has multiple advisory structures to inform policy, budgets, and programming. It is critical that all JOHS delivered services are informed by their community advisory structures, to ensure responsive, equity-driven programming.

### Program Description

The policy and planning work carried out by the JOHS prioritizes creating structures and processes that maximize the participation of Black, Indigenous, and other People of Color, as well as those with lived experience of homelessness, behavioral health challenges, severe disabling conditions, and other intersecting marginalized identities, including LGBTQIA2S+.

The JOHS supports homeless system governance and planning as the lead agency for the HUD CoC. It also acts as the convener and staffs the oversight bodies for each population-specific system of care (domestic violence, youth, adults, families with children, and veterans). HUD's CoC program is designed to promote a community-wide commitment to ending homelessness by providing funding to rehouse homeless individuals and families, promoting access to and utilization of programs, and optimizing self-sufficiency among individuals and families experiencing homelessness. A CoC is a local planning body that develops and oversees a community plan to organize and deliver housing and services to meet the specific needs of the community. Multnomah County's plan is maintained by JOHS, in collaboration with its jurisdictional and community-based partners. Each year, the JOHS coordinates an application to HUD based on the Notice of Funding Availability (NOFA) that results in nearly \$30 million in annual funding to the system of care.

The County's LIP for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap-around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. This offer will support the policy and planning work to: (1) facilitate the JOHS community advisory structure, including the local and regional Measure advisory bodies; (2) represent the JOHS in regional Measure advisory structure development efforts; (3) organize and lead community-engaged planning in areas identified in the LIP and elsewhere as needed; and (4) ensure that Measure-related planning aligns with planning efforts underway with HUD, the State of Oregon, other county departments, and in each of the population-specific systems of care.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Lead annual Continuum of Care (CoC) application	N/A	1	2	1
Outcome	Secure CoC funding from the U.S. Department of Housing and Urban Development	N/A	\$30 million	\$30 million	\$30 million
Output	Lead ongoing Phase 1 Measure planning and implementation*	N/A	1	1	1
Outcome	Lead advisory structure for ending homelessness initiatives and Measure implementation	1	1	1	1

### Performance Measures Descriptions

\*The LIP for the Measure identifies initial planning and implementation as "Phase 1," to occur over the first three years of Measure-funded programming, which is FY 2022, FY 2023, and FY 2024.

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$102,015	\$848,292	\$69,366	\$938,152
Contractual Services	\$0	\$97,760	\$102,650	\$0
Materials & Supplies	\$0	\$1,852	\$0	\$2,017
Internal Services	\$0	\$93,992	\$0	\$64,211
<b>Total GF/non-GF</b>	<b>\$102,015</b>	<b>\$1,041,896</b>	<b>\$172,016</b>	<b>\$1,004,380</b>
<b>Program Total:</b>	<b>\$1,143,911</b>		<b>\$1,176,396</b>	
<b>Program FTE</b>	0.75	5.75	0.40	6.10

Program Revenues				
Intergovernmental	\$0	\$1,041,896	\$0	\$1,004,380
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,041,896</b>	<b>\$0</b>	<b>\$1,004,380</b>

## Explanation of Revenues

This program generates \$64,211 in indirect revenues.

County General Funds plus \$685,757 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$318,623 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30004A Policy & Planning

This program offer funds extensive and ongoing oversight and policy work - both local and regional - to organize and lead community-engaged planning in the community advisory structure of the Joint Office of Homeless Services. In the FY 2023 Adopted budget, this program was funded across two program offers, 30004A, and 30004B, which when combined amounted to \$1.1 million.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** Support      **Program Offer Stage:** Adopted

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

The Joint Office of Homeless Services (JOHS) is dedicated to reducing homelessness through strategies that lead with racial equity. The JOHS relies on an extensive network of community-based organizations to provide equity-minded homeless services using best practices such as Assertive Engagement. This program offer supports equity-focused planning and capacity-building in the JOHS and provides system training to support the implementation of equity-focused best practices in homeless services systems of care. This includes training for managerial and frontline staff in the JOHS and in contracted community-based organizations. This program offer supports an increase in the number of culturally specific providers, and the range of culturally specific supportive housing services offered in the homeless response system.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness, with a focus on disproportionately impacted Communities of Color. The LIP specifically prioritizes expanding the network of culturally specific providers and expanding culturally specific services.

This program offer funds capacity dedicated to coordinating, developing, and delivering equity-focused training to contracted provider agencies and to JOHS staff. Through this capacity the JOHS partners with the Department of County Human Services to deliver Assertive Engagement trainings, to develop, deliver, and coordinate access to training for management and frontline staff in racial equity, culturally responsive and specific practices, trauma informed care, de-escalation, and other areas, with the goal of creating ongoing communities of practice among contracted agencies.

This program offer uses Measure funding to support an increase in the number of culturally specific providers, and the range of culturally specific supportive housing service offered in the homeless response system, by (1) developing and administering training opportunities and technical assistance that builds racial equity competencies; (2) organizing and leading community-engaged planning efforts to expand the network of culturally specific organizations providing supportive housing services, including identifying capacity-building and organizational development needs of those organizations; (3) liaising between the JOHS and the network of culturally specific providers regarding matters related to services planning, policy development, organizational capacity building and trainings.

This program offer also funds capacity building allocations to partner agencies in organizational infrastructure and program development that is needed for system expansion and long term system stability.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Trainings delivered to JOHS staff	41	22	24	24
Outcome	Percentage of trainees reporting increased understanding in best practice training areas*	87%	75%	96%	75%
Outcome	Trainings delivered to providers and partners	41	24	24	24
Outcome	Number of engaged culturally-specific organizations not yet JOHS contracted providers**	N/A	55	25	25

**Performance Measures Descriptions**

\*Measure has been updated to capture staff, providers and partners.

\*\*This is a new measure in FY 2024



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$126,306	\$495,873	\$137,468	\$546,985
Contractual Services	\$0	\$1,000,000	\$1,080,000	\$0
<b>Total GF/non-GF</b>	<b>\$126,306</b>	<b>\$1,495,873</b>	<b>\$1,217,468</b>	<b>\$546,985</b>
<b>Program Total:</b>	<b>\$1,622,179</b>		<b>\$1,764,453</b>	
<b>Program FTE</b>	1.00	4.00	1.00	4.00

Program Revenues				
Intergovernmental	\$0	\$1,000,000	\$0	\$546,985
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$546,985</b>

Explanation of Revenues

County General Fund including \$1,080,000 one-time-only funding and \$546,985 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

**Last Year this program was:** FY 2023: 30005A Equity-Focused System Development & Capacity Building

This program offer funds equity-focused planning and capacity-building in the Joint Office of Homeless Services and provides system training to support the implementation of equity-focused best practices in homeless services systems of care. In the FY 2023 Adopted budget, this program was funded across three program offers, 30005A, 30005B and 30005C, which when combined amounted to \$6 million.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

**Executive Summary**

This program offer funds the Regional Strategies Investment Fund (RSIF) in partnership with the Tri-County Planning Body. The revenue source for Measure 26-10, "Metro Supportive Housing Services Measure" (Measure) is a business and personal income tax on the highest income earners who live or work in Multnomah County. Business and personal income tax can vary between fiscal years. To provide fiscal stability, the Measure, and the intergovernmental agreement that governs Measure funding require that each county contributes to a stabilization reserve, and a contingency fund to achieve regional investment strategies and provide a consistent level of Supportive Housing Services, despite year-to-year variability.

**Program Description**

To provide ongoing fiscal stability for the Supportive Housing Services (SHS) initiative, the Measure and the intergovernmental agreement (IGA) that governs Measure funding, require that each county contributes to a stabilization reserve. To ensure the growth of these set-aside revenues, the Joint Office of Homeless Services will prioritize applying any of the available SHS money from one fiscal year into the next fiscal year to ensure the reserve is always fully funded.

The Stabilization Reserve protects against financial instability within the SHS program to insulate continuing program objectives from significant revenue fluctuations. The target reserve level will be equal to 10% of budgeted program funds in a given fiscal year. The Stabilization Reserve for each County will be fully funded within the first three years of the Term.

The Contingency account will provide resources for emergency situations or unplanned SHS program expenditures that, if left unattended, could negatively impact service delivery. The contingency account will be equal to 5% of budgeted program funds in a given fiscal year.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output		N/A	N/A	N/A	N/A
Outcome	Percent of stabilization reserve fund met*	N/A	N/A	N/A	100%
Outcome	Percent of contingency fund met*	N/A	N/A	100%	100%

**Performance Measures Descriptions**

\*This is a new measure in FY 2024

## Legal / Contractual Obligation

The Supportive Housing Services Intergovernmental Agreement (IGA) made by and between Multnomah County, a political subdivision of the state of Oregon, and Metro Regional Government, a municipal corporation of the state of Oregon.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Unappropriated & Contingency	\$0	\$0	\$0	\$14,428,539
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$14,428,539</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$14,428,539</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$14,428,539
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$14,428,539</b>

## Explanation of Revenues

\$14,428,539 carryover of the FY 2023 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

## Significant Program Changes

Last Year this program was:

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

This program offer funds the Regional Strategies Investment Fund (RSIF) in partnership with the Tri County Planning Body. The revenue source for Measure 26-10, "Metro Supportive Housing Services Measure" (Measure) is a business and personal income tax on the highest income earners who live or work in Multnomah County. Business and personal income tax can vary between fiscal years. To provide fiscal stability, the Measure, and the intergovernmental agreement that governs Measure funding require that each county contributes to a regional strategy implementation fund to achieve regional investment strategies and provide a consistent level of Supportive Housing Services, despite year-to-year variability.

**Program Description**

To provide ongoing fiscal stability for the Supportive Housing Services (SHS) initiative, the Measure and the intergovernmental agreement (IGA) that governs Measure funding, require that each county contributes to a regional strategy implementation fund.

The Regional Strategies Implementation Fund (RSIF) requires that each county must contribute not less than 5% of its share of program funds each fiscal year to achieve regional investment strategies. The Measure's Tri-County Planning Body (TCPB) is tasked with strengthening coordination among the counties and Metro in addressing homelessness in the region through the identification of regional goals, strategies, and outcome metrics that support regional Supportive Housing Services coordination and alignment, which it will outline in the Tri-County Plan. The TCPB is developing the Tri-County Plan, the priority for the RSIF funds will be programmed by the TCPB. The JOHS is making regionally-focused RSIF investments in the following programs with any available funds after the TCPB has given direction.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Work w/Tri-County Planning Body to identify investment priorities for Regional Strategies Implementation Fund	N/A	1	1	1
Outcome	Percent of Regional Strategies Implementation Fund met	N/A	100%	100%	100%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The Supportive Housing Services Intergovernmental Agreement (IGA) made by and between Multnomah County, a political subdivision of the state of Oregon, and Metro Regional Government, a municipal corporation of the state of Oregon.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$4,809,513
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$4,809,513</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$4,809,513</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$4,809,513
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$4,809,513</b>

## Explanation of Revenues

\$4,809,513 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30004C Policy, Planning, & Regional Coordination - Regional Strategies Fund -

**Department:** Joint Office of Homeless Services      **Program Contact:** Lori Kelley  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30004C  
**Program Characteristics:**

### Executive Summary

As of FY 2023, the Joint Office of Homeless Services (JOHS) has administrative responsibility for the implementation of the Homeless Management Information System (HMIS) in Multnomah, Clackamas, and Washington counties. This program offer provides the necessary ongoing funding the JOHS will need to support its share of HMIS costs and is also inclusive of an effort to modernize the HMIS reporting infrastructure.

### Program Description

The United States Department of Housing and Urban Development (HUD) requires all recipients of Continuum of Care (CoC) funding to have a “Homeless Management Information System” or HMIS. All recipients of CoC funding are required to record data related to certain system performance measures in HMIS, so that the outputs and outcomes of those investments can be reported on at the system level.

In light of the regional nature of the Metro Supportive Housing Services Measure, Multnomah, Clackamas and Washington Counties have agreed that it would be beneficial to have a tri-county HMIS implementation led by Multnomah County. This will allow local control over data collection and reporting standards, and help ensure alignment with emerging regional and local metrics.

This program offer provides the ongoing funding the JOHS will need to support its share of HMIS costs, which includes Wellsky software licenses and staffing support by DCA/IT. Additionally, this program offer includes the funding of an effort to increase capacity for data quality monitoring, metric measurement. The development and maintenance of an infrastructure supported by DCA/IT will involve the secure transmission of daily extracts from Wellsky (the HMIS vendor) and the build and maintenance of a Data Mart. This effort is a key component in the Joint Office’s efforts to increase the ability to provide useful analytics to internal, cross-department, external partners, and to the tri-county community at large.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Create a repository of data (Data Mart) to retrieve client-facing data for the Continuum of Care (OR-501).	N/A	N/A	N/A	1
Outcome	Number of additional HMIS end-user training tools developed.	N/A	N/A	N/A	1

### Performance Measures Descriptions

In FY 2023, measures completed: 1) Agreements finalized between Multnomah County and Washington County; and between Multnomah County and Clackamas County, and 2) the Department of County Assets (DCA) Information Technology became the Homeless Management Information System (HMIS) Primary System Administrator of the regional implementation and the the Joint Office of Homeless Services designated the CoC HMIS Lead.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$143,375	\$0	\$0	\$156,271
Materials & Supplies	\$0	\$0	\$0	\$402,667
Internal Services	\$81,625	\$0	\$0	\$383,920
<b>Total GF/non-GF</b>	<b>\$225,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$942,858</b>
<b>Program Total:</b>	<b>\$225,000</b>		<b>\$942,858</b>	
<b>Program FTE</b>	1.00	0.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$942,858
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$942,858</b>

Explanation of Revenues

This program generates \$1,988 in indirect revenues. \$758,610 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$184,248 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

Significant Program Changes

**Last Year this program was:** FY 2023: 30003C Data, Research, & Evaluation - Homeless Management Information

The Joint Office of Homeless Services now serves as the HMIS lead for Multnomah County (this lead designation formerly resided with PHB). Having local control over HMIS means JOHS can modernize the local reporting infrastructure. This modernization will require the collaboration and staffing support of Multnomah County Department of County Assets Information Technology division. The creation of a data mart as the local infrastructure is a best practice standard that is also present in other departments in Multnomah County. In the FY 2023 Adopted budget, this program was funded in two program offers 30003C and 30004C and amounted to \$650,000.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

**Executive Summary**

Multnomah County departments, including the Joint Office of Homeless Services, the Health Department, and the Department of County Human Services, are anticipating rapidly expanding programming that serves people who are, or are at risk of, homelessness, and often have serious and complex disabling conditions. This expansion of programming increases the need for a variety of housing related capital investments, including in a range of building types offering services including night shelter, day centers, treatment programs, transitional and supportive housing opportunities. This program offer allocates \$9.75 million in one-time funding to strategic capital investments in the acquisition and renovation of buildings and other real property in service of this essential expanded programming.

**Program Description**

This program offer funds a pool of strategic capital investment resources that will support the program infrastructure needs of Multnomah County departments that are responding to the critical need for shelter, transitional, and longer-term supportive housing options for those experiencing, or at risk of, homelessness, and who are struggling with serious disabling conditions.

These resources will allow Multnomah County departments to leverage new program funding, whether through, for example, the Metro Supportive Housing Services Measure, Measure 110, or from other sources, by creating opportunities to fund the acquisition and renovation of properties that offer space for this critical expanded programming. This could include spaces for day and night shelters, day spaces, motels, shared housing, and other strategic real property investments.

During the pandemic, Multnomah County, Metro, and other partners have moved to use one-time State and Federal funding to acquire properties, like motels, that can serve certain programmatic needs in the immediate term (e.g. emergency shelter), and also serve as landbank sites for future redevelopment into affordable housing or other community needs. That is one of the strategies that these resources will allow Multnomah County departments working to address the homelessness and behavioral health crises to expand upon.

Even where the County anticipates a much longer-term continuous use for a property it acquires, the County often benefits from the ability to own the property, rather than incurring the expense of a leasing. County ownership increases the value of investments in improvements to the site and offers greater long-term flexibility for the programming and control over disposition of the site.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Develop a strategic prioritization framework for acquisition and renovation investments	N/A	N/A	N/A	1
Outcome	Invest in strategic acquisitions & renovations serving the priority populations	N/A	N/A	N/A	3-5
Outcome	Investment decisions accompanied by summary of Equity & Empowerment Lens application	N/A	N/A	N/A	Met

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Capital Outlay	\$15,000,000	\$0	\$9,750,000	\$0
<b>Total GF/non-GF</b>	<b>\$15,000,000</b>	<b>\$0</b>	<b>\$9,750,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$15,000,000</b>		<b>\$9,750,000</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

One-time-only County General Fund

Significant Program Changes

Last Year this program was: FY 2023: 30010 Strategic Capital Investments

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 30210A, 30210B  
**Program Characteristics:**

**Executive Summary**

This program offer funds system access, assessment, and navigation, which is an array of support services needed to make homeless services equitably accessible and attuned to the specific needs of sub-populations. Ensuring system coordination and access is one of the core strategies of the Joint Office of Homeless Services (JOHS). These services include programs that work across populations as well as those for specific sub-populations (adults, families, youth, veterans, and domestic violence survivors). Supports include training, information and referral services, coordinated access, landlord recruitment, and other similar services.

**Program Description**

This program offer funds system access, assessment, and navigation of support services needed to make critical homeless services equitably accessible to the diverse communities experiencing homelessness in Multnomah County. Ensuring system coordination and access is one of the core strategies of the JOHS to connect people to shelter, long-term housing, and other critical services. Service categories include outreach, coordinated access, mobile navigation services, and partnership development.

This program offer also funds information and referral resources, and navigation outreach workers to assist people experiencing homelessness in navigating to a range of services, including shelter, substance use and addiction services, primary medical care, and permanent housing. Outreach teams prioritize culturally specific, culturally responsive, and peer-led engagement with immediate safety and long-term housing resources.

This program offer funds the Coordinated Access system, which works to identify, assess, and prioritize households experiencing homelessness and connect them to a range of shelter, housing, and support services. The goal of Coordinated Access is to provide streamlined and equitable access to housing interventions. by prioritizing vulnerable populations, participant-centered services, ease of access, racial and ethnic justice, measurable outcomes, leveraging existing resources and capacity, diversity in program services and approaches, access to culturally specific and culturally responsive services, and long-term housing stability.

The offer continues investments in culturally-specific mobile supportive housing assessment services to connect people experiencing chronic homelessness with supportive housing opportunities. Additionally, this program offer supports vital civil legal services that help remove barriers to housing access for people who are currently living unsheltered, in shelter, or are otherwise experiencing homelessness.

Ending homelessness is a community-wide effort that requires partnerships that leverage resources in other systems of care and in the private sector. This program offer funds this partnership development, including recruiting and supporting landlords that can provide units for households exiting homelessness, which is critical to leveraging these system-wide resources.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of shelter and housing service requests received and assisted with referral information	116,745	70,000	100,000	70,000
Outcome	Number of individuals moving from Adult Coordinated Access to permanent housing*	33	298	450	325
Outcome	Number of unsheltered people served with system navigation	1,573	750	1,600	1,200
Outcome	BIPOC assessed via Coord. Access at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer.

\*This is a new measure in FY 2024

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$145,251	\$641,878	\$166,083	\$667,085
Contractual Services	\$331,575	\$4,237,433	\$1,097,771	\$4,960,571
Materials & Supplies	\$0	\$8,675	\$0	\$8,008
Internal Services	\$0	\$30,866	\$0	\$47,960
<b>Total GF/non-GF</b>	<b>\$476,826</b>	<b>\$4,918,852</b>	<b>\$1,263,854</b>	<b>\$5,683,624</b>
<b>Program Total:</b>	<b>\$5,395,678</b>		<b>\$6,947,478</b>	
<b>Program FTE</b>	1.15	4.85	1.20	4.80

Program Revenues				
Intergovernmental	\$0	\$4,584,565	\$0	\$4,348,809
Beginning Working Capital	\$0	\$334,287	\$0	\$1,194,440
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,918,852</b>	<b>\$0</b>	<b>\$5,543,249</b>

## Explanation of Revenues

This program generates \$47,960 in indirect revenues.

County General Fund plus: \$140,37 Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512; \$2,381,123 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government; \$605,60 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness; \$1,723,196 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland; and \$244,490 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund. County General Fund includes \$100,000 one time only funding and \$588,840 SHS BWC one time only.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30100A System Access, Assessment, & Navigation

This program offer funds extensive and ongoing oversight and policy work - both local and regional - to organize and lead community-engaged planning in the community advisory structure of the Joint Office of Homeless Services. In the FY 2023 Adopted budget, this program was funded across two program offers, 30100A, and 30100B.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) has prioritized 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 options that offer access to critical hygiene, health, and housing services. This program offer provides the necessary operating support to maintain existing shelter capacity for adult-only households, including individuals, couples, or families without minor children.

**Program Description**

Emergency shelter and associated emergency services are vital to protecting the basic health and safety of individuals while they are experiencing homelessness, particularly older adults and those with disabling conditions. Shelters are critical locations for people to learn about and access the services they need to find permanent housing, acquire an income, and receive necessary healthcare. Most adult shelters have priority access for women, veterans, those with disabilities and those ages 55 and older. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming with reduced barriers that emphasizes meeting participants' immediate need. This program offer includes the following:

- **Emergency shelter:** Provides programs for women, men, all-gender and couples (including veteran-specific programming). Shelters are low-barrier and operate year-round. Funds are contracted to nonprofit providers to pay shelter operating expenses. This shelter type includes congregate shelter sites and non-congregate motel shelter sites.
- **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, healthcare, and education.
- **Recuperative Care shelter beds:** Provides recuperative care services for medically-vulnerable individuals experiencing homelessness who need ongoing care and are exiting hospitals and other medical settings. Funds support on-site services and staffing.
- **Shelter beds with enhanced behavioral health supports:** Shelter space and programming of the equivalent of 30 short-term shelter beds for individuals 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 ongoing 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of year-round emergency shelter beds*,**	342	400	400	1,091
Outcome	Number of people served in year-round emergency shelter beds	1,731	1,680	2,110	2,320
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer. \*Anticipated bed capacity reflects the ongoing constraint on congregate shelter capacity resulting from the pandemic. \*\*The methodology for this measure has been changed from manual calculation using the best available information for each shelter to the average daily number of beds for each shelter over the course of the year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$89,756	\$408,756	\$76,132	\$607,541
Contractual Services	\$264,160	\$20,503,240	\$939,343	\$27,624,225
Materials & Supplies	\$0	\$1,316,197	\$0	\$0
Internal Services	\$0	\$732,080	\$404,104	\$2,264,792
<b>Total GF/non-GF</b>	<b>\$353,916</b>	<b>\$22,960,273</b>	<b>\$1,419,579</b>	<b>\$30,496,558</b>
<b>Program Total:</b>	<b>\$23,314,189</b>		<b>\$31,916,137</b>	
<b>Program FTE</b>	0.50	3.00	0.50	4.00

Program Revenues				
Intergovernmental	\$0	\$20,985,257	\$0	\$30,430,658
Beginning Working Capital	\$0	\$139,691	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$21,124,948</b>	<b>\$0</b>	<b>\$30,430,658</b>

Explanation of Revenues

This program generates \$114,016 in indirect revenues. County General Funds plus: \$65,900 Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$5,604,76 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$743,265 State Housing Assistance Program (SHAP) allocated through the Oregon Housing and Community Services (OHCS) to provide operational support for emergency shelters and supportive services to shelter residents, and \$23,645,190 City of Portland General Fund allocation and \$437,407 City of Portland's Federal Emergency Solutions Grant (ESG) award through Multnomah County's IGA with the City of Portland. The ESG required match is 100% match per § 576.201, which is met with City of Portland General Fund.

Significant Program Changes

Last Year this program was: FY 2023: 30200 Safety off the Streets - Adult Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) has prioritized the equitable expansion of year-round shelter capacity, particularly for people who are more vulnerable on the street, including adult women. JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of programming. This program offer maintains essential funding of year-round 24/7 emergency shelter for women, including the Gresham Women's Shelter and Jean's Place.

### Program Description

Emergency shelter is vital to protecting the basic health and safety of individuals while they are experiencing homelessness. This program funds emergency shelter programs that are specifically designed to serve adult women. Funds are contracted to nonprofit providers to pay the operating expenses for shelter, including maintenance, staffing, materials and supplies, and on-site services.

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 contracted service providers that adhere to the County's guidelines for shelter, which includes the equitable delivery of services in accordance with the principles of assertive engagement and trauma-informed care. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming with reduced barriers that emphasizes meeting participants' immediate need for basic health and safety.

The beds funded in this program offer include the Gresham Women's Shelter, which opened in the Fall of 2016 with 90 permanent year-round beds that are open 24 hours a day, 7 days a week. It is only one of two publicly funded year-round shelters for adults in Gresham. The shelter is Domestic Violence (DV)-informed and designed to alleviate pressure points in the DV system while providing women experiencing homelessness with emergency shelter options. This shelter partners with community based organizations to screen for eligibility and coordinate intake.

Jean's Place, located in inner NE Portland, provides a more structured shelter environment for women that offers a clean and sober transitional living option for up to 60 women, in a combination of congregate and semi-congregate settings.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of year-round emergency shelter beds*	87	150	150	150
Outcome	Number of people served in year-round emergency shelter beds	448	370	830	830
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer.

\*The methodology for this measure has been changed from manual calculation using the best available information for each shelter to the average daily number of beds for each shelter over the course of the year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$2,684,970	\$1,156,613	\$1,094,387
Internal Services	\$20,900	\$0	\$41,503	\$0
<b>Total GF/non-GF</b>	<b>\$20,900</b>	<b>\$2,684,970</b>	<b>\$1,198,116</b>	<b>\$1,094,387</b>
<b>Program Total:</b>	<b>\$2,705,870</b>		<b>\$2,292,503</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,684,970	\$0	\$1,094,387
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,684,970</b>	<b>\$0</b>	<b>\$1,094,387</b>

Explanation of Revenues

County General Funds plus \$1,094,38 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland

Significant Program Changes

Last Year this program was: FY 2023: 30201 Safety off the Streets - Women's Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) expansion of emergency shelter capacity has included the provision of a range of shelter options available to equitably meet the diverse needs of people experiencing homelessness. Alternative shelters, including village-style shelters, are funded through this program offer. These alternative shelters differ in appearance from traditional facility-based shelters, but they provide the same access to basic safety and hygiene services, and to the support services needed to transition from shelter to permanent housing.

**Program Description**

With just over half the population identified in the 2022 Point-in-Time Count (PIT) as unsheltered, and waiting lists for shelters still very long, it is essential to continue to support the community's existing emergency shelter capacity. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming with reduced barriers that emphasizes meeting participants' immediate need for basic health and safety. Alternative shelters represent a comparatively small, but important and growing component of that capacity. Alternative shelters provide safety off the streets and critical transition services to people who are not able to access or may not thrive in traditional shelter environments.

As of the spring of FY 2023, this program offer funds two operational programs currently serving up to 25 participants in pod shelters per night. The Kenton Women's Village, an innovative transitional living community for women, most of whom have experienced long-term homelessness and face multiple barriers to accessing permanent housing. The St. John's Village, an adult alternative shelter program with 19 sleeping pods, prioritized to people living in the North Portland area. This program offer allocates funding for an additional four sites, with an anticipated total capacity to reach over 120 individuals per night, including a site in East Multnomah County, two Safe Park or Village-style alternative shelters, and a second micro-village.

This program offer provides ongoing funding to continue staffing in the JOHS to work with community-based organizations seeking to offer alternative shelter options. Each alternative shelter project will require planning, site and program development, contracting, and ongoing contract management. The community based organizations offering to operate alternative shelters are often newer and less experienced with service provision and public contracting, meaning they need additional technical assistance and ongoing support to be successful. This staffing capacity allows the JOHS to continue providing this enhanced level of support to the shelter operators.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people served annually	53	50	90	145
Outcome	Percentage of people exiting alternative shelters to transitional and permanent housing	43%	35%	53%	35%
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*Actual outcomes will be higher or lower depending on new sites launched and when in the fiscal year they become operational.



## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$431,027	\$0	\$443,876
Contractual Services	\$0	\$4,234,110	\$0	\$4,706,148
Internal Services	\$0	\$0	\$59,700	\$56,460
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,665,137</b>	<b>\$59,700</b>	<b>\$5,206,484</b>
<b>Program Total:</b>	<b>\$4,665,137</b>		<b>\$5,266,184</b>	
<b>Program FTE</b>	0.00	3.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$4,665,137	\$0	\$4,883,599
Beginning Working Capital	\$0	\$0	\$0	\$322,885
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,665,137</b>	<b>\$0</b>	<b>\$5,206,484</b>

## Explanation of Revenues

This program generates \$56,460 in indirect revenues.

County General Funds plus: \$1,796,938 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$322,885 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness, and \$3,086,661 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30202A Safety off the Streets - Alternative Shelter for Adults

This program offer funds alternative shelters for the Joint Office of Homeless Services. In the FY 2023 Adopted budget, this program was funded across two program offers, 30202A, and 30202B.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Shelter plays a vital role in offering basic safety and stability to families with children experiencing homelessness. This program offer funds hundreds of beds of shelter capacity for families with minor children. Family shelters are all community-based, year-round, open 24/7, and offer individual rooms to families. As with all shelters, the family shelters offer both basic safety off the streets and access to the critical supports needed to transition from shelter back into permanent housing.

### Program Description

This program offer funds four family shelters, three in East Portland and one in North Portland. Families seeking shelter are screened and referred by the Coordinated Access Shelter Intake Line. Once a family is at a 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. In FY 2022, families served through shelter who identified as being from communities of color were served at a rate higher than their representation among homeless families. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, low barrier, and culturally responsive or specific programming that emphasizes meeting participants' immediate need for basic health and safety.

The family shelter system leverages Federal, State and local resources as well as faith-based and nonprofit partnerships. There is also a rich history of volunteerism in the shelters. These relationships expand activities for children living in the shelters, as well as increase culturally specific services and neighborhood involvement.

These shelters represent a significant improvement in the quality of the year-round shelter capacity for families with children in the community. A critical feature of these shelters is that every family has their own room. The shelters are located where most of the families needing shelter are from and where their support networks are located.

School-aged children staying in shelters 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 shelters and off-site for times when children are not in school, including evenings, spring break and summer break.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of year-round emergency shelter beds*	202	180	180	108
Outcome	Number of unduplicated individuals served	719	660	740	660
Outcome	Number of youth engaged in activities annually	285	300	300	300
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

\*The methodology for this measure has been changed from manual calculation using the best available information for each shelter to the average daily number of beds for each shelter over the course of the year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$162,673	\$0	\$164,042	\$0
Contractual Services	\$897,285	\$2,854,800	\$1,023,636	\$2,220,200
Materials & Supplies	\$0	\$50,000	\$0	\$0
Internal Services	\$535,587	\$104,800	\$562,808	\$0
<b>Total GF/non-GF</b>	<b>\$1,595,545</b>	<b>\$3,009,600</b>	<b>\$1,750,486</b>	<b>\$2,220,200</b>
<b>Program Total:</b>	<b>\$4,605,145</b>		<b>\$3,970,686</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,009,600	\$0	\$2,220,200
Beginning Working Capital	\$109,890	\$0	\$122,880	\$0
<b>Total Revenue</b>	<b>\$109,890</b>	<b>\$3,009,600</b>	<b>\$122,880</b>	<b>\$2,220,200</b>

Explanation of Revenues

County General Fund plus \$122,880 of Tax Title proceeds to provide affordable housing for youth and families with children, in accordance with ORS 275.275, \$1,050,000 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,058,080 Emergency Housing Assistance (EHA) and \$112,120 Emergency Solutions Grant Program allocated through the Oregon Housing and Community Services (OHCS) to assist low or very-low income persons who are homeless or are unstably housed and at risk of becoming homeless.

Significant Program Changes

Last Year this program was: FY 2023: 30203 Safety off the Streets - Family Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

JOHS has prioritized the equitable expansion of shelter for vulnerable populations. The JOHS also holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness, on the basis of race and ethnicity, must be a focus of programming. Domestic violence (DV) emergency shelters provide immediate safety and offer crisis intervention services to survivors and children fleeing domestic violence or experiencing homelessness as a result of a recent incident of intimate partner violence. These services are vital for protecting the health and safety of survivors. The DV confidential shelters in this program provide year-round beds accessed by hundreds of survivors annually, with 72% identifying as BIPOC. This program offer supports four shelters in two models: facility-based emergency shelter and master-leased units.

### Program Description

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 program offer funds 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 of service providers, and information and referrals to community-based services and housing programs.

This program 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 to articulate survivors' needs and match survivors with available shelter space. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming with reduced barriers that emphasizes meeting participants' immediate need for basic health and safety. 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 survivors and children who are unable to safely stay in the shelters.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of year-round confidential emergency shelter beds + year-round equivalent emergency voucher beds	115	115	115	115
Outcome	Number of individuals receiving emergency shelter services	218	250	250	250
Output	Number of individuals served with domestic violence emergency vouchers	259	300	250	250*
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer.

\*Reduction in measure due to increases in average lengths of stay

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$71,383	\$0	\$77,801
Contractual Services	\$1,105,330	\$528,555	\$1,321,649	\$510,490
Internal Services	\$0	\$20,523	\$0	\$19,792
<b>Total GF/non-GF</b>	<b>\$1,105,330</b>	<b>\$620,461</b>	<b>\$1,321,649</b>	<b>\$608,083</b>
<b>Program Total:</b>	<b>\$1,725,791</b>		<b>\$1,929,732</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$620,461	\$0	\$608,083
Beginning Working Capital	\$0	\$0	\$50,130	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$620,461</b>	<b>\$50,130</b>	<b>\$608,083</b>

Explanation of Revenues

This program generates \$19,792 in indirect revenues. County General Fund plus \$50,130 of Tax Title proceeds to provide affordable housing for youth and families with children, in accordance with ORS 275.275, \$510,490 State Housing Assistance Program (SHAP) allocated through the Oregon Housing and Community Services (OHCS) to provide operational support for emergency shelters and supportive services to shelter residents, \$97,593 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

Significant Program Changes

Last Year this program was: FY 2023: 30204 Safety off the Streets - Domestic Violence Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Reinforcing the Joint Office of Homeless Services (JOHS) commitment to the equitable provision of emergency shelter for vulnerable populations, this program offer continues funding the Homeless Youth Continuum’s (HYC) 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. This program offer funds the Access Center, shelter and day programs, where linkages are provided to a continuum of services and supports for the youth population.

**Program Description**

The Homeless Youth Continuum (HYC) is a highly collaborative and coordinated system comprised of four nonprofit 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 50% of homeless youth have prior involvement in the Department of Human Services (DHS) or the Juvenile Justice system, and a significant number have experienced complex trauma. Approximately 40% of homeless youth identify as LGBTQIA2S+. 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 emergency shelters 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, service needs assessment, and provide opportunities for further engagement in system services. An average of 150 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, nonjudgmental and offer relational continuity. In addition, all emergency shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming with reduced barriers that emphasizes meeting participants’ immediate need for basic health and safety. 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth screened via the Access Center	455	550	550	550
Outcome	Number of youth served in crisis and short-term shelter	389	430	430	430
Output	Number of shelter bed nights	12,908	20,000	20,000	20,000
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$81,387	\$0	\$88,530
Contractual Services	\$1,631,820	\$259,440	\$2,232,598	\$0
Internal Services	\$0	\$23,399	\$0	\$22,522
<b>Total GF/non-GF</b>	<b>\$1,631,820</b>	<b>\$364,226</b>	<b>\$2,232,598</b>	<b>\$111,052</b>
<b>Program Total:</b>	<b>\$1,996,046</b>		<b>\$2,343,650</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$364,226	\$0	\$111,052
Beginning Working Capital	\$0	\$0	\$301,810	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$364,226</b>	<b>\$301,810</b>	<b>\$111,052</b>

Explanation of Revenues

This program generates \$22,522 in indirect revenues. County General Fund plus \$301,810 of Tax Title proceeds to provide affordable housing for youth and families with children, in accordance with ORS 275.275 and \$111,052 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

Significant Program Changes

Last Year this program was: FY 2023: 30205 Safety off the Streets - Youth Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

People experiencing unsheltered homelessness face particular weather-related risks in the winter months, and even greater dangers during periods of severe weather - including during severe winter conditions, and severe weather (heat and wildfire) and other emergency events. This program offer provides the base funding for winter emergency shelter capacity, as well as funding to open additional shelter capacity during severe weather events.

### Program Description

This program funds winter shelter and severe weather shelter capacity. This shelter is temporary in nature and focuses on the provision of basic safety for people experiencing unsheltered homelessness, including offering warm, dry space and access to basic hygiene amenities. While certain additional services are made available in these shelters, they are not intended to provide the range of wrap-around support and housing services offered in year-round shelters.

- **Temporary/Winter Shelter:** People with disabilities, older adults, and those in poor health are particularly at risk in cold winter conditions. This program will allow additional winter shelter capacity across adult and family systems of care (open from November to April) to be created in FY 2024. Winter shelter includes motel voucher capacity and room block agreements.
- **Severe Weather Shelter:** In the event of severe weather that significantly elevates the risk to people sleeping unsheltered in the 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 shelter sites, operated by contracted nonprofit agencies, that are distributed across the county. The JOHS also budgets for costs associated with opening additional severe weather capacity in partnership with County and City Emergency Management in those situations where non-profit-provided capacity is insufficient. During severe weather, the commitment is that no one is turned away from shelter.
- **Emergency assistance:** This program offer 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.
- **Expanded outreach:** This program offer funds additional street outreach during severe weather to assist in reaching adults, youth, Veterans, and families in accessing safety off the streets resources.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of adult temporary/winter emergency shelter beds	458	480	315	400
Outcome	Percentage of those who seek shelter during a declared severe weather event that receive it	100%	100%	100%	100%
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of families that receive the safety of shelter	77	40	100	100

### Performance Measures Descriptions

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer. This measure reflects the peak number of temporary emergency shelter beds provided via contracted providers each year.

County Commissioners have set a policy that no person in need of shelter during severe weather emergencies is turned away. This measure reflects continued adherence to that policy as reflected in shelter operations.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$4,625,537	\$617,690	\$2,744,971
Internal Services	\$0	\$396,826	\$34,200	\$329,558
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,022,363</b>	<b>\$651,890</b>	<b>\$3,074,529</b>
<b>Program Total:</b>	<b>\$5,022,363</b>		<b>\$3,726,419</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,075,899	\$0	\$3,061,129
Beginning Working Capital	\$0	\$1,074,121	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,150,020</b>	<b>\$0</b>	<b>\$3,061,129</b>

Explanation of Revenues

County General Fund plus \$13,400 of the Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512 and \$3,061,129 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland

Significant Program Changes

Last Year this program was: FY 2023: 30206A Safety off the Streets - Winter Shelter & Severe Weather

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Using Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds an expanded housing-focused shelter/transitional housing response, including program implementation capacity and support for continued operations at several newly acquired or leased congregate and motel-shelter locations. Expanded year-round shelter programming focuses on increasing access for overrepresented Communities of Color, as well as for individuals needing access to enhanced behavioral health supports, and creating shelter capacity in underserved areas of the County

**Program Description**

The Multnomah County Local Implementation Plan for the Measure (LIP) sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the Measure’s commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness. The LIP also recognizes the need for investments in a continuum of pre- and post-housing services, including shelter services that support successful transitions to permanent housing.

This program offer funds continued implementation of the Joint Office of Homeless Services (JOHS) community-based and housing-focused shelter expansion strategy, including the property management and operating expenses associated with: (1) two publicly owned congregate shelters for adults, one in North Portland and one in the Central City, which combined provide approximately 200 beds; (2) three publicly owned motel shelters, one in Gresham, one in Southwest Portland, and one in mid-county, which together offer approximately 120 rooms of shelter for adults; and (3) a leased motel in Northeast Portland with 130 rooms for adults.

In addition, this program offer funds staffing capacity in the JOHS dedicated to the identification, development, programming, and contract management of the expanding shelter system.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Rooms of motel shelter for people transitioning to PSH	N/A	30	40	40
Outcome	Number of unique individuals receiving bridge housing support in motel settings	N/A	150	60	150
Outcome	Percent of bridge housing participants who successfully transition to PSH	N/A	80	40	80
Outcome	BIPOC served in Bridge Housing at rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

FY 2023 Estimate is lower due to program ramp up.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,641,667	\$0	\$2,763,920
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,641,667</b>	<b>\$0</b>	<b>\$2,763,920</b>
<b>Program Total:</b>	<b>\$1,641,667</b>		<b>\$2,763,920</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,641,667	\$0	\$2,763,920
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,641,667</b>	<b>\$0</b>	<b>\$2,763,920</b>

Explanation of Revenues

\$2,763,920 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30209B Safety off the Streets - Bridge Housing - Metro Measure Expansion

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program offer allocates balances of one-time capital funding for the Joint Office of Homeless Services (JOHS) to use in developing and improving high quality, year-round congregate, motel, and alternative emergency shelter capacity for multiple populations, as well as funding to support the creation of additional temporary/seasonal shelters.

**Program Description**

Multnomah County is committed to funding and operating long-term, high-quality, year-round emergency shelters, and to continuing to provide seasonal temporary shelter during cold weather months. After an initial rapid expansion of emergency shelter capacity in available locations, the JOHS is leading the transformation of all year-round shelters into a network of community-based shelter programs that are located, designed, and service-supported to maximize transitions of shelter participants back into permanent housing. This program offer allocates balances of one-time capital funds for shelter development,

The JOHS strategically invests in shelters to further its commitment to ending homelessness. This is done by purchasing, developing, and operating emergency shelters that offer safety off the streets, and are intentionally developed to maximize the number of people who successfully transition through them to permanent housing. This program provides the critical capital resources to continue the acquisition and development of year-round emergency shelter sites that meet this commitment through an equity lens. It also will examine preventative maintenance, asset preservation, and portable or moveable resources to save on the costs of renting and provide a flexible infrastructure for sites that lose power or experience major weather events.

There is an ongoing need to offer expanded basic safety off the streets shelter in the winter months for populations that are especially vulnerable when the weather turns wetter and colder. While winter shelter locations do not require the level of capital investment of year-round emergency shelter programs, funds are needed annually to meet winter shelter expansion efforts.

Capital in this offer will be used to create, improve, and maintain congregate, motel, and alternative shelter programs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of prospective new shelter sites identified and assessed for feasibility of purchase and development*	N/A	30	30	30
Outcome	Initiate and continue development of shelter sites*	N/A	5	5	5
Outcome	Shelter site design reflects input from people with lived experience, especially from BIPOC	N/A	Yes	1	1

**Performance Measures Descriptions**

\*These performance measures are new for FY 2023

Number of prospective new shelter sites identified and assessed for feasibility of purchase and development\*

Initiate and continue development of shelter sites\*

Develop a plan to incorporate input from people with lived experience especially BIPOC in shelter site creation

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$139,676	\$0	\$0	\$0
Internal Services	\$252,000	\$0	\$0	\$0
Capital Outlay	\$12,008,324	\$6,200,000	\$825,000	\$5,145,685
Cash Transfers	\$0	\$0	\$975,000	\$0
<b>Total GF/non-GF</b>	<b>\$12,400,000</b>	<b>\$6,200,000</b>	<b>\$1,800,000</b>	<b>\$5,145,685</b>
<b>Program Total:</b>	<b>\$18,600,000</b>		<b>\$6,945,685</b>	
<b>Program FTE</b>	1.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$0
Beginning Working Capital	\$12,400,000	\$6,200,000	\$0	\$5,145,685
<b>Total Revenue</b>	<b>\$12,400,000</b>	<b>\$6,200,000</b>	<b>\$0</b>	<b>\$5,145,685</b>

Explanation of Revenues

County General Fund and one-time-only \$5,145,685 of State HB 5202 carryover.

Significant Program Changes

**Last Year this program was:** FY 2023: 30208A Safety off the Streets - Emergency Shelter Strategic Investment

This program offer allocates balances of one-time capital funds allocated by the County in FY 2023 for shelter development funding package. Significant additional resources were allocated to permanently expanding the Joint Office's emergency shelter system in FY 2023. The balance of those resources is included in the FY 2024 budget to fund further site acquisition (s) and redevelopment(s).

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

**Executive Summary**

This program offer uses Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, to provide capital for the Joint Office of Homeless Services (JOHS) to move forward in developing high quality, year-round alternative shelter capacity for multiple populations, equitably distributed across the County. This program offer also allocates capital funding for three alternative shelter sites currently in development in FY 2023 that will come online in FY 2024.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer provides capital funding for shelter, including alternative shelter, to further the community’s commitment to ending homelessness.

Emergency shelters, including alternative shelters, offer safety off the streets for people experiencing homelessness and are intentionally developed to maximize the number of people who successfully transition through them to permanent housing. This program offer provides the critical capital resources to continue the acquisition and development of year-round alternative shelter sites that meet this commitment.

The funds will support necessary improvements to new and existing emergency shelters, as well as the continued due diligence associated with the identification of new shelter sites. These investments will be aligned with the efforts to transform the publicly funded emergency shelter system into one that offers a high standard of care and critical housing transition services within an increasingly diversified range of shelter settings.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Conduct shelter design process that includes stakeholders, including prospective shelter users	N/A	3	1	1
Outcome	Initiate or continue site identification and development	N/A	4	4	4
Outcome	New operational alternative shelter programs	0	3	1	1*

**Performance Measures Descriptions**

\*FY 2024 Offer reduced due decreased funding available for alternative shelter development.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$3,400,000	\$0	\$0
Capital Outlay	\$0	\$2,000,000	\$0	\$2,700,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,400,000</b>	<b>\$0</b>	<b>\$2,700,000</b>
<b>Program Total:</b>	<b>\$5,400,000</b>		<b>\$2,700,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$5,400,000	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$2,700,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,400,000</b>	<b>\$0</b>	<b>\$2,700,000</b>

Explanation of Revenues

Carryover from the FY 2023 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

**Last Year this program was:** FY 2023: 30208B Safety off the Streets - Emergency Shelter Strategic Investment - Metro

This program offer allocates balances of one-time capital funds allocated by the SHS in FY 2023 for shelter development funding package. Significant additional resources were allocated to permanently expanding the Joint Office's emergency shelter system in FY 2023. The balance of those resources is included in the FY 2024 budget to fund further site development(s).

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

**Executive Summary**

This program offer funds a limited-duration consulting project team who will work with the Joint Office of Homeless Services (JOHS) and microvillage providers to develop a microvillage system. The team will formalize a plan, assess current village approaches, summarize user experiences, and analyze cost effectiveness of the current proposed village housing. The team will also oversee development of three villages. This builds off the work of the “Village People” team that was led by Commissioner Meieran and included microvillage providers, an architect, neighborhood coalition representative, housing advocates, and people with lived experience of homelessness and substance use.

**Program Description**

Pre-pandemic, at least 2,037 unsheltered neighbors lived in Multnomah County. The most recent Point-In-Time Count estimates this number at 2,460. Multnomah County's Local Implementation Plan (LIP) for the Metro Supportive Housing Services (SHS) Measure identified a critical need for an expanded range of shelter options for people living unsheltered that differs from traditional congregate shelter models. Historically, alternative shelter was not prioritized by Multnomah County except for in a few isolated - and often very expensive - settings. However, alternative shelter holds the promise of sheltering hundreds to thousands of people faster, cheaper, and in a way they want to be sheltered, while optimizing their pathway to long term housing.

Over the past few months, Commissioner Meieran convened a small group of visionaries and doers (informally the “Village People”) who have established a specific type of alternative shelter, referred to as “microvillages”, in the face of seemingly insurmountable barriers. A microvillage is essentially a community located on a very small plot of land (often a parking lot of a faith institution), with a small number of dwellings (10-15), hosting basic amenities, where people can have their basic needs met, sleep safely, and live with dignity.

According to PSU’s Homelessness Research and Action Collaborative, microvillages have shown promise as a viable shelter alternative. The microvillages established and operated by individuals on Commissioner Meieran’s team have demonstrated success, and Commissioner Meieran has been working with the group to develop a replicable approach to establishing a distributed and coordinated network of microvillages across the County. This program funds a limited-duration consulting project team who will work with the Joint Office of Homeless Services (JOHS) and microvillage providers to develop a microvillage system, as well as oversee development of three villages, to be operational in six months and operating at capacity within a year. In addition, this offer funds the one-time development costs such as land, construction, as well as time-limited operational and service costs for three villages.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of micro villages developed and operating for six months.	N/A	N/A	N/A	3
Outcome	Number of operational emergency shelter beds	N/A	N/A	N/A	30
Outcome	Number of individuals transitioned directly from living unsheltered to living in a microvillage site	N/A	N/A	N/A	
Outcome	Improved self-reported well-being of individuals living in microvillages compared to when they were living unshelt	N/A	N/A	N/A	

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$460,000
Capital Outlay	\$0	\$0	\$0	\$440,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$900,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$900,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$900,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$900,000</b>

Explanation of Revenues

\$900,000 one-time carryover from the FY 2023 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was:

This is a new temporary project proposed by Commissioner Meieran.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 30302B  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

In March of 2020, following public health guidance, the Joint Office of Homeless Services (JOHS) took immediate steps to limit the spread of COVID-19 within the homeless population and otherwise mitigate impacts of the pandemic on those experiencing homelessness or at risk of experiencing homelessness. These activities, which will continue in FY 2024, include operating motel and congregate shelter sites and enhanced safety on the streets supplies and outreach.

**Program Description**

As part of its response to the COVID-19 pandemic, the JOHS took immediate steps to ensure that all congregate and semi congregate shelters within the shelter system provided necessary physical separation, hygiene, and cleaning practices for occupancy, sleeping, eating, and access to services. Initial COVID-19 response efforts in FY 2020 included building capacity to serve up to 450 people in physical distancing shelters in local community centers and voluntary COVID-19 isolation rooms in local motels (isolation motels). It also included enhanced safety on the streets outreach to assist those who are unsheltered to physically distance and reduce transmission of COVID-19.

With continued pandemic-related impacts on the homeless services system, this program offer maintains capacity of 200 rooms of motel shelter and 96 beds of congregate shelter. Physical distancing motel shelters are based on public health imperatives and ensure that people who are at highest risk of severe and fatal consequences from COVID-19 are out of congregate and semi-congregate shelter settings. Those with the highest risk factors based on age, underlying medical conditions, and Black, Indigenous, and People of Color (BIPOC) identity are prioritized into the physical distancing motel sites. They have the safety of a fully supported motel room that opens to the outdoors. The rooms are supported with basic amenities that reduce risk of infection, including private bathroom and shower, individually wrapped meals, and access to laundry services. There is also 24/7 on-site staffing, in order to be able to routinely check on guests, as well as on-site access to technology and staff to support transitions out of motel shelter and into permanent housing as rapidly as possible.

This program offer also funds continued staffing of an outreach supply center, the stocking of that supply center with personal protective equipment, sanitizing supplies, basic safety supplies (blankets, tarps, sleeping bags, socks, etc.), and water and food items. The program offer will support both contracted organizations, including those doing focused culturally specific and behavioral health focused outreach, and community volunteer organizations that conduct outreach to the unsheltered population and lack the resources to offer critical health, safety and nutrition resources.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of year-round emergency shelter beds/rooms*	317	300	300	300
Outcome	Number of unique individuals receiving supports in motel settings*	716	1,320	810	900

**Performance Measures Descriptions**

\*The methodology for this measure has been changed from manual calculation using the best available information for each shelter to the average daily number of beds for each shelter over the course of the year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$263,000	\$293,335	\$0
Contractual Services	\$0	\$9,417,000	\$10,097,850	\$0
Materials & Supplies	\$0	\$6,459,300	\$5,710,622	\$0
Internal Services	\$0	\$382,700	\$939,403	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$16,522,000</b>	<b>\$17,041,210</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$16,522,000</b>		<b>\$17,041,210</b>	
<b>Program FTE</b>	0.00	0.00	3.00	0.00

Program Revenues				
Intergovernmental	\$0	\$16,522,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$16,522,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

County General Funds

Significant Program Changes

**Last Year this program was:** FY 2023: 30900 ARP - COVID-19 Emergency Response - Shelter Operations and Outreach

This program provides core services supporting people in our care. In the FY 2023 Adopted budget, this program was funded by County and City American Rescue Plan (ARP) funding to provide support to six motel shelters, outreach supplies and expanded hygiene.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30100A, 30210B  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) continues to prioritize “safety on the streets” investments in this program offer, including survival outreach, and basic health and sanitation services for people who are living unsheltered in encampments and places not meant for human habitation.

**Program Description**

Individuals with lived experience of unsheltered homelessness have called out the importance of distinguishing “safety off the streets” shelter strategies from those activities that help people who remain unsheltered stay as safe as possible. These strategies include survival-focused street outreach, such as the distribution of essential gear, food, water and primary healthcare services. This also includes investments in day centers, hygiene services, and clean-up and basic sanitation assistance for people living in encampments. This program offer specifically supports: (1) critical mobile primary care/medical triage services provided to unsheltered and sheltered individuals using a team of volunteer physicians and medical professionals; (2) survival and resource navigation-focused outreach in East County and on the Springwater Corridor; and (3) a program that employs people with lived experience of homelessness to assist with ongoing trash pick-up and sanitation support for people living unsheltered in encampments

This program offer, when considered in conjunction with the following other program offers, represents a significant outreach and services focused on assisting people who remain unsheltered to meet their basic needs and navigate to shelter and housing: 30210B - Safety on the Streets - Navigation & Service Coordination Expansion; 30100 - System Access, Assessment, & Navigation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of volunteer physicians mobilized to support physical health needs of unsheltered population	19	20	20	20
Outcome	Number of unsheltered individuals engaged with health-related services through mobile medical team	4,250	1,200	1,400	1,400
Outcome	Number of encampments receiving trash collection services	3,913	3,500	3,500	3,500
Outcome	Number of people receiving assistance to access services	500	1,000	1,000	1,000

**Performance Measures Descriptions**

\*Includes light touch, survival outreach - reason why actuals are higher

\*This estimate reflects program ramp-up time

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$63,154	\$63,154	\$146,477	\$0
Contractual Services	\$0	\$671,960	\$0	\$539,396
<b>Total GF/non-GF</b>	<b>\$63,154</b>	<b>\$735,114</b>	<b>\$146,477</b>	<b>\$539,396</b>
<b>Program Total:</b>	<b>\$798,268</b>		<b>\$685,873</b>	
<b>Program FTE</b>	0.50	0.50	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$142,774	\$0	\$408,791
Beginning Working Capital	\$0	\$454,065	\$0	\$130,605
<b>Total Revenue</b>	<b>\$0</b>	<b>\$596,839</b>	<b>\$0</b>	<b>\$539,396</b>

## Explanation of Revenues

County General Fund plus \$130,605 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness, and \$408,791 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland.

## Significant Program Changes

**Last Year this program was:** FY 2023: 30210A Safety on the Streets

In the FY 2023 Adopted budget, this program was funded across two program offers, 30210A, 30210B, and 30903, which when combined amounted to \$5.3 million.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30100A, 30210A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Joint Office of Homeless Services prioritizes the provision of outreach and services to people living unsheltered in encampments and other places not meant for human habitation. This program offer maintains limited-term investments made in the FY 2022 Business Income Tax Rebalance joint funding package between the County and the City of Portland. Those investments expanded navigation outreach services and the coordination of access to shelter and other key resources, and included funding for the development of additional storage/hygiene solutions. They also included funding for participation in the Street Services Coordination Center (SSCC), which aligns the work of various public space management agencies that interact with unsheltered individuals with the work of the homeless response system.

**Program Description**

Multnomah County has a large and growing number of people experiencing unsheltered homelessness who are living in encampments on public property. These individuals have lacked sufficient routine engagement with outreach workers to establish trust and become engaged in services they need to transition out of homelessness and back into permanent housing.

This program offer maintains the staffing capacity in the homeless services system that is part of the Street Services Coordination Center (SSCC) established by the City of Portland. This Center brings together leadership from multiple City land-owning bureaus, first responders, and representatives from other jurisdictions with public lands in the County, to better align their resources and responses to camping, and to improve access to services for those living in encampments who are impacted by these agencies' public space management activities.

It also maintains funding for up to 20 additional navigation outreach workers and an outreach coordinator to provide service navigation and de-escalation services to people in areas prioritized by the SSCC, along with funding for the development of storage and hygiene solutions, such as mobile hygiene, site-based hygiene pods, urban rest stops, day centers, and short and long-term property storage strategies. In addition, it funds the capacity to coordinate shelter bed access for people in encampments who are working with navigation outreach workers and public space management agencies.

This program offer, when considered in conjunction with the following other program offers, represents a significant outreach and services focused on assisting people who remain unsheltered to meet their basic needs and navigate to shelter and housing: 30210A - Safety on the Streets - Navigation & Service Coordination Expansion; 30100A - System Access, Assessment, & Navigation

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Expanded navigation outreach capacity*	N/A	20	10	20
Outcome	BIPOC successfully referred to shelter at rates as high or higher than non-Hispanic whites	NA	Yes	Yes	Yes

**Performance Measures Descriptions**

\*This is a best estimate because the SSCC Nav Team has not yet launched and the method of deploying navigation workers has not yet been determined.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$287,231	\$175,000	\$462,312	\$0
Contractual Services	\$1,387,769	\$1,250,000	\$437,241	\$887,405
Capital Outlay	\$1,000,000	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$2,675,000</b>	<b>\$1,425,000</b>	<b>\$899,553</b>	<b>\$887,405</b>
<b>Program Total:</b>	<b>\$4,100,000</b>		<b>\$1,786,958</b>	
<b>Program FTE</b>	2.00	1.00	3.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,425,000	\$0	\$887,405
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,425,000</b>	<b>\$0</b>	<b>\$887,405</b>

Explanation of Revenues

County General Fund plus \$887,405 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland.

Significant Program Changes

**Last Year this program was:** FY 2023: 30210B Safety on the Streets - Navigation & Service Coordination Expansion

In FY 2023, this offer included one-time funding development of storage and hygiene solutions, and while this was a shared investment, the City of Portland did not fully fund their investment in the program in FY 2023.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

### Executive Summary

Street outreach is a critical strategy to ensure people experiencing unsheltered homelessness are provided with access to basic survival supplies, receive critical information on available resources, and are assisted to navigate to those resources. Especially in the midst of the COVID-19 pandemic, having individuals who can bring services and supports to where people are is more essential than ever. This program offer funds significantly expanding culturally specific outreach services, recognizing that to be most effective, outreach services should be delivered by and for the diverse racial and ethnic communities that make up the unsheltered populations.

### Program Description

Homelessness, including unsheltered homelessness, disproportionately impacts Communities of Color. Continued systemic, institutional, and individual racism pushes higher numbers of Black, Indigenous and other People of Color (BIPOC) into homelessness and makes escaping homelessness significantly more difficult. That is why Multnomah County, like communities across the country, sees rates of homelessness for BIPOC significantly higher than rates for Non-Hispanic whites. This is seen across homeless subpopulations, including among adults, families with children, domestic violence survivors, youth, people experiencing chronic homelessness, and among people who identify as LGBTQIA2S+. This overrepresentation is also seen among those living unsheltered, as well as those in shelter, or living in doubled up situations.

It is because of the additional barriers faced by BIPOC that the Joint Office of Homeless Services prioritizes the provision of culturally specific and culturally responsive services within all aspects of the homeless response system. Culturally specific services provided by and for Communities of Color that are overrepresented among people experiencing homelessness are particularly critical to eliminating racial disparities and meeting the commitment to support everyone in the community to end their homelessness.

This program offer continues expanded culturally specific services in one particularly critical area of the homeless services continuum of care, especially given the impacts of COVID-19 on the unsheltered population and Communities of Color. By investing in culturally specific outreach capacity focused on overrepresented Communities of Color, this program offer helps ensure that members of those communities who are living unsheltered in encampments, vehicles, or other places not meant for human habitation are connected to critical resources, including survival supplies, a range of shelter and support services, and, ultimately, permanent housing. Culturally specific outreach workers are able to build trust and tailor their work to the specific needs of their communities. They can help those they serve navigate mainstream service systems and institutions that too often are not culturally responsive and overcome the additional barriers created by ongoing racism.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Culturally specific outreach workers	N/A	5	3	5
Outcome	People receiving assistance to access services	N/A	1,000	400	1,000

### Performance Measures Descriptions

The FY 2023 Estimate reflects program ramp-up time; program launched in the third quarter.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$425,000	\$446,250	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$425,000</b>	<b>\$446,250</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$425,000</b>		<b>\$446,250</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$425,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$425,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Previously funded with ARP. in FY 2023, For FY 2024 County General Funds

Significant Program Changes

Last Year this program was: FY 2023: 30903 ARP - COVID-19 Emergency Response - Culturally Specific Outreach

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

JOHS 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 racial disparities. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of programming. This program offer supports existing programming to house and retain hundreds of people experiencing homelessness through limited duration rental assistance, mobile housing placement and retention support staffing.

**Program Description**

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.

This program offer retains existing capacity in housing placement and retention programs that help adult-only households return to permanent housing, with an emphasis on ensuring that those strategies are also reducing racial disparities. 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. The services 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, and the countywide Short Term Rent Assistance (STRA) program that consolidates multiple Federal, State and local funding streams in a fund administered by Home Forward, which in turn contracts the funds to nearly 20 nonprofit partners who offer prevention and rapid rehousing programs throughout the County.

Through this program offer, approximately 1,100 households will receive the housing placement, retention, and income acquisition support they need to obtain and/or retain permanent housing. Based on current data, 80% of the people served in the programs included in this offer identify as Black, Indigenous or People of Color, a share similar to last year.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number households enrolled in permanent housing or prevention programs (incl STRA & non-STRA)*	743	1,080	820	1,080
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number households newly placed into or retained in permanent housing (inc STRA & non-STRA programs)*	671	930	770	800
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	95%	90%	95%	90%

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$194,525	\$0	\$195,774	\$0
Contractual Services	\$1,110,960	\$4,161,220	\$1,171,769	\$2,325,170
<b>Total GF/non-GF</b>	<b>\$1,305,485</b>	<b>\$4,161,220</b>	<b>\$1,367,543</b>	<b>\$2,325,170</b>
<b>Program Total:</b>	<b>\$5,466,705</b>		<b>\$3,692,713</b>	
<b>Program FTE</b>	1.25	0.00	1.25	0.00

Program Revenues				
Intergovernmental	\$0	\$3,601,150	\$0	\$1,092,480
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,601,150</b>	<b>\$0</b>	<b>\$1,092,480</b>

Explanation of Revenues

County General Fund plus \$1,232,690 of the Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512 and \$1,092,480 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland

Significant Program Changes

Last Year this program was: FY 2023: 30300A Housing Placement & Retention - Adults & Women Households

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds critical service and rental assistance that help adults experiencing homelessness access and retain housing. This program offer specifically supports flexible funding to move people who are losing their housing or exiting institutions directly to new housing opportunities, as well as rental assistance and support services to rapidly rehouse people who are unsheltered.

### Program Description

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap-around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the JOHS and Measure commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness. The LIP recognizes the need for investments in a continuum of pre- and post- housing services and the importance of bringing housing-focused resources to people where they are. This program offer supports those essential investments for adult households living unsheltered or otherwise experiencing or at risk of experiencing homelessness.

For the majority of people experiencing homelessness, returning to permanent housing requires a combination of 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. These strategies must be provided at a range of access points, including through mobile teams to people living unsheltered and at the point where people are first losing their housing.

This program offer funds: (1) staffing, including peer support, and rental assistance to place people from the streets directly into housing; (2) staffing and limited duration rental assistance to divert people who are losing their housing or are coming from institutional settings, directly to new permanent housing opportunities; and (3) short-term rental assistance that will be used by Home Forward to support the housing placement and retention work of nearly 20 different non-profits serving people who are experiencing or at risk of homelessness, many of which are culturally specific agencies.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households newly placed into or retained in permanent housing	13	360	N/A	360
Outcome	Percentage of households not returning to the homeless services system one year post placement*	89%	90%	89%	90%
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$3,961,252	\$0	\$7,612,740
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,961,252</b>	<b>\$0</b>	<b>\$7,612,740</b>
<b>Program Total:</b>	<b>\$3,961,252</b>		<b>\$7,612,740</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,961,252	\$0	\$7,612,740
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,961,252</b>	<b>\$0</b>	<b>\$7,612,740</b>

Explanation of Revenues

\$7,612,740 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30300B Housing Placement & Retention - Adults & Women Households - Metro

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

The Joint Office of Homeless Services (JOHS) convenes the Homeless Family System of Care, which collaborates as a leadership/direct service team to address the unique housing needs of homeless families throughout the County. Through this program offer, and offer 30301B, the Mobile Housing Team (MHT), in partnership with the Federal Housing Choice Voucher program, maintains the capacity to house and provide equitable retention support services to hundreds of families with minor children, using a combination of housing placement and retention staffing and flexible rent/client assistance. MHT is a collaboration of Multnomah County and nine community partners, the majority of which are culturally specific service providers.

**Program Description**

The Homeless Family System of Care 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 advance racial and social justice, and a shared commitment that all families should be housed. The majority of agencies in the collaborative are culturally specific providers.

When combined with 30301B, this program offer provides 980 households with housing placement/retention services, including short- to medium-term flexible rent assistance (0-24 months) and client assistance. 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 broader definition of homelessness allows the system to serve families that are most vulnerable in a variety of living situations. In FY 2022, over 60% of the families served through MHT identified as being from communities of color, achieving the goal of improving access and outcomes for these communities.

Families experiencing homelessness 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.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing or prevention programs*	873	980	900	980
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of households newly placed into or retained in permanent housing*	715	790	740	790
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	91%	90%	91%	90%

**Performance Measures Descriptions**

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer. \*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$116,952	\$45,333	\$164,042	\$0
Contractual Services	\$3,070,390	\$1,328,725	\$3,645,439	\$585,155
<b>Total GF/non-GF</b>	<b>\$3,187,342</b>	<b>\$1,374,058</b>	<b>\$3,809,481</b>	<b>\$585,155</b>
<b>Program Total:</b>	<b>\$4,561,400</b>		<b>\$4,394,636</b>	
<b>Program FTE</b>	0.75	0.25	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,374,058	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$585,155
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,374,058</b>	<b>\$0</b>	<b>\$585,155</b>

Explanation of Revenues

County General Fund plus \$585,155 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness.

Significant Program Changes

Last Year this program was: FY 2023: 30301A Housing Placement & Retention - Homeless Families

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer sustains and expands capacity for the Homeless Family System of Care (HFSC). The HFSC is a collaboration between Multnomah County and community partners, a majority of which are culturally specific agencies. Through this program offer the HFSC, in partnership with the Federal Housing Choice Voucher & Emergency Housing Voucher programs, will maintain and expand current capacity to house and provide retention support services to hundreds of families experiencing homelessness.

### Program Description

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds housing placement and retention services for families with children who are doubled up in housing, living in shelter, or living unsheltered in Multnomah County.

The 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 advance racial and social justice, and a shared commitment that all families should be housed. The majority of agencies in the collaborative are culturally-specific providers. Families receive barrier mitigation and navigation services to increase access to housing and promote long term housing retention.

When combined with 30301A - Housing Placement & Retention - Homeless Families, this program provides more than 1,000 households with housing placement/retention services, including short- to medium-term flexible rent assistance (0-24 months) and client assistance. In FY 2022, over 60% of the families served through the Mobile Housing Team identified as being from communities of color, achieving the goal of improving access and outcomes for these communities.

This program offer also funds housing placement and retention services for families receiving the Emergency Housing Voucher (EHV) assistance. Families will access safe, stable and affordable housing subsidized by leveraged Federal Vouchers. This program offer provides culturally specific retention services to support families in remaining in permanent housing.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing or prevention programs	481	580	660	580
Outcome	Number of households newly placed into or retained in permanent housing*	29	460	100	460
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	100%	85%	100%	85%
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

\*This program for housing placements continues to ramp up and build capacity. Results are low for FY 2022 as only reflect placements in quarters 3 and 4.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$132,905	\$0	\$154,266
Contractual Services	\$0	\$4,195,590	\$0	\$6,229,340
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,328,495</b>	<b>\$0</b>	<b>\$6,383,606</b>
<b>Program Total:</b>	<b>\$4,328,495</b>		<b>\$6,383,606</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$4,328,495	\$0	\$6,383,606
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,328,495</b>	<b>\$0</b>	<b>\$6,383,606</b>

Explanation of Revenues

\$6,383,606 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30301B Housing Placement & Retention - Homeless Families - Metro Measure

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

JOHS has prioritized a range of highly effective strategies to transition people from shelter into housing and to ensure retention of that housing. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of placement out of shelter programming. This program offer supports hundreds of adult-only households to exit shelter using limited duration rental assistance, innovative multi-agency mobile housing placement and retention support staffing, as well as culturally specific services.

### Program Description

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 is a critical housing placement strategy prioritized to significantly decrease homelessness among those who are highly vulnerable in Multnomah County.

Prioritizing rapid rehousing resources to people in emergency shelters serves two critical purposes. First, it provides individuals in shelter the opportunity to end their homelessness by returning to permanent housing with the supports needed to retain that housing. Second, each individual who moves out of a shelter bed and into housing creates capacity in the shelter system to serve an additional individual who is still unsheltered and has not yet been able to locate a permanent housing option.

This program offer provides placement and/or retention services to at least 400 people leaving shelter. Services funded through this program are delivered by highly skilled nonprofit partners and are prioritized to Communities of Color, women, and other vulnerable adults experiencing homelessness accessing traditional and non-traditional shelter sites. The services include flexible rent assistance, and housing placement and retention staffing accessed through emergency shelters, day centers, and multi-agency mobile "in-reach" teams that engage with people in shelters that do not have their own housing placement programs. The in-reach teams include staff from culturally specific, domestic violence and behavioral health providers to assist adults in emergency shelter settings to more quickly exit shelter and return to housing.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people enrolled in permanent housing or prevention programs*	357	480	700	480
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of people newly placed into or retained in permanent housing*	228	310	470	350
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	87%	85%	87%	85%

### Performance Measures Descriptions

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer. \*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$73,705	\$2,229,760	\$96,465	\$4,386,360
<b>Total GF/non-GF</b>	<b>\$73,705</b>	<b>\$2,229,760</b>	<b>\$96,465</b>	<b>\$4,386,360</b>
<b>Program Total:</b>	<b>\$2,303,465</b>		<b>\$4,482,825</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,229,760	\$0	\$3,913,775
Beginning Working Capital	\$0	\$0	\$0	\$472,585
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,229,760</b>	<b>\$0</b>	<b>\$4,386,360</b>

Explanation of Revenues

County General Fund plus \$3,913,775 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government. \$472,585 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness.

Significant Program Changes

Last Year this program was: FY 2023: 30302A Housing Placement & Retention - Placement out of Adult Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30209  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

The Joint Office of Homeless Services (JOHS) has prioritized a range of highly effective strategies to transition people from emergency shelter into housing and to ensure retention of that housing. This program offer funds adult-only and family households to exit emergency shelter using limited duration rental assistance, innovative multi-agency mobile housing placement and retention support staffing, as well as culturally specific services. This funding prioritizes serving adult and family households experiencing chronic homelessness and a high-risk of complications from COVID-19.

### Program Description

Prioritizing permanent rehousing resources to people in emergency shelters serves two critical purposes. First, it provides individuals in shelter the opportunity to end their homelessness by returning to permanent housing with the supports needed to retain that housing. Second, each individual who moves out of a shelter bed and into housing creates capacity in the shelter system to serve an additional households who are still unsheltered and have not yet been able to locate a permanent housing option.

This program offer funds short- and medium-term rental assistance, move-in and barrier mitigation, and case management services to help people access and retain permanent housing.

This program offer funds multiple housing placement teams, including at least one culturally specific program, dedicated to helping participants in JOHS-funded COVID-19 shelters to access and retain permanent housing. In addition, the program offer funds an expansion of mobile shelter in-reach services to connect people in alternative and other shelter programs that lack housing placement capacity to permanent housing opportunities. The in-reach teams include staff from culturally-specific, domestic violence and behavioral health providers to assist adults in emergency shelter settings to more quickly exit shelter and return to housing. This program offer supports the capacity to assist at least 450 households in shelter with permanent housing placement and retention services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people enrolled in permanent housing programs*	N/A	450	100	370
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes
Outcome	Number of people placed and retained in permanent housing*	N/A	360	40	296

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

The FY 2023 Estimate reflects program ramp-up time; program launched in the third quarter. The FY 2024 Offer reflects reduced based on funding level.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$6,472,330
Capital Outlay	\$0	\$9,187,497	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$9,187,497</b>	<b>\$0</b>	<b>\$6,472,330</b>
<b>Program Total:</b>	<b>\$9,187,497</b>		<b>\$6,472,330</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$9,187,497	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$6,472,330
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,187,497</b>	<b>\$0</b>	<b>\$6,472,330</b>

Explanation of Revenues

\$6,472,330 Metro Supported Housing BWC Funds

Significant Program Changes

Last Year this program was:

**Program #30303A - Housing Placement & Retention - Domestic Violence** FY 2024 Adopted

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) prioritizes addressing the intersection of homelessness and domestic and sexual violence. The JOHS also holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of all programming. Many survivors must leave their home to be safe, while others face eviction due to problems caused by an abusive partner's behavior. Rapid rehousing 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 offer funds housing and support services to approximately 600 individuals, the significant majority of whom will identify as Black, Indigenous, and People of Color (BIPOC).

**Program Description**

Rapid rehousing programs funded by this program offer provide culturally responsive and culturally specific advocacy support and financial assistance rooted in racial equity 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 employment and 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 offer supports:

- Rapid Rehousing housing placements and support services, including advocacy, case management, client assistance, rent assistance and safety planning, and housing retention through the provision of vocational, educational and financial management training.
- DV Housing Advocacy at culturally specific DV programs, providing rapid rehousing 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 nontraditional 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 community resources.
- Shelter to Stabilization Advocacy co-located at DV emergency shelters, to assist survivors with barrier removal, client assistance, and referrals to housing programs and community resources.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants served	584	600	600	600
Outcome	Percentage of participants who exit to permanent housing	94%	85%	95%	85%
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$71,383	\$0	\$77,801
Contractual Services	\$1,858,935	\$1,359,620	\$2,073,502	\$1,339,395
Internal Services	\$0	\$20,523	\$0	\$19,792
<b>Total GF/non-GF</b>	<b>\$1,858,935</b>	<b>\$1,451,526</b>	<b>\$2,073,502</b>	<b>\$1,436,988</b>
<b>Program Total:</b>	<b>\$3,310,461</b>		<b>\$3,510,490</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$1,451,526	\$0	\$1,436,988
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,451,526</b>	<b>\$0</b>	<b>\$1,436,988</b>

Explanation of Revenues

This program generates \$19,792 in indirect revenues. County General Fund plus \$1,436,988 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

Significant Program Changes

Last Year this program was: FY 2023: 30303A Housing Placement & Retention - Domestic Violence

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25050  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) prioritizes addressing the intersection of homelessness and domestic and sexual violence. Metro Supportive Housing Services funding is dedicated to reducing homelessness through strategies that lead with racial equity. This program offers funds services essential to achieving stable, long-term housing outcomes for domestic and sexual violence survivors by providing housing navigation, housing placement, retention, and assertive engagement services.

### Program Description

The Multnomah County Local Implementation Plan (LIP) for the Metro Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap-around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds case management and supportive services for survivors of Domestic Violence (DV) / Sexual Assault (SA) and their children/dependents. Services include safety planning, identifying safe housing, landlord advocacy, placement and retention, flexible financial assistance, and connecting survivors to community resources. More specifically, this program offer supports:

- Navigation services to support the rapid transition of people prioritized through Domestic and Sexual Violence (DSV) Coordinated Access to available shelter and housing resources.
- Partner agency staffing to support non-DV System partners and households in Adult, Youth, and Family Shelters needing to be connected with DV resources.
- Partner agency staffing to provide housing placement and retention services for 90 domestic and sexual violence households. Participants will access safe, stable, and affordable housing, subsidized by leveraged Federal vouchers.
- Rental assistance and supportive services to ensure housing retention for 30 households over a 2-5 year period.
- Match support for \$800,000 Department of Housing and Urban Development (HUD) DV Transitional Housing - Rapid Rehousing Bonus project serving 29 households or 58 individuals annually with case management and support services

This program offer provides culturally-responsive and culturally-specific advocacy and support, and financial assistance rooted in racial equity, to help survivors and their children quickly establish safe, permanent housing after fleeing domestic violence.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing programs*	99	210	120	210
Outcome	BIPOC households placed or retained in housing at rate as high or higher than % of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of households placed or retained in permanent housing**	N/A	170	110	170
Output	Households assessed for DV Coordinated Access***	N/A	400	100	400

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

\*\*Some programs are being developed and implemented in fiscal year 2023. Program is expected to meet performance measures by FY 2024. Only one of the 5 housing programs outlined in this offer are currently fully operational.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$126,306	\$0	\$247,044
Contractual Services	\$0	\$2,270,843	\$0	\$2,428,155
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,397,149</b>	<b>\$0</b>	<b>\$2,675,199</b>
<b>Program Total:</b>	<b>\$2,397,149</b>		<b>\$2,675,199</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$2,397,149	\$0	\$2,675,199
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,397,149</b>	<b>\$0</b>	<b>\$2,675,199</b>

Explanation of Revenues

\$2,675,199 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30308 Housing Placement & Retention - Emergency Rent Assistance & Expanded

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

The Joint Office of Homeless Services (JOHS) prioritizes a range of effective housing placement and retention strategies in order to reduce homelessness among highly vulnerable adult households, including seniors. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of all housing placement and retention programming. This program offer supports existing programming, including rent assistance, housing placement and retention, and supportive services to provide stability for seniors experiencing or at risk of homelessness.

**Program Description**

People over the age of 55 make up one of the fastest growing segments of the population experiencing homelessness, and the most recent Point In Time Count (2022) showed a 48% increase in the number of people over 70. For the majority of seniors experiencing homelessness, returning to permanent housing requires some combination of housing placement, retention support staffing, rental assistance, and benefits acquisition assistance.

This program offer funds housing placement and retention strategies developed and coordinated through JOHS, 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 organization that specializes in serving the senior population.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing or prevention programs*	350	330	330	330
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	No	Yes	No	Yes
Outcome	Number of households newly placed into or retained in permanent housing	350	320	330	320
Outcome	Percentage of households not returning to homeless services within a year of exiting a program to housing*	98%	90%	98%	90%

**Performance Measures Descriptions**

\*Where a program is not meeting this outcome measure, the JOHS prioritizes the program for improving capacity to successfully engage and serve Black, Indigenous, and other People of Color overrepresented in the population of people experiencing homelessness.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$642,730	\$0	\$704,905
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$642,730</b>	<b>\$0</b>	<b>\$704,905</b>
<b>Program Total:</b>	<b>\$642,730</b>		<b>\$704,905</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$642,730	\$0	\$704,905
<b>Total Revenue</b>	<b>\$0</b>	<b>\$642,730</b>	<b>\$0</b>	<b>\$704,905</b>

Explanation of Revenues

\$704,905 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30305 Housing Placement & Retention - Medical/Aging

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

JOHS has prioritized permanent housing placement for vulnerable populations, including homeless youth. The JOHS also holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of programming. This program offer funds services essential to achieving successful equitable 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 in the Homeless Youth Continuum (HYC).

**Program Description**

The HYC is a highly collaborative and coordinated system comprised of four nonprofit 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 experiencing homelessness. This program offer maintains current capacity to provide essential housing and developmental supports for youth.

This program offer leverages Federal long-term rent assistance vouchers to support housing navigation, placement and retention services for 125 youth receiving Emergency Housing Voucher assistance and Fostering Youth to Independence vouchers. To drive down racial disparities in the experience of homelessness, Black, Indigenous, and People of Color communities will be prioritized in access to and success in the Emergency Housing Voucher and Fostering Youth to Independence Voucher Programs. This program offer funds Assertive Engagement (AE) to provide assessment, transition planning and support from staff that are relationship-focused, mobile, and operates throughout Multnomah County. AE staff provide linkage to education, employment, health, mental health and addictions treatment, housing services, and on-going housing stability supports. This program offer funds for Parenting Education Support for youth accessing services who are pregnant and/or parenting. With support on-site and at mobile locations, HYC can provide culturally responsive services and meet the developmental needs of pregnant and parenting youth along with housing placement funds. This program offer funds Recovery Oriented Supports & Engagement (ROSE) mental health and addiction recovery support services. Approximately 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 youth in recovery supports, conduct assessments, and connect youth to formal treatment programs, provide follow up care, on-going supports, and healthy recreation alternatives. This program offer funds a range of developmentally appropriate housing options, which include onsite housing with 24-hour staffing, scattered site housing, rapid rehousing, shared, and group housing. Housing navigators assist youth to access the housing options that best fit the youth's needs and provide retention support.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth enrolled in transitional or permanent housing or prevention programs*	515	565	625	625
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of youth newly placed into or retained in transitional or permanent housing*	439	375	525	525
Output	Number of youth receiving recovery support services	465	700	700	700

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$81,387	\$0	\$88,530
Contractual Services	\$2,926,295	\$2,554,372	\$4,254,995	\$1,849,555
Internal Services	\$0	\$23,399	\$0	\$22,522
<b>Total GF/non-GF</b>	<b>\$2,926,295</b>	<b>\$2,659,158</b>	<b>\$4,254,995</b>	<b>\$1,960,607</b>
<b>Program Total:</b>	<b>\$5,585,453</b>		<b>\$6,215,602</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$1,890,716	\$0	\$1,960,607
Beginning Working Capital	\$0	\$0	\$897,050	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,890,716</b>	<b>\$897,050</b>	<b>\$1,960,607</b>

Explanation of Revenues

This program generates \$22,522 in indirect revenues.  
 County General Fund plus: \$897,050 of Tax Title proceeds to provide affordable housing for youth and families with children, in accordance with ORS 275.275, \$845,675 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$210,875 Emergency Housing Assistance (EHA) allocated through the Oregon Housing and Community Services (OHCS) to assist low or very-low income persons who are homeless or are unstably housed and at risk of becoming homeless, \$904,057 in HUD Continuum of Care (CoC) Program awarded to Multnomah County. The CoC Program requires a 25 percent match of the awarded grant amount, which is met with County General Fund.

Significant Program Changes

**Last Year this program was:** FY 2023: 30306A Housing Placement & Retention - Youth Services

This program offer funds housing navigation, placement, and retention services for youth. In the FY 2023 Adopted budget, this program was funded across two program offers, 30306A, and 30306B, which when combined amounted to \$5.7 million

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

The Joint Office of Homeless Services (JOHS) convenes a coalition of partners around the ongoing effort to help Veteran households end or prevent their homelessness. This program offer leverages U.S. Housing and Urban Development and Veterans Affairs resources, as well as State of Oregon Emergency Housing Assistance funds, to meet the short-term rent assistance and barrier mitigation needs of Veterans who become homeless in the community.

**Program Description**

Ending homelessness among Veterans continues to be a priority in the community. However, hundreds of Veterans continue to become homeless every year, and the Point-in-Time count conducted in January 2022 identified 465 people who identified themselves as Veterans.

The capacity to house 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 it is anticipated that Federal funding will remain available in FY 2024, 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 Veterans experiencing homelessness 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 and past property debts, limited-term rent assistance, legal fees, and moving fees. Additionally, this program offer funds culturally-specific operations that support the engagement, assessment, and referral of Veterans for housing services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing or prevention programs*	95	250	40	50
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of households newly placed into or retained in permanent housing	94	250	40	40

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$184,840	\$518,645	\$197,167	\$630,275
<b>Total GF/non-GF</b>	<b>\$184,840</b>	<b>\$518,645</b>	<b>\$197,167</b>	<b>\$630,275</b>
<b>Program Total:</b>	<b>\$703,485</b>		<b>\$827,442</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$518,645	\$0	\$293,355
Beginning Working Capital	\$0	\$0	\$0	\$336,920
<b>Total Revenue</b>	<b>\$0</b>	<b>\$518,645</b>	<b>\$0</b>	<b>\$630,275</b>

Explanation of Revenues

County General Fund plus \$336,920 funds allocated through the Visitor Facilities Intergovernmental Agreement (VFIGA) for Livability and Safety Support Services for the provision of services and programs for people experiencing homelessness or who are at risk of becoming homeless and services and programs addressing the community livability and safety concerns associated with homelessness; and \$293,355 Emergency Housing Assistance (EHA) for Veterans allocated through the Oregon Housing and Community Services (OHCS) to assist low or very-low income persons who are homeless or are unstably housed and at risk of becoming homeless.

Significant Program Changes

Last Year this program was: FY 2023: 30307 Housing Placement & Retention - Veterans

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

**Executive Summary**

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds a package of enhanced housing placement incentives that are aimed at encouraging a wider range of landlords to make vacant units available to individuals who have access to rental assistance and supportive services through the Measure and other programs, including federal rental assistance vouchers.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds a range of strategies designed to increase the number of landlords and property management companies that participate in making vacant units available to the individuals experiencing homelessness who have access to rental assistance and support services through the Measure, and other programs, but have been unable to find a landlord ready to rent to them.

The incentive tools funded in this program offer include the ability of non-profit homeless service providers to guarantee rents for up to the duration of a lease, either by leasing the unit themselves (master leasing) or by guaranteeing rent on behalf of a tenant who is leasing directly from the property owner. It also includes access to a risk mitigation fund, and the ability to compensate landlords for holding vacant units, in exchange for flexibility on screening criteria that might otherwise keep someone from gaining access to a unit.

This program offer includes one-time funds to support commitments made to landlords through the Move In Multnomah program along with ongoing funds to continue master-leasing and other landlord incentives. These investments work to enhance existing housing placement programs and increase the housing opportunities for people experiencing homelessness.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people placed into housing through a master leasing program*	N/A	N/A	N/A	215
Outcome	Percentage of households receiving access incentive support that successfully lease up in housing*	N/A	N/A	N/A	80%
Outcome	Overrepresented People of Color lease up successfully at rates as high or higher than all households*	N/A	N/A	N/A	Met

**Performance Measures Descriptions**

\*This measure is new in FY 2024



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$3,640,187	\$0	\$4,366,530
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,640,187</b>	<b>\$0</b>	<b>\$4,366,530</b>
<b>Program Total:</b>	<b>\$3,640,187</b>		<b>\$4,366,530</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,640,187	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$4,366,530
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,640,187</b>	<b>\$0</b>	<b>\$4,366,530</b>

Explanation of Revenues

\$4,366,530 carryover from the FY 2023 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30309 Housing Placement & Retention - Incentives & Master Leases - Metro

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

**Executive Summary**

The Joint Office of Homeless Services utilizes the Housing First model to meet the needs of individuals experiencing homelessness. This has been done through the utilization of racial equity as a core goal and the elimination of disparate rates of homelessness based on race as a focus for programming. This program offer funds the administration of the Housing Multnomah Now initiative, which includes five new positions; Housing Multnomah Now interweaves an emergency management model of service delivery with Housing First in focused geographic areas across Multnomah County to expedite the process of moving individuals experiencing homelessness into housing and resolving homelessness for those individuals. This model is supported by best practices adopted by stakeholders on the Federal, state and municipal levels.

**Program Description**

JOHS utilizes Housing First as a model to end individuals homelessness—whereby permanent housing is provided to individuals experiencing homelessness. This model has been established best practice for resolving homelessness for over two decades. Housing First hinges on both the availability of housing stock for individuals experiencing homelessness, and the ability for individuals experiencing homelessness to access housing. This program funds the administration of a demonstration project – Housing Multnomah Now – that will accelerate the rate at which individuals experiencing homelessness are able to access housing, thereby improving JOHS’ ability to deploy the Housing First model.

This program addresses the needs to expedite housing placements in specific geographical areas and identify additional housing stock for those experiencing homelessness. Initially, this program will serve 300 individuals experiencing homelessness in two distinct geographic regions: one in central city followed by another in East County. This program offer creates an administrative infrastructure for the implementation of the Housing Multnomah Now program. This is done through three distinct but interwoven elements. The first of those is to develop an emergency response to support the resolution of individuals experiencing homelessness. This will be done through the establishment of a Multi-Agency Coordinating (MAC) group, which will be led by the Joint Office of Homeless Services and serve on the Governor’s Statewide MAC. The second element is the acceleration of housing access, placement, and stability. This will be done through the provision of housing resources by outreach workers in specific geographic areas, and incentivizing housing access with private market landlords. The final element of this program is the prioritization of deeply affordable housing. This element will be facilitated through advocacy to housing partners of Multnomah County to prioritize their housing stock for individuals experiencing homelessness.

Housing Multnomah Now will focus primarily on single adults and couples experiencing homelessness. The Adult System of Care (ASC) is the coordinated effort to assist individuals and couples experiencing homelessness make a rapid and sustained transition to permanent housing. The agencies that comprise the ASC will be stakeholders and partners in the program. This program funds an administrative system to rapidly resolve homelessness for the majority of individuals in specific geographic areas, to manage and support the initiative, as well as communications support and data collection.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of Private Market Landlords that enroll to provide housing through Housing Multnomah Now	N/A	N/A	5	15
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	N/A	N/A	Yes	Yes
Output	Number of households placed into housing through Housing Multnomah Now	N/A	N/A	75	225
Outcome	Percentage of people not returning to homeless services within a year of receiving Housing	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$441,246
Contractual Services	\$0	\$0	\$0	\$9,558,754
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,000,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$10,000,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	3.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$10,000,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,000,000</b>

Explanation of Revenues

\$10,000,000 carryover from the FY 2023 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was:

This continues the 12 month pilot program that started at the end of FY 2023 with the approval of budget modification JOHS-005-23 that appropriated one-time Metro Supportive Housing Fund contingency for the Housing Multnomah Now (HMN) pilot program.

**Department:** Joint Office of Homeless Services      **Program Contact:** Kevin Irwin  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 30310  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Building on the successes of the Move In Multnomah program, which paired expanded rapid rehousing funding with in-depth landlord outreach, engagement, financial incentives and guaranteed rental income, the Oregon All In initiative, a state-led project aimed at reducing unsheltered homelessness through the creation of 140 emergency shelter beds, and outreach, housing navigation and rapid rehousing services, along with landlord engagement and incentives to rehouse 240 households.

**Program Description**

The Oregon All In initiative is a state-led project aimed at reducing unsheltered homelessness through multiple strategies by increasing state investments and strengthening the connection between state and local priorities in response to Oregon's long-growing unsheltered homelessness crisis. On January 10, 2023, Oregon's Governor issued Executive Order (EO) 23-02 Declaring State of Emergency due to Homelessness and EO 23-03 Directing State Agencies to Prioritize Reducing Homelessness. The EO 23-02 provides funding to rapidly expand the State's low-barrier shelter capacity and to rehouse people experiencing unsheltered homelessness.

The EO 23-02 funds the Oregon All In Initiative and allocates \$13.4 million to Multnomah County in FY 2024 to create 140 new shelter beds and rehouse 240 households from unsheltered homelessness before January 10, 2024. Multnomah County's local Multi-Agency Collaborative (MAC) is guiding this effort, with members from the County, City of Portland, City of Gresham, Home Forward, service providers and the healthcare sector.

Through Oregon All In (OAI), the Joint Office of Homeless Services will support the creation of 140 eligible shelter units by expanding low-barrier alternative shelter capacity and providing critical support services to help people rapidly move back into housing. This program offer funds the operations for 140 low-barrier sleeping pods in a secure, staffed, and supportive shelter program.

Funding in this program offer builds outreach and housing navigation capacity among the network of MAC contracted providers.

In an effort to support newly housed participants and property managers, a housing response team will be available on nights and weekends to provide landlord mediation, intervention, services, and support to OAI households.

This program offer funds time-limited data staff to perform data entry, data management, technical assistance, reporting and/or analysis, hardware to be used in the field by outreach and navigation workers, and software development to allow rapid data collection during outreach and navigation, system integration with current Homeless Management Information System (HMIS) infrastructure.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of emergency shelter beds.	N/A	N/A	N/A	140
Outcome	BIPOC sheltered or placed at a rate as high or higher than percent of HUD homeless population	N/A	N/A	N/A	Yes
Outcome	Number of households served in emergency shelter beds.	N/A	N/A	N/A	140
Outcome	Number of households placed in permanent housing	N/A	N/A	35	240

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The allocation of funds through the State Executive Order 23-02 is time limited through January 10, 2024.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$936,622
Contractual Services	\$0	\$0	\$0	\$12,039,311
Materials & Supplies	\$0	\$0	\$0	\$159,993
Internal Services	\$0	\$0	\$0	\$238,277
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,374,203</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$13,374,203</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$13,374,203
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,374,203</b>

## Explanation of Revenues

This program generates \$238,277 in indirect revenues.

\$13,374,203 of one-time only State funding allocated to Multnomah County through State of Oregon's Executive Order 23-02.

## Significant Program Changes

Last Year this program was:

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) prioritizes supportive housing programs to meet the needs of adults and families experiencing homelessness who are in recovery or who have significant disabilities. This programming is central to the County’s partnership with Portland Housing Bureau and Home Forward to significantly expand supportive housing. The program includes highly effective, limited-duration housing with intensive attached services, as well as long-term rent assistance and wraparound support services. These housing strategies are nationally recognized best practices, and leverage other State, local and Federal resources.

**Program Description**

This program offer is a continuation of the ongoing work, in partnership with Portland Housing Bureau and Home Forward, to significantly expand supportive housing. The programs included here are designed to reduce the unmet need for permanent housing, especially among: (1) people experiencing chronic homelessness, (2) Black, Indigenous, and People of Color (BIPOC) within the population of people experiencing homelessness, (3) people in recovery from an alcohol or drug addiction, and (4) people with severe and persistent mental illness experiencing homelessness. This program offer funds supportive housing programming in alignment with these priorities.

Supportive housing is for those who would not be successful in their housing without 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 have experienced long-term or cyclical homelessness. Recovery-oriented transitional supportive housing serves those who are in the early stages of recovery from an alcohol or drug addiction, require limited duration intensive services and are at high risk of becoming chronically homeless.

This program supports a range of supportive housing for more than 1,100 highly vulnerable people with disabling conditions. This includes funding for support services paired with Federal rental assistance; funding for support services paired with deeply affordable housing financed by the Portland Housing Bond or otherwise financed by the Portland Housing Bureau with rental vouchers from Home Forward; and funding for rental assistance paired with support services leveraged through the other systems such as health care. In some cases, program funding is used for both rental assistance and support services in order to support the unique needs of the subpopulation served by the program and/or due to the absence of other sources of support.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people enrolled in permanent or transitional housing programs*	1,387	1,210	1,390	1,210
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Number of people newly placed into or retained in permanent housing or served in transitional housing*	1,185	1,100	1,190	1,100
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	90%	85%	90%	85%

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$153,671	\$0	\$0
Contractual Services	\$1,465,814	\$7,239,978	\$797,271	\$6,473,097
<b>Total GF/non-GF</b>	<b>\$1,465,814</b>	<b>\$7,393,649</b>	<b>\$797,271</b>	<b>\$6,473,097</b>
<b>Program Total:</b>	<b>\$8,859,463</b>		<b>\$7,270,368</b>	
<b>Program FTE</b>	0.00	1.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$6,393,649	\$0	\$6,473,097
Beginning Working Capital	\$0	\$1,000,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,393,649</b>	<b>\$0</b>	<b>\$6,473,097</b>

Explanation of Revenues

County General Fund plus \$5,257,965 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government and \$1,215,132 City of Portland General Fund allocation through Multnomah County’s IGA with the City of Portland.

Significant Program Changes

Last Year this program was: FY 2023: 30400A Supportive Housing

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds rental assistance and services to expand supportive housing capacity by creating 25 new supportive housing opportunities for Veterans and by supporting an estimated 30 households who no longer need intensive services to move on from supportive housing so that these units can be offered to those who need the combination of long-term rental subsidy and intensive wrap-around support services that supportive housing offers.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the Measure commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness.

The LIP expands existing commitments to increase supportive housing for people with significant disabilities who are experiencing long-term homelessness by setting a goal to create at least 2,235 new supportive housing opportunities. This program offer supports this goal by funding support services and leveraging federal rental vouchers through the VASH program to create 25 new supportive housing opportunities for veterans seeking culturally-specific services for Native Americans

In addition, funding in this program offer will: (1) create a "Moving On" pilot program based on nationally recognized best practices to support approximately 80 households who are currently in supportive housing and no longer need intensive services but continue to need rent assistance, thus freeing up supportive housing opportunities for people who need them the most; (2) increase supports for new affordable housing developments where a majority or 100% of units operate as supportive housing so that they can provide the necessary 24/7 staffing; (3) provide critical client assistance to support placement and retention of up to 130 households with federal Mainstream rental vouchers; and (4) fund Multnomah County's portion of the regional Risk Mitigation Program to support landlords renting to Regional Long-term Rent Assistance (RLRA) voucher holders.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people newly placed into or retained in permanent housing*	N/A	550	55**	240***
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	N/A	80%	80%	80%
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled", which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

\*\*FY 2023 is the first year and includes funding to expand Supportive Housing. The majority of funding in this offer is being released through three Notice of Funding Availability (NOFAs) over the course of FY 2023.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,378,733	\$0	\$1,638,573
Contractual Services	\$0	\$6,080,000	\$1,262,749	\$3,262,577
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,458,733</b>	<b>\$1,262,749</b>	<b>\$4,901,150</b>
<b>Program Total:</b>	<b>\$7,458,733</b>		<b>\$6,163,899</b>	
<b>Program FTE</b>	0.00	10.00	0.00	11.00

Program Revenues				
Intergovernmental	\$0	\$7,458,733	\$0	\$4,901,150
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,458,733</b>	<b>\$0</b>	<b>\$4,901,150</b>

Explanation of Revenues

Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government and \$1,227,673 of one-time-only County General Funding.

Significant Program Changes

Last Year this program was: FY 2023: 30400B Supportive Housing - Metro Measure Expansion

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer provides funding for support services and rental subsidies for at least 580 deeply affordable housing units financed by the Portland Housing Bond and the Metro Housing Bond, or otherwise financed by the Portland Housing Bureau or by the State of Oregon.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the Measure commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness.

The LIP expands existing commitments to expand supportive housing for people with significant disabilities who are experiencing long-term homelessness by setting a goal to create at least 2,235 supportive housing units. This program offer funds at least 580 new supportive housing units within affordable housing projects for Metro priority populations, including a focus on Black, Indigenous, and People of Color (BIPOC) households experiencing or at imminent risk of chronic homelessness. Some of these units began coming online in FY 2022 and the others are expected to come online by the end of FY 2024. This program offer leverages the Portland Housing Bond, Metro Housing Bond, and other affordable housing units financed by the Portland Housing Bureau and the State of Oregon to create project-based supportive housing opportunities with on-site wellness and retention services.

This program offer also funds support services and in some cases, rental subsidies, paired with deeply affordable housing financed by the Portland Housing Bond and Metro Housing Bond or otherwise financed by the Portland Housing Bureau or the State of Oregon. Services will be specialized to serve various sub-populations and will include, and not be limited to, culturally specific, mental health, substance use, physical health, HIV/AIDS, and individualized retention services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people newly placed or retained in permanent housing	155	380	290	545*
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	100%	80%	100%	80%
Output	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*This PO will ultimately fund approximately 595 units of supportive housing and homeless preference units across approximately 20 affordable housing developments. The majority of these affordable housing developments are coming online in FY 2023 and remaining by the end of FY 2024. The FY 2023 Budgeted and FY 2024 Offer are based on the anticipated timeline of these developments and when the JOHS expects people to move into units

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$4,309,716	\$0	\$6,859,900
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,309,716</b>	<b>\$0</b>	<b>\$6,859,900</b>
<b>Program Total:</b>	<b>\$4,309,716</b>		<b>\$6,859,900</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,309,716	\$0	\$6,859,900
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,309,716</b>	<b>\$0</b>	<b>\$6,859,900</b>

Explanation of Revenues

\$6,859,900 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

**Last Year this program was:** FY 2023: 30400C Supportive Housing - Local Bond Units and Site-Based Commitments -

This Program Offer includes PSH units that are integrated into new affordable housing developments. There have been significant construction delays across many projects that have impacted the timeline for placing households into these PSH units. All buildings included in this offer are expected to be online and fully leased by the end of FY 2024. This Program Offer now includes 25 supportive housing opportunities at one affordable housing development that were split across offer 30402 and offer 30400B in FY 2023.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds tenant-based permanent supportive housing (PSH) programs that launched in FY 2022 and FY 2023. The program offer includes PSH specifically designed to meet the needs of Black, Indigenous, and People of Color (BIPOC) communities, people with significant behavioral health needs, and older adults.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds at least 400 tenant-based permanent supportive housing (PSH) opportunities.

PSH is for those who would not be successful in their housing without supportive services, and for whom services would be less effective without stable housing. It serves those with significant disabilities, including chronic health conditions, mental illness, and addictions, who have experienced or are at risk of experiencing chronic homelessness. Tenant-based supportive housing provides households with a rental voucher that can be used to buy-down rent in a private market or regulated unit along with mobile, wrap-around services. This program offer funds PSH programming specifically designed to meet the needs of BIPOC communities, people with significant behavioral health needs, and older adults.

The programs funded by this program offer include rental assistance provided through the Regional Long-term Rent Assistance (RLRA) program administered by Home Forward, and services provided by a range of nonprofit partners. RLRA operates similarly to the U.S. Department of Housing and Urban Development's (HUD) Section 8 program—households pay about 30% of their income towards rent and utilities and the housing authority pays the rest. RLRA was intentionally designed to be low barrier and serve people who are often screened out of HUD's Section 8 program.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people newly placed or retained in permanent housing*	92	230	185*	400**
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	NA	80%	80%	80%
Output	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*This Program Offer includes tenant-based PSH programs that launched in FY 2022 and FY 2023. Some programs are still ramping up to having full caseloads. Programs are expected to be fully leased-up in FY 2024. \*\*The FY 2024 Offer is significantly larger because 218 supportive housing placements that were included in PO 30400B in FY 2023 are now included here.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$215,944
Contractual Services	\$0	\$5,167,193	\$0	\$11,967,091
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,167,193</b>	<b>\$0</b>	<b>\$12,183,035</b>
<b>Program Total:</b>	<b>\$5,167,193</b>		<b>\$12,183,035</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$5,167,193	\$0	\$12,183,035
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,167,193</b>	<b>\$0</b>	<b>\$12,183,035</b>

Explanation of Revenues

\$12,183,035 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30400D Supportive Housing - Tenant-Based Commitments - Metro Measure

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds critical infrastructure needed to support the expansion of supportive housing. The offer specifically supports Multnomah County's implementation of the Regional Long-term Rent Assistance (RLRA) program, strategies to recruit and support affordable housing operators and private market landlords who partner with service providers to create supportive housing opportunities, and training and other technical assistance for organizations providing supportive housing.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds critical infrastructure needed to support the expansion of supportive housing.

The program offer funds the staffing necessary to administer Multnomah County's local implementation of the Regional Long-term Rent Assistance (RLRA) program. RLRA was designed by Metro and the three counties, and builds on policies developed for a Multnomah County pilot program run by Home Forward. Through the RLRA program, Home Forward provides rental vouchers that are paired with services provided by a range of nonprofit partners. RLRA operates similarly to the U.S Department of Housing and Urban Development's (HUD) Section 8 program—households pay about 30% of their income towards rent and utilities, and the housing authority pays the rest. RLRA was intentionally designed to be low barrier and serve people who are often screened out of HUD's Section 8 program.

The program offer funds a team that will recruit and retain private market landlords to partner with service providers to create supportive housing opportunities for RLRA voucher holders who face high barriers to finding housing.

Additionally, this program offer includes investment toward a future rent guarantee for 15 site based supportive housing unit project.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Landlord recruitment and retention program launched	N/A	Yes	Yes	Yes
Outcome	Number of landlords engaged	N/A	100	0	100
Outcome	Number of providers of culturally-specific services that receive supportive housing technical assistance	N/A	15	8	N/A

**Performance Measures Descriptions**

The Landlord Engagement NOFA will be released at the end of January and approved proposals won't begin program development until mid-May and/or June. It is unlikely that actual landlord engagement will begin until the beginning of FY 2024.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,711,545	\$0	\$2,433,970
Unappropriated & Contingency	\$0	\$0	\$0	\$303,439
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,711,545</b>	<b>\$0</b>	<b>\$2,737,409</b>
<b>Program Total:</b>	<b>\$1,711,545</b>		<b>\$2,737,409</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,711,545	\$0	\$2,433,970
Beginning Working Capital	\$0	\$0	\$0	\$303,439
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,711,545</b>	<b>\$0</b>	<b>\$2,737,409</b>

Explanation of Revenues

\$2,433,970 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government and \$303,439 in carryover SHS.

Significant Program Changes

**Last Year this program was:** FY 2023: 30400E Supportive Housing - System Support - Metro Measure Expansion

This program offer includes investments in Multnomah County's implementation of the Regional Long-term Rent Assistance (RLRA) program that was previously budgeted in 30400B - Supportive Housing - Metro Measure Expansion. This change was made to allow for greater visibility into the investments being made in the infrastructure needed to support the expansion of supportive housing.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 30400C  
**Program Characteristics:**

**Executive Summary**

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer provides funding for support services and/or rental subsidies for over 190 deeply affordable housing units financed by the Portland Housing Bond or the Metro Housing Bond, or otherwise financed by the Portland Housing Bureau or by the State of Oregon.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the Measure commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness.

The LIP expands existing commitments to expand supportive housing for people with significant disabilities who are experiencing long-term homelessness by setting a goal to create at least 2,235 supportive housing units. This program offer funds at least 100 new supportive housing units within affordable housing projects for Metro priority populations, including a focus on Black, Indigenous, and People of Color (BIPOC) households experiencing or at imminent risk of chronic homelessness. These units are expected to come online between the second half of FY 2023 and the end of FY 2024.

This program offer leverages the Portland Housing Bond, Metro Housing Bond, and other affordable housing units financed by the Portland Housing Bureau and the State of Oregon, and funds support services and, in some cases, rental subsidies, to create project-based supportive housing opportunities with on-site wellness and retention services. Services will be specialized to serve various sub-populations and will include, but not be limited to, culturally specific, mental health, substance use, physical health, and individualized retention services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people newly placed or retained in permanent housing*	N/A	N/A	N/A	100**
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	N/A	N/A	N/A	80%
Output	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	N/A	N/A	N/A	Yes

**Performance Measures Descriptions**

\*The basis for ""Placed & Retained"" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in system wide reporting, and ""Enrolled,"" which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

\*\*This is a prorated outcome for the first year of implementation based on the expected timeline for the funded site-based units to come online. In FY 2025, this will increase to approximately 190.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$1,757,749
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,757,749</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,757,749</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,677,775
Beginning Working Capital	\$0	\$0	\$0	\$79,974
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,757,749</b>

Explanation of Revenues

\$1,677,775 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government and \$79,974 in one time only SHS BWC.

Significant Program Changes

Last Year this program was:

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) has prioritized a range of supportive 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 program offer preserves existing supportive housing and is central to the County's partnership with Portland Housing Bureau and Home Forward to significantly expand supportive housing. The program continues highly effective long-term rent assistance and wrap-around support services that will assist people to access and/or retain permanent housing. These housing strategies are nationally recognized best practices, and leverage other State, local and Federal resources.

### Program Description

This program offer provides continued support for permanent supportive housing (PSH) for chronically homeless adults, offering a combination of deeply affordable housing and ongoing support services proven locally and nationally to be the most effective and cost effective way to end homelessness for this population.

These targeted investments leverage other Federal, State and local resources including U.S. Department of Housing and Urban Development's (HUD) Housing Opportunities for Persons with AIDS (HOPWA) and Continuum of Care (CoC) programs, Medicaid, affordable housing units and permanent rental subsidies to support at least 800 vulnerable adults experiencing homelessness to secure and retain permanent housing. In some cases, the program offer provides match for a HUD CoC or HOPWA grant. In other cases, the program offer funds long-term rental subsidies and mental health focused housing placement and retention, and support services are leveraged through other systems.

Services are delivered by 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 of mental health and culturally specific providers working in partnership with Portland Police to provide housing placement and retention for people with mental illnesses, and recovery-focused transitional housing.

The SCT is a program established by the Portland Police Bureau in partnership with community housing and social services providers. The program's goal is to divert individuals who are experiencing homelessness and living with behavioral health conditions - in particular substance use disorders - from future contact with the criminal justice system by connecting them with supportive housing and treatment resources.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people enrolled in permanent housing programs*	1,338	800	1,136	800
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Output	Number of people newly placed into or retained in permanent housing*	793	600	686	600
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	72%	75%	72%	75%

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$34,923	\$0	\$37,821
Contractual Services	\$0	\$4,602,945	\$0	\$4,838,999
Materials & Supplies	\$0	\$8,961	\$0	\$4,137
Internal Services	\$0	\$10,041	\$0	\$9,622
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,656,870</b>	<b>\$0</b>	<b>\$4,890,579</b>
<b>Program Total:</b>	<b>\$4,656,870</b>		<b>\$4,890,579</b>	
<b>Program FTE</b>	0.00	0.25	0.00	0.25

Program Revenues				
Intergovernmental	\$0	\$4,656,870	\$0	\$4,890,579
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,656,870</b>	<b>\$0</b>	<b>\$4,890,579</b>

Explanation of Revenues

This program generates \$9,622 in indirect revenues.  
 \$1,882,130 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$1,891,284 Housing Opportunities for Persons with AIDS (HOPWA) entitlement funds annually awarded to the City of Portland by the U.S. Department of Housing and Urban Development (HUD) to provide assistance to low-income individuals diagnosed with HIV/AIDS and their family members and \$1,117,165 City of Portland General Fund through Multnomah County's IGA with the City of Portland.

Significant Program Changes

Last Year this program was: FY 2023: 30401A Supportive Housing - Behavioral Health/Medical Housing

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

The Joint Office of Homeless Services (JOHS) has prioritized a continuum of services, from outreach, to shelter, to permanent housing, for people experiencing long-term homelessness and living with behavioral health conditions, including substance use disorders. This program offer funds the outreach, supportive housing, and treatment access services for individuals experiencing or at risk of long-term homelessness referred through the Portland Police Bureau's Service Coordination Team (SCT).

**Program Description**

The JOHS has a strategic plan to reduce chronic homelessness, and the Metro Supporting Housing Services Measure Local Implementation Plan (LIP) specifically prioritizes achieving a significant reduction in chronic homelessness. Using City of Portland general funds, the SCT programming funded in this program offer advances these objectives by funding critical short- and long-term housing and recovery support services for chronically homeless people, and those at risk of chronic homelessness, who have frequent contact with the criminal justice system connected to their behavioral health conditions.

The SCT is a program established by the Portland Police Bureau in partnership with community housing and social services providers. The program's goal is to divert individuals who are experiencing homelessness and living with behavioral health conditions - in particular substance use disorders - from future contact with the criminal justice system by connecting them with supportive housing and treatment resources.

Individuals referred through the SCT program have access to low-barrier/short-term stabilization housing where they have direct access to support services, including behavioral health and addictions treatment. They also have access to alcohol and drug free housing where they receive case management services that offer client-driven, flexible approaches based on individual needs, which are intended to lead to long-term recovery services. For individuals who transition to permanent housing, this program provides home-based retention services that include access to outpatient substance abuse treatment services, financial assistance, eviction prevention, and resources and guidance on improving self-sufficiency through financial improvements and long-term recovery skills.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of low-barrier transitional housing units in staffed and structured setting	36	36	36	36
Outcome	Percent of participants enrolled in behavioral health services	57%	70%	70%	70%
Outcome	Transitions to permanent housing	14	15	15	15
Outcome	BIPOC graduate from SCT at rates as high or higher than Non-Hispanic whites	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$2,245,365	\$0	\$2,507,628
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,245,365</b>	<b>\$0</b>	<b>\$2,507,628</b>
<b>Program Total:</b>	<b>\$2,245,365</b>		<b>\$2,507,628</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,245,365	\$0	\$2,507,628
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,245,365</b>	<b>\$0</b>	<b>\$2,507,628</b>

Explanation of Revenues

\$2,507,628 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland.

Significant Program Changes

Last Year this program was: FY 2023: 30401B Supportive Housing - Behavioral Health/Medical Housing - Service

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) recognizes that, as the fixed incomes of seniors and people with disabilities fall further behind the costs of housing, including publicly subsidized tax credit rental housing, ongoing rental assistance is increasingly necessary to prevent and end homelessness for these populations. This program offer funds 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. The voucher program funded by this offer is the precursor and model for the Metro Supportive Housing Services Measure-funded Regional Long-Term Rent Assistance Program.

### Program Description

People over the age of 55 and people with significant disabilities are among the fastest growing populations of people experiencing homelessness. These populations often have fixed incomes well below 30% of the Area Median Income, putting market rate rental housing completely out of reach, and also foreclosing access to most publicly subsidized affordable housing, which rents at levels affordable for people making 60% of Area Median Income or above.

This program assists seniors and people living with disabilities who are on fixed incomes or at risk of homelessness due to being rent burdened (rent greater than 30% of household income). Program participants typically have less than \$800 per month income, and were either homeless or paying more than 70% of that income on rent prior to program subsidy. This program provides rent subsidies to participants so that they can afford the rent in Low Income Housing Tax Credit (LIHTC) units or other regulated affordable housing. While these units have restricted rent levels, the rent amounts are not tied to tenant income and are increasingly out of reach for the target group in this program. Some assisted households also reside in moderately-priced private market units. This program makes it possible for people in the target population to afford the rent (at 30% of their income).

This program complements the Federally-funded Housing Choice Voucher program and local Short Term Rent Assistance (STRA) program. The program leverages support from the inventory of publicly funded affordable housing. The local long-term voucher functions more flexibly than the Federal voucher program and provides similar long-term housing stability to a highly vulnerable population. The program is administered through Home Forward. This program provided the framework for the Metro SHS-funded Regional Long-term Rent Assistance Program.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of households enrolled in permanent housing programs*	56	50	50	40**
Outcome	BIPOC served with vouchers at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Output	Number of households newly placed into or retained in permanent housing*	56	50	50	40

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

\*\*10 site-based PSH units that were captured in this Program Offer in FY 2023 have been moved to PO 30400C in FY 2024.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$409,645	\$415,200	\$442,414	\$440,810
<b>Total GF/non-GF</b>	<b>\$409,645</b>	<b>\$415,200</b>	<b>\$442,414</b>	<b>\$440,810</b>
<b>Program Total:</b>	<b>\$824,845</b>		<b>\$883,224</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$415,200	\$0	\$440,810
<b>Total Revenue</b>	<b>\$0</b>	<b>\$415,200</b>	<b>\$0</b>	<b>\$440,810</b>

Explanation of Revenues

County General Fund plus \$440,810 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30402 Supportive Housing - Local Long Term Rental Vouchers

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

JOHS 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. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity must be a focus of programming. This program offer funds longer-term rent assistance and wrap around support services to help move families from homelessness into permanent housing. Supportive housing strategies are nationally recognized best practices and can leverage existing market-rate and new affordable housing.

### Program Description

JOHS prioritizes equitable housing solutions for families with children experiencing homelessness. While many families experiencing homelessness are well served by rapid rehousing strategies, there are families with long-term or recurring experiences of homelessness, very often with household members with significant disabling conditions, that require supportive housing to achieve long-term stability. These families make up an increasing percentage of the long-term stayers in the family shelter system, because they lack the support needed to overcome their barriers to housing.

This program offer addresses the needs of long-term shelter families by expanding supportive housing resources for them, offering access to permanent housing to the families and thereby freeing up scarce and expensive shelter capacity for other families. Families in this program receive up to 24-month rental assistance vouchers and wraparound 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.

The Homeless Family System of Care (HFSC) is the primary coordinated effort to assist families experiencing homelessness make a rapid and sustainable transition back into permanent housing. The system has shared values that include the practice of assertive engagement, using an equity lens to advance racial and social justice, and a shared commitment that all families should be housed. The majority of agencies in the collaborative are culturally specific providers.

This program offer funds PSH programming designed to meet the needs of Black, Indigenous, and People of Color (BIPOC) families experiencing homelessness. The programs include rental assistance provided through the Regional Long-term Rent Assistance (RLRA) program administered by Home Forward, and services provided by a range of non profit partners.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of families placed into or retained in permanent housing*	64	55	50	75
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	89%	80%	89%	80%
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting.

The increase in Regional Long-Term Rent Assistance Costs is driving the reduced offer for FY 2024. As these costs increase, the total number of people placed and retained in permanent housing with a set budget decreases proportionally.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$123,273	\$0	\$135,798
Contractual Services	\$678,360	\$873,350	\$770,009	\$960,175
<b>Total GF/non-GF</b>	<b>\$678,360</b>	<b>\$996,623</b>	<b>\$770,009</b>	<b>\$1,095,973</b>
<b>Program Total:</b>	<b>\$1,674,983</b>		<b>\$1,865,982</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,095,973
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,095,973</b>

Explanation of Revenues

County General Fund plus \$1,095,973 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30403A Supportive Housing - Families

This program offer funds families experiencing homelessness make a rapid and sustainable transition back into permanent housing. In the FY 2023 Adopted budget, this program was funded across three program offers, 30403A, and 30403B, which when combined amounted to \$1.7 million.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

With Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds tenant-based permanent supportive housing (PSH) specifically designed to meet the needs of youth (under 25) with significant behavioral health needs. The program offer funds support services and Regional Long Term Rent Assistance vouchers designed to be low barrier and serve youth who are often screened out of the U.S. Department of Housing and Urban Development's (HUD) Section 8 program.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds 30 tenant-based permanent supportive housing (PSH) opportunities and provides FTE for on-going support services.

PSH is for individuals who would not be successful in their housing without supportive services, and for whom services would be less effective without stable housing. It serves those with significant disabilities, including chronic health conditions, mental illness, and addictions, who have experienced or are at risk of experiencing chronic homelessness. Tenant-based supportive housing provides households with a rental voucher that can be used to buy-down rent in a private market or regulated unit along with mobile, wrap-around services.

The programming funded by this program offer will support 30 homeless youth who have extremely low-incomes, serious disabling conditions, and experiencing - or at risk of - long-term homelessness, with ongoing rental assistance provided through the Regional Long-term Rent Assistance (RLRA) program administered by Home Forward and wrap-around services provided by a youth service organization. RLRA operates similarly to the HUD Section 8 program where households pay 30% of their income towards rent and utilities and the housing authority pays the rest. RLRA was intentionally designed to be low barrier and serve people who are often screened out of HUD's Section 8 program.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of youth newly placed or retained in permanent housing	16	30	30	30
Outcome	Percentage of youth not returning to homeless services within a year of exiting a program to housing	NA	80%	80%	80%
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

This new program offer includes supportive housing for youth that was previously budgeted in 30400B - Supportive Housing - Metro Measure Expansion. The FY 2022 Budgeted number reflects the youth-specific supportive housing number previously included in 30400B.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$624,000	\$0	\$978,570
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$624,000</b>	<b>\$0</b>	<b>\$978,570</b>
<b>Program Total:</b>	<b>\$624,000</b>		<b>\$978,570</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$624,000	\$0	\$978,570
<b>Total Revenue</b>	<b>\$0</b>	<b>\$624,000</b>	<b>\$0</b>	<b>\$978,570</b>

Explanation of Revenues

\$978,570 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30404 Supportive Housing - Youth - Metro Measure Expansion

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

Metro Supportive Housing Services Measure (Measure) funding is dedicated to reducing homelessness through strategies that lead with racial equity. This program offer funds for tenant-based permanent supportive housing (PSH) for survivors and children fleeing domestic violence or experiencing homelessness as a result of an incident of domestic or sexual violence. The program offer includes PSH specifically designed to meet the needs of BIPOC survivors of domestic and sexual violence. The households served by this program are extremely low-income, have at least one member with a disabling condition, and are experiencing, or are at risk of experiencing, homelessness.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) set out a range of strategies to reduce homelessness by increasing permanent housing and wrap-around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. In alignment with priorities outlined in the LIP, this program offer funds at least 18 tenant-based permanent supportive housing (PSH) opportunities, along with staff capacity to deliver the services.

PSH is for those who would not be successful in their housing without supportive services, and for whom services would be less effective without stable housing. It serves those with significant disabilities, including chronic health conditions, mental illness, and addictions, who have experienced or are at risk of experiencing chronic homelessness. Tenant-based supportive housing provides households with a rental voucher that can be used to buy-down rent in a private market or regulated unit along with mobile, wrap-around services. This program offer funds domestic violence specific PSH programming designed to meet the needs of BIPOC communities.

The programs funded by this program offer include rental assistance provided through the Regional Long-term Rent Assistance (RLRA) program administered by Home Forward, and services provided by a range of nonprofit partners.

RLRA operates similarly to the U.S. Department of Housing and Urban Development's (HUD) Section 8 program where households pay about 30% of their income towards rent and utilities and the housing authority pays the rest. RLRA was intentionally designed to be low barrier and serve people who are often screened out of HUD's Section 8 program.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of people newly placed or retained in permanent housing	N/A	30	5*	18**
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	N/A	80%	N/A	80%
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

\*Program is being developed and implemented in FY 2023. Program is expected to meet performance measures by FY 2024. \*\*The increase in Regional Long-Term Rent Assistance costs is driving the reduced FY 2024 Offer. As these costs increase, the total number of households that can be placed and retained in permanent housing with a set budget decreases proportionally.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$600,000	\$0	\$632,625
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$600,000</b>	<b>\$0</b>	<b>\$632,625</b>
<b>Program Total:</b>	<b>\$600,000</b>		<b>\$632,625</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$600,000	\$0	\$632,625
<b>Total Revenue</b>	<b>\$0</b>	<b>\$600,000</b>	<b>\$0</b>	<b>\$632,625</b>

Explanation of Revenues

\$632,625 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30400B Supportive Housing - Metro Measure Expansion

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

With Metro Supportive Housing Services Measure (Measure) funding intended to reduce chronic and episodic homelessness with programming that leads with racial equity, this program offer funds a pilot project that will connect people experiencing, or at imminent risk of, chronic homelessness, who are also being repeatedly failed by multiple systems (e.g. health, criminal justice, social services). The pilot project will provide participants with the long-term rental assistance and support services they need to end their homelessness. In providing permanent supportive housing to this population, it will substantially reduce the cycle of harmful, unsuccessful, and costly engagements with the criminal justice, health care, and homeless services systems.

**Program Description**

One of the goals of Multnomah County’s Local Implementation Plan for the Measure is to improve coordination among systems that each touch the lives of people experiencing chronic homelessness, but too often are not coordinated and fail to provide individuals with access to the intervention that will best meet their needs - permanent supportive housing (PSH).

Between 2018 and 2020, the Multnomah County Sheriff’s Office, the Local Public Safety Coordinating Council, the Multnomah County Health Department, Health Share of Oregon, and the Joint Office of Homeless Services participated in an analysis sponsored by the Corporation for Supportive Housing called Frequent Utilizer System Engagement (FUSE). This analysis compared data from the homeless services, health care, and public safety systems to identify individuals who are most frequently engaged in all three of these systems and to assess, among other things, how their ‘utilization’ of these systems changed based on whether or not they were in PSH.

Consistent with similar projects around the country, the Multnomah County FUSE analysis demonstrated a profound positive impact, in terms of reduced criminal justice involvement and reduced crisis health care services, when someone who is chronically homeless moves into PSH.

This program offer draws on the learnings of the Multnomah County FUSE analysis to identify those individuals who are experiencing chronic homelessness and are being failed most frequently by the criminal justice and health care systems and provides those individuals with PSH - a locally funded long-term rental subsidy and ongoing wrap-around support services to ensure ongoing housing stability. The program will involve a collaboration between the Health Department, the Department of Community Justice, Health Share of Oregon, and the Joint Office of Homeless Services. The project is budgeted to provide PSH to up to 40 individuals in the pilot phase.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Create a by name list of people most frequently failed by health, criminal justice, and homeless services	N/A	1	1	1
Outcome	Place or retain FUSE individuals in PSH	N/A	35	0	40
Output	Enroll FUSE individuals in PSH program	N/A	50	0	40

**Performance Measures Descriptions**

\*Because this is a new program that will take time to develop and launch, it is anticipated that a significant number of enrolled participants will still be in the housing search process at the end of the fiscal year. The JOHS will release a NOFA to allocate these funds in Spring 2023 and the program will launch at the end of FY 2023 or beginning of FY 2024.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,000,000	\$0	\$1,085,550
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$1,085,550</b>
<b>Program Total:</b>	<b>\$1,000,000</b>		<b>\$1,085,550</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,000,000	\$0	\$1,085,550
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$1,085,550</b>

Explanation of Revenues

\$1,085,550 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30406 Supportive Housing - Frequent Users Systems Engagement - Metro



**Program #30407A - Supportive Housing - Countywide Coordination - Dept of County Human Services** FY 2024 Adopted

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Multnomah County’s Metro Supportive Housing Services Measure (Measure) Local Implementation Plan (LIP) calls out the importance of aligning the work of multiple County departments around the commitment to preventing and ending homelessness. This program offer provides Measure funding to better serve participants experiencing or at risk of homelessness in the Youth and Family Services (YFS), Aging, Disability and Veterans Services (ADVSD), and Intellectual and Developmental Disabilities Services Division (IDDDSD) of the Department of County Human Services (DCHS).

**Program Description**

The Multnomah County’s Measure LIP recognizes the importance of aligning ending homelessness efforts across County Departments, including between DCHS and the JOHS. This program offer specifically funds programs that will advance the LIP’s commitment to racial equity, connect people being served by JOHS programs to critical DCHS resources, and connect those being served by YFS, ADVSD, and IDDDSD to critical permanent housing opportunities. Specifically, the program offer funds:

- YFS Multnomah Stability Initiative (MSI) program for families to help homeless families housed through the Homeless Family System of Care (HFSC) successfully transition into that program and gain long-term housing stability and asset-building opportunities that MSI offers.
- A mobile team of assessment workers in ADVSD and IDDDSD who can partner with JOHS-funded outreach and shelter programs to ensure that people experiencing unsheltered and sheltered homelessness are being assessed and, as appropriate, enrolled in enhanced Medicaid and IDDDSD services, and have access to the critical support services that accompany that enrollment.
- Staffing capacity for ADVSD and IDDDSD to partner with JOHS to develop and implement enhanced permanent supportive housing that meets the service support needs of chronically homeless participants in those DCHS programs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	HFSC families transitioned to MSI	N/A	25	20	20
Outcome	HFSC families retaining housing at 12 months	N/A	80%	80%	80%
Output	Number of people assessed for ADVSD/IDD Services*	N/A	300	145	275
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

\*New pilot program in the process of being implemented.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,199,837	\$0	\$1,291,447
Contractual Services	\$0	\$1,038,163	\$0	\$1,090,070
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,238,000</b>	<b>\$0</b>	<b>\$2,381,517</b>
<b>Program Total:</b>	<b>\$2,238,000</b>		<b>\$2,381,517</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,238,000	\$0	\$2,381,517
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,238,000</b>	<b>\$0</b>	<b>\$2,381,517</b>

Explanation of Revenues

\$2,381,517 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30400D Supportive Housing - Tenant-Based Commitments - Metro Measure

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

Utilizing Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity, this program offer funds a critical short term shelter, transitional housing and permanent housing capacity for people experiencing or at imminent risk of chronic homelessness, in particular individuals living with serious and persistent mental illness. The offer leverages and builds on existing intensive behavioral health programs in the Health Department's Behavioral Health Division that serve this vulnerable population, as well as funding new programming in the Behavioral Health Resource Center (BHRC).

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Measure sets out a range of strategies to reduce homelessness by increasing permanent housing and wrap-around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies prioritize the Measure commitment to eliminating racial disparities among people experiencing chronic and episodic homelessness. The LIP also makes a specific commitment to immediately expanding behavioral health services at all levels of the continuum, from shelter, to transitional housing and permanent supportive housing. This program offer reflects that commitment and funds:

- Critical motel-based emergency shelter capacity and crisis case management for individuals in the Health Department's Choice program. This will provide immediate safety off the streets for people living with severe behavioral health needs, while they transition to longer-term housing options.
- The very successful Stabilization Treatment Preparation (STP) transitional housing program, a partnership between the Health Department and the Department of Community Justice that serves people who are justice involved and living with significant behavioral health conditions. The expansion funded here provides culturally specific STP programming to the African American community.
- Increased staff capacity on the Promoting Access to Hope (PATH) team to assist with addiction treatment services access for people with substance use disorders who are experiencing chronic and episodic homelessness.
- Operational funding for the shelter and bridge housing operations at the Behavioral Health Resource Center.
- An expansion of additional investments in long-term rental assistance and housing placement services for people served by any of Multnomah County's Assertive Community Treatment (ACT) and Intensive Case Management (ICM) teams. ACT and ICM teams provide an intensive level of community-based, ongoing support services to people with severe and persistent mental illness.
- Funding for motel-based transitional/early recovery housing that takes referrals from culturally specific substance use and recovery programs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals placed into or retained in permanent housing*	73	155	160	160
Outcome	Number of Choice participants served in motel-based emergency shelter**	59	70	100	70
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing*	NA	80%	80%	80%
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$846,463	\$0	\$918,177
Contractual Services	\$0	\$5,777,140	\$0	\$5,607,315
Materials & Supplies	\$0	\$8,497	\$0	\$0
Internal Services	\$0	\$98,057	\$0	\$43,165
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,730,157</b>	<b>\$0</b>	<b>\$6,568,657</b>
<b>Program Total:</b>	<b>\$6,730,157</b>		<b>\$6,568,657</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$6,730,157	\$0	\$6,365,988
Beginning Working Capital	\$0	\$0	\$0	\$202,669
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,730,157</b>	<b>\$0</b>	<b>\$6,568,657</b>

Explanation of Revenues

FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government including \$202,669 SHS BWC.

Significant Program Changes

Last Year this program was: FY 2023: 30401B Supportive Housing - Behavioral Health/Medical Housing - Service

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

Multnomah County's Metro Supportive Housing Services Measure (Measure) Local Implementation Plan (LIP) calls out the importance of aligning the work of multiple county departments around the commitment to preventing and ending homelessness. This program offer provides Measure funding to better serve individuals who have a history of chronic homelessness who are exiting incarceration and are working with the Department of Community Justice's (DCJ) reentry program. This offer leverages existing program capacity in DCJ by providing individuals with long-term tenant-based rental subsidies that will offer ongoing housing stability.

### Program Description

The Multnomah County's Measure LIP recognizes the importance of aligning ending homelessness efforts across County Departments, including between DCJ and the Joint Office of Homeless Services (JOHS). The two departments share in common a significant number of people who cycle through homeless services programs and the criminal justice system because they lack access to permanent housing with the appropriate level of support services. This program offer continues the partnership between the two departments by leveraging existing DCJ housing services capacity and Measure funding to provide flexible tenant-based Regional Long Term Rent Assistance (RLRA) vouchers to up to 60 people reentering the community who have previous histories of long-term homelessness and who, but for this ongoing rental assistance, would return to being chronically homeless. Because People of Color are significantly overrepresented in this target population, prioritizing Measure funds in this way will also advance the County's commitment to the elimination of racial disparities in rates of chronic homelessness.

The RLRA voucher is a local rent-assistance tool developed as part of the Measure that is similar to federal long-term rental assistance vouchers in that it guarantees a tenant will not pay more in rent than they can afford. However, RLRA offers the benefit of greater flexibility to the voucher holder. One area of flexibility is that the voucher is available to anyone who meets the income and homelessness criteria, regardless of their criminal history. In addition, this voucher allows the holder to seek out landlords in the private market who may be willing to overlook criminal history because the vouchers are less burdensome to work with and offer certain financial guarantees that are designed to mitigate risk.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individuals enrolled in program*	N/A	70	15	60
Outcome	Individuals placed into permanent housing*	N/A	60	10	50
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population*	N/A	Yes	Yes	Yes

### Performance Measures Descriptions

\*The basis for "Placed & Retained" has been changed from Entry Date to Housing Move-in date, consistent with an FY 2022 change to the measure in systemwide reporting, and "Enrolled," which is based on Entry Date, has been added for more robust reporting and to preserve continuity with reporting in previous years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$387,035	\$0	\$431,800
Contractual Services	\$0	\$1,025,045	\$0	\$1,076,295
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,412,080</b>	<b>\$0</b>	<b>\$1,508,095</b>
<b>Program Total:</b>	<b>\$1,412,080</b>		<b>\$1,508,095</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,412,080	\$0	\$1,508,095
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,412,080</b>	<b>\$0</b>	<b>\$1,508,095</b>

Explanation of Revenues

\$1,508,095 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government.

Significant Program Changes

Last Year this program was: FY 2023: 30400D Supportive Housing - Tenant-Based Commitments - Metro Measure

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) recognizes diversion as a critical strategy to reduce the number of people experiencing street and shelter homelessness in the community. In order to advance JOHS's commitment to achieving racial equity, an essential focus of this programming must be to eliminate disparate rates of homelessness on the basis of race and ethnicity. This program offer funds existing capacity to divert people from homelessness who are escaping domestic violence, facing imminent housing loss, or are exiting the criminal justice and healthcare systems. This program will divert hundreds of people from street and shelter homelessness.

### Program Description

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, one-time, financial and/or staffing 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.
- Domestic Violence 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 allow survivors to avoid the trauma and safety risks of becoming homeless. These services reach hundreds of survivors annually and serve a diverse population.
- 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 Assistance 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, Social Security Disability Income, and/or Medicaid and Medicare benefits. These benefits provide critical financial and healthcare resources that allow recipients to avoid homelessness.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participants receiving diversion services	982	1,170	1,060	1,170
Outcome	Percentage of exits to permanent housing*	76%	80%	80%	80%
Outcome	Number of people served with benefits acquisition assistance (BEST)	442	480	410	480
Outcome	BIPOC participate in program at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

The COVID-19 pandemic, which began in FY 2020, has significantly impacted the performance measures associated with this program offer.

\*This measure excludes BEST, Health Connections and Peer Health Navigators.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$1,172,050	\$1,358,940	\$1,336,876	\$1,522,548
<b>Total GF/non-GF</b>	<b>\$1,172,050</b>	<b>\$1,358,940</b>	<b>\$1,336,876</b>	<b>\$1,522,548</b>
<b>Program Total:</b>	<b>\$2,530,990</b>		<b>\$2,859,424</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,358,940	\$0	\$933,702
Beginning Working Capital	\$0	\$0	\$128,130	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,358,940</b>	<b>\$128,130</b>	<b>\$933,702</b>

Explanation of Revenues

County General Fund plus \$588,846 of the Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$128,130 of Tax Title proceeds to provide affordable housing for youth and families with children, in accordance with ORS 275.275, \$434,455 of the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$499,247 City of Portland General Fund allocation through Multnomah County's IGA with the City of Portland.

Significant Program Changes

Last Year this program was: FY 2023: 30500 Diversion Services

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 30500  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This Program Offer makes a one-time allocation to expand the capacity to provide people experiencing homelessness who have serious and persistent disabling conditions with the support they need to complete the application for, and be approved to receive, Supplemental Security Income (SSI) and other long-term disability benefits from the Federal Government. This investment responds to the backlog of demand for these critical benefits acquisition services created during the pandemic, and represents a very effective use of one-time funds to help people experiencing chronic homelessness obtain an ongoing source of income.

**Program Description**

The Joint Office of Homeless Services has funded a local non-profit organization to provide assistance to people experiencing homelessness to navigate the very complex social security disability application process for several years. Benefits acquisition assistance is a critical support service that is recognized as an essential part of helping people with serious and ongoing disabling conditions make successful and sustainable transitions out of homelessness.

This Program Offer provides a one-time allocation to address the increased demand for benefits assistance that exists as a result of the pandemic's impact on our most vulnerable populations and the organizations that continued to work to serve them. Specifically, the funding in this Program Offer will allow two specialists to process and file applications for Federal disability benefits. This is an expansion of capacity that is funded in Program Offer 30500A.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Contracted benefits specialists FTE to process and file federal long term disability benefit applications.	N/A	N/A	N/A	2.00
Outcome	Number of successful applications for federal long-term disability benefits awarded.	N/A	N/A	N/A	27
Outcome	Each Community of Color served at rates as high/higher than their proportion of chronically homeless population	N/A	N/A	N/A	Yes

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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

One Time Only County General Fund

Significant Program Changes

Last Year this program was: FY 2023: 30907 ARP - COVID-19 Benefits and Entitlements Specialist Team (BEST)

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

The program offer continues funding for the highly successful 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 program connects employment and housing resources for homeless families, youth, and Communities of Color. This program offer also funds employment-related programming focused on creating low-barrier employment opportunities for people experiencing homelessness. This program offer contracts with multiple community partners across various systems of care to provide employment program support.

**Program Description**

This program offer sustains critical capacity 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 and responsive manner. This program provides approximately 550 individuals with employment services and 225 households with rent assistance or eviction prevention. Based on current performance, it is anticipated that 75% of the participants served will be from communities of color. Programs include:

- Employment Services provide capacity to the Economic Opportunity Program (EOP) - an existing network of nine nonprofit employment providers - to connect individuals and families to career-track employment services, housing resources, and community-based support. Participants who are survivors of domestic violence and/or who are eligible for Supplemental Nutrition Assistance Program (SNAP) are prioritized.
- Youth Employment Services provide capacity to Homeless Youth Continuum (HYC) 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, and expanded one-stop WorkSource Portland Metro employment services. Resources are targeted to serve young adults of color, many of whom are exiting the corrections system.

The program offer also provides economic opportunity to people experiencing or at risk of homelessness, while at the same time addressing community needs for trash collection, public space maintenance services and the provision of mobile hygiene services. Programs offer entry-level opportunities to earn income, develop various work skills and establish a recent work history. The programs are operated by non-profit organizations and provide services throughout Multnomah County.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals receiving employment services and supports	1085	750	900	650*
Outcome	Number of employment placements	527	400	500	360*
Outcome	Number of households receiving rent assistance or eviction prevention	236	225	225	225
Outcome	BIPOC participate in program at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*FY 2024 Offer was reduced due to decreased funding.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$4,412,580	\$1,982,448	\$2,211,790
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,412,580</b>	<b>\$1,982,448</b>	<b>\$2,211,790</b>
<b>Program Total:</b>	<b>\$4,412,580</b>		<b>\$4,194,238</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,852,465	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$434,005
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,852,465</b>	<b>\$0</b>	<b>\$434,005</b>

Explanation of Revenues

\$1,777,785 of the Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$1,927,380 in one time only County General Fund and \$434,005 in carryover Supportive Housing Services funding.

Significant Program Changes

Last Year this program was: FY 2023: 30600A Employment Programs

In FY 2023, employment programming was expanded, and distributed across two program offers, 30600A - Employment Programs and 30600B - Employment Programs - Metro Measure Expansion.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

**Executive Summary**

For those experiencing unsheltered homelessness, access to basic hygiene services is one of the most challenging needs to meet. The importance of addressing basic hygiene needs was made even more apparent during the COVID-19 pandemic because of the importance of hand washing and basic sanitation to prevent the spread of the disease. This program offer continues FY 2023 investments in basic hygiene services for the unsheltered population, with a focus on increasing access to hygiene services in areas currently most underserved with those resources.

**Program Description**

Gaining access to a bathroom, a place to wash up, and a shower have long been among the most challenging aspects of living unsheltered in the community. The COVID-19 pandemic both made access to basic hygiene services for the unsheltered population more critical than ever and made finding those services even more difficult. Public buildings that offer places to go to the bathroom, wash up, and shower closed, including community centers, libraries, and office buildings. Even certain day programs specifically designed to provide hygiene access for the unsheltered population were forced to close or significantly reduce their capacity. While a number of critical steps were taken to address this need for hygiene access, including county-wide distribution of hygiene supplies, the placement of dozens of hand washing stations, and more than 100 new portable bathrooms, additional investments are needed, especially in underserved areas of the County.

This program offer will fund operational capacity of basic hygiene services for people living unsheltered. The precise nature and location of those services will be determined in consultation with the City of Portland and the East County municipalities, as well as with outreach providers and other community stakeholders. The Joint Office of Homeless Services (JOHS) expects the funding will complement and expand county-wide the City of Portland's ongoing project to offer portable restrooms and hygiene stations geographically distributed to identified areas of concentrated unmet need, as well as shower access through the use of site-based and mobile shower services. As the traditional spaces offering hygiene access to those living outside reopen, the JOHS will continue to reassess these investments and how best to improve access to hygiene services on an ongoing basis

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Hygiene access points created/expanded	N/A	25	25	25
Outcome	Uses of expanded hygiene services	N/A	10,000	10,000	10,000

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$750,000	\$0	\$750,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$750,000</b>	<b>\$0</b>	<b>\$750,000</b>
<b>Program Total:</b>	<b>\$750,000</b>		<b>\$750,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$750,000	\$0	\$750,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$750,000</b>	<b>\$0</b>	<b>\$750,000</b>

Explanation of Revenues

\$750,000 American Rescue Plan (ARP) Direct County Funding

Significant Program Changes

**Last Year this program was:** FY 2023: 30902 ARP - COVID-19 Emergency Response - Expanded Hygiene Access

This program addresses the County's priority of Crisis Response & Community Recovery.  
 This program provides core services supporting people in our care.

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

**Executive Summary**

In FY 2022, as an element of the emergency response to COVID-19, in partnership with the City of Portland, three emergency outdoor shelters were established for people experiencing homelessness. As part of the City's FY 2023 budgeting process, the City allocated American Rescue Plan (ARP) funds for the continuation of operations at two of the existing emergency outdoor shelter sites, as well as additional Safe Rest Village sites, as part of the broader COVID-19 homeless services recovery strategy.

**Program Description**

In March 2020, following public health guidance, the Joint Office of Homeless Services took immediate steps to limit the spread of COVID-19 within the population of people experiencing homelessness and otherwise mitigate impacts of the pandemic on those experiencing, or at risk of, homelessness. In FY 2021, the City of Portland and Multnomah County worked quickly to expand non-congregate shelter options for people experiencing homelessness. As part of this response, the jurisdictions created three emergency outdoor shelters to keep people experiencing homelessness safe and socially distant. In FY 2022, two of the three sites have been relocated to longer-term sites, and one was decommissioned. Starting in FY 2022, the sites became the operational responsibility of a Joint Office contractor. The sites are each outfitted with prefabricated, insulated hard wall pallet shelters with beds, climate controls, safety features, and electricity, providing approximately 73 residents each night with food, clean water, sanitation, social service navigation, mental health supports, and more. One of the existing sites was designed to specifically serve members of the LGBTQIA2S+ community and another is prioritized to the needs of Black, Indigenous and People of Color (BIPOC).

In FY 2024, City funds will be used by the Joint Office to continue operations of the sleeping pods at the Queer Affinity and BIPOC outdoor shelters. This Program Offer also includes funding to support staff capacity in the Joint Office of Homeless Services to continue work on the expansion of alternative shelter options.

In addition to funding the continued operations of these two existing outdoor physical distancing shelters, this program offer funds the operations of the planned six Safe Rest Villages with up to 320 sleeping pods. These physical distancing shelters will be operated by JOHS contractors and offer immediate safety off the streets for people living in encampments. Each Safe Rest Village (SRV) will provide individual sleeping structures, common area structures for gathering, eating, and hygiene, and provide wrap-around support services to assist people to transition to permanent housing. There will be a particular focus on connecting people to needed behavioral health resources.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of emergency alternative shelter beds	N/A	393	273	393
Outcome	Overrepresented BIPOC and LGBTQIA2S+ supported at a rate as high or higher than percent of population	Yes	Yes	Yes	Yes
Outcome	Number of people sheltered in existing outdoor physical distancing shelters*	153	100	300	780

**Performance Measures Descriptions**

\*These sites are transitional in nature, anticipate longer stays, and the ongoing effects of the pandemic limit anticipated move-outs to housing

## Legal / Contractual Obligation

The Joint Office of Homeless Services is authorized by an Intergovernmental Agreement between Multnomah County and the City of Portland.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$538,000	\$0	\$406,412
Contractual Services	\$0	\$3,173,333	\$0	\$14,458,500
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,711,333</b>	<b>\$0</b>	<b>\$14,864,912</b>
<b>Program Total:</b>	<b>\$3,711,333</b>		<b>\$14,864,912</b>	
<b>Program FTE</b>	0.00	4.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$3,711,333	\$0	\$14,864,912
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,711,333</b>	<b>\$0</b>	<b>\$14,864,912</b>

## Explanation of Revenues

\$14,864,912 American Rescue Plan (ARP) funding through the City of Portland

## Significant Program Changes

Last Year this program was: FY 2023: 30905 ARP - COVID-19 Emergency Response - Outdoor Physical Distancing

**Department:** Joint Office of Homeless Services      **Program Contact:** Joshua Bates

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

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) has prioritized a range of effective strategies in order to reduce homelessness through the allocation of emergency rental assistance through a coalition of smaller, primarily culturally specific, community-based organizations that have helped to deliver eviction prevention programming during the COVID-19 pandemic. With American Rescue Plan funding, this program offer funds staffing, housing, and rental assistance. The offer prioritizes Black, Indigenous, and People of Color (BIPOC) who are already overrepresented within the population of people experiencing homelessness.

### Program Description

This program offer funds culturally specific community based organizations to maintain their critical role in creating access for BIPOC households to vital emergency rental assistance resources. A portion of the funding in this program offer will also be available for use as direct rental assistance. Focusing this funding on an expanded partner network of community based organizations, especially culturally specific organizations, maintains the network of service providers and culturally specific service offerings in the County.

This program offer funds staffing at culturally specific community based organizations to support with housing placements and rent assistance. These funding streams are typically larger, but too restrictive to allow community based organizations, including culturally specific providers, to create the capacity that they need to allocate the funds. The resources in this offer allow the Joint Office of Homeless Services and the Department of County Human Services to address these gaps and maximize the amount of outside rental assistance that the County is able to distribute through community based organizations serving BIPOC and other marginalized and hard to reach communities.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of culturally specific organizations supported to distribute emergency rental assistance funds	7	15	10	15
Outcome	Number of households prevented from losing their housing due to COVID-19	841	400	600	400
Outcome	BIPOC households served at rates as high or higher than their percentage of eligible households	Yes	Yes	Yes	Yes

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$3,611,270
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,611,270</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$3,611,270</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$3,611,270
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,611,270</b>

Explanation of Revenues

\$3,611,270 American Rescue Plan (ARP) Direct County Funding

Significant Program Changes

Last Year this program was:

This program addresses the County's priority of Crisis Response & Community Recovery.

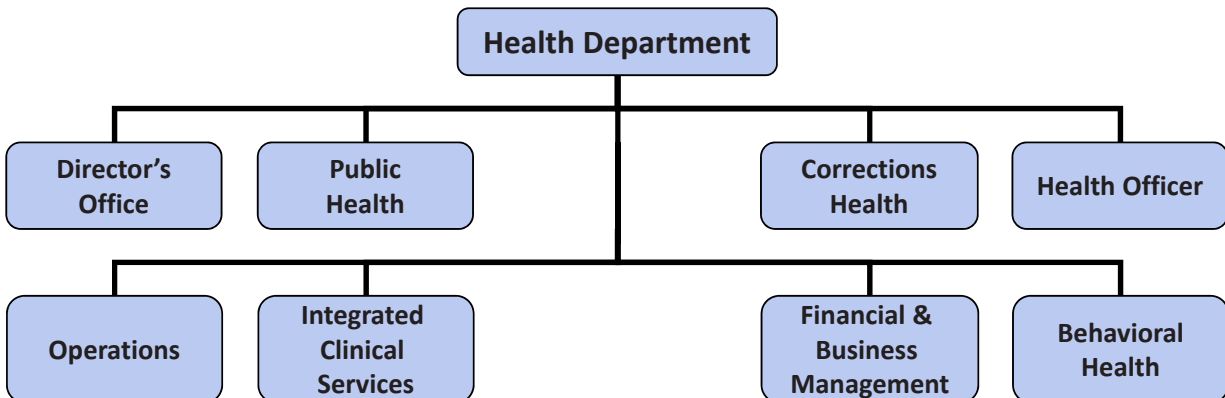
### Department Overview

The Health Department’s work is anchored in our vision of “thriving communities that nurture the health and resilience of all.” Our mission affirms, “We work with communities to advance health equity, protect the most vulnerable, and promote health and wellness for everyone.” The Health Department champions the use of an equity lens in addressing the leading causes of death in our community. We monitor, analyze and respond to the critical health and environmental issues and emergencies that impact our communities, our clients and their families, and our diverse staff. We provide essential services to people across the lifespan, from newborns to elders.

The COVID-19 pandemic fundamentally altered the way we do business, resulting in a more coordinated, department-wide approach to meeting community needs. The Health Department brings this new perspective to bear on its core mission to: work as one department to effectively manage disease outbreaks; promote healthy and safe behaviors; track the safety of our air, land and water; disseminate critical health alerts during public health emergencies and severe weather incidents; provide high quality medical and behavioral health care for individuals housed in the County’s jails; ensure the accessibility of trauma-informed behavioral health crisis services, early childhood services, school-based mental health and suicide prevention services; manage specialized behavioral health care for people experiencing severe and complex mental illness; coordinate substance use disorder services from harm reduction to treatment, recovery, and support; deliver high quality and comprehensive primary care, dental care, and pharmacy services through the Community Health Center; elevate community-driven priorities and solutions to complex community health issues; and partner in the development of policies and standards that address existing and emerging community health challenges.

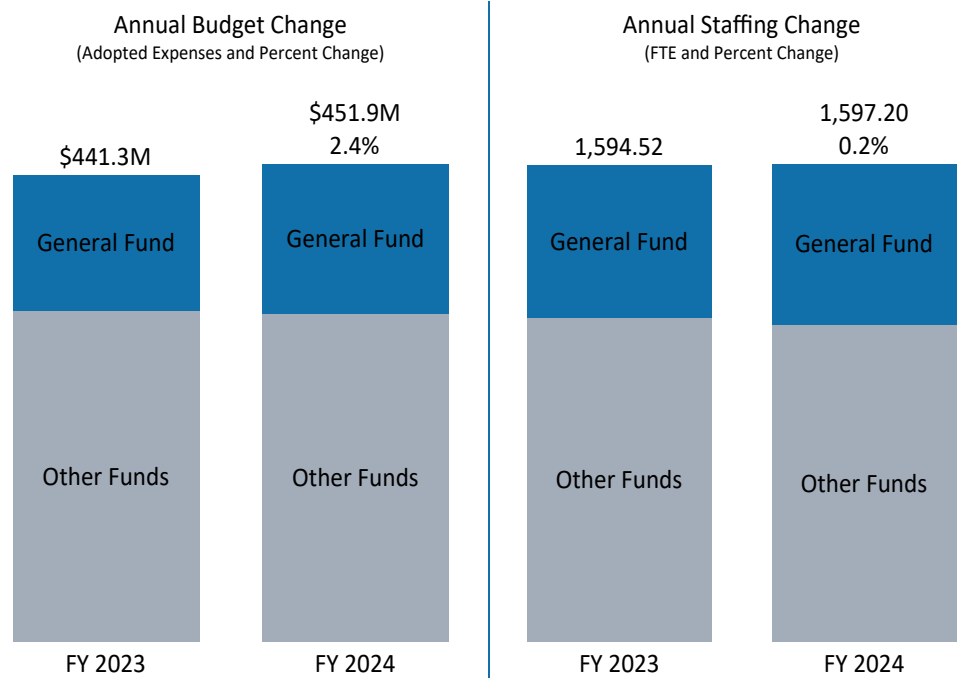
The department’s strategic priorities center on long-term recovery efforts based on the needs of our communities and employees. Strategic priorities include:

- Enhancing our focus on racial and health equity;
- Strengthening our role as the Local Public Health Authority to define and address community challenges and needs through a social justice, equity, and consumer lens;
- Transforming the field of behavioral health and wellness;
- Reinforcing our status as a highly desirable employer;
- Enhancing foundational infrastructure for core services;
- Aligning and coordinating services and strategy across the department in a unified approach, such as with our Opioid & Illicit Substance Response work.



### Budget Overview

The FY 2024 Health Department budget is \$451.9 million, a \$10.6 million (2.4%) increase from the FY 2023 Adopted budget. The General Fund accounts for 31.3% of the total budget, and General Fund expenses increased by \$13.6 million (10.7%). Other Funds (besides American Rescue Plan) increased by \$32.2 million (11.8%). American Rescue Plan and COVID-19 funding decreased by \$35.3 million.



The largest investment of new ongoing General Fund in FY 2024 was an additional \$2.6 million in the Behavioral Health Resource Center (BHRC) that opened in mid-FY 2023. The total BHRC budget (40105A/B/C) includes \$5.0 million of General Fund, along with \$4.0 million in Other Funds. The budget also includes \$1.2 million to augment staffing in Corrections Health to prevent the heavy reliance on overtime (40107). Another \$2.0 million of opioid settlement revenue in the General Fund is funding the Behavioral Health Emergency Coordinating Network (BHECN) (40108). Other new ongoing General Fund programs include \$125,000 for Medical Examiner State Backfill (40052B) and \$280,000 of opioid settlement revenue for Harm Reduction (40061B).

### Budget Overview (continued)

The budget also includes the following one-time-only General Fund investments:

- Behavioral Health Finance Billing (40040D) \$228,142
- Behavioral Health - Continuing COVID Response (40109) \$586,793
- Old Town Inreach (40069B) \$1,131,429
- Gun Violence Impacted Families Behavioral Health Team (40110) \$1,229,587
- Culturally Specific Mental Health Workforce Development (40111) \$154,286
- Bridge Mental Health Services for Youth (40069C) \$150,000

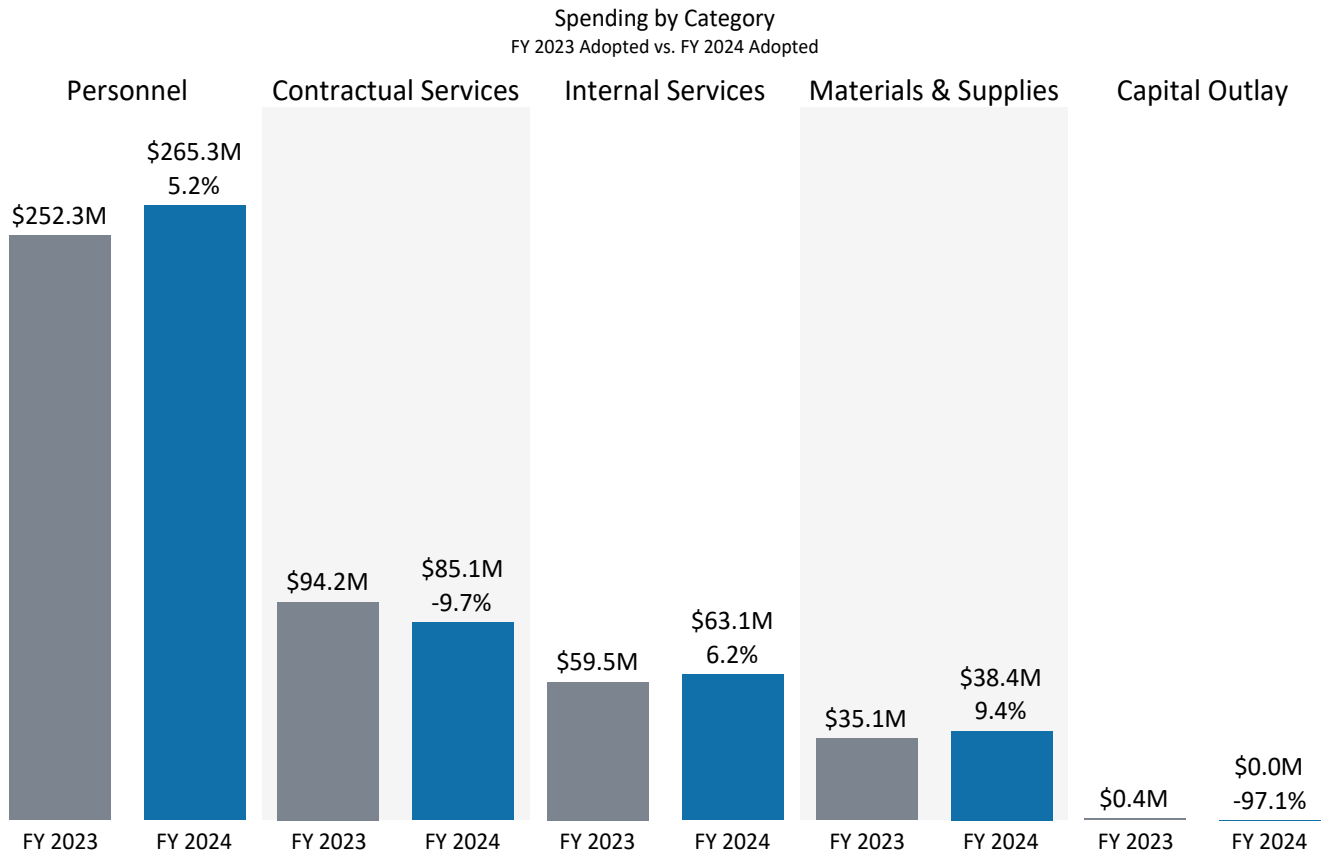
A list of one-time-only programs can be found in the Budget Director's Message.

Budget Trends	FY 2022	FY 2023	FY 2023	FY 2024	Difference
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	1,460.75	1,607.52	1,594.52	1,597.20	2.68
Personnel Services	\$204,197,197	\$212,532,142	\$252,271,344	\$265,314,609	\$13,043,265
Contractual Services	82,871,724	95,819,116	94,183,917	85,079,858	(9,104,059)
Materials & Supplies	31,038,139	32,702,312	35,063,708	38,373,921	3,310,213
Internal Services	51,874,300	60,055,776	59,454,363	63,130,433	3,676,070
Capital Outlay	<u>118,679</u>	<u>1,411,837</u>	<u>350,000</u>	<u>10,000</u>	<u>(340,000)</u>
<b>Total Costs</b>	<b>\$370,100,039</b>	<b>\$402,521,183</b>	<b>\$441,323,332</b>	<b>\$451,908,821</b>	<b>\$10,585,489</b>

Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies, and unappropriated balances.

### Budget Overview (continued)

The chart below provides a breakdown of the budget's expense categories from FY 2023 to FY 2024. Personnel services is the largest component of the Health Department's budget, while Materials & Supplies had the largest percent increase between FY 2023 and FY 2024.



## Successes and Challenges

Despite the ongoing challenges of the evolving COVID-19 pandemic, the Health Department achieved significant accomplishments in FY 2023.

- As disparate impacts to our BIPOC communities continue, our commitment to lead with race is reflected in resource allocations and activities that have the greatest impact on health disparities experienced in BIPOC communities across the full array of health services and programs.
- Public Health, Corrections Health and the Community Health Center rapidly mobilized an effective emergency response to the fast-moving mpox outbreak. Using lessons learned from the COVID-19 pandemic, the department tracked cases, provided medical care and support, provided up-to-date information tailored to and influenced by impacted communities, offered regular information to the public via the media and to date has provided more than 5,100 vaccinations to almost 4,000 individuals.
- Our Community Immunization Program along with the Community Health Center and Corrections Health continued to provide COVID-19 vaccinations and boosters, and seasonal flu shots, through regularly scheduled community events and health sites. These programs also provide COVID-delayed childhood vaccinations to children and families through a series of community catch-up events.
- Our Community Health Center continued to provide quality, low-barrier medical, dental and pharmacy services to 56,000 people -- 60% BIPOC, 40% best served in a language other than English, and 95% with incomes under 200% of Federal Poverty Level (FPL).
- The Finance and Business Management team distributed nearly \$3 million in client assistance gift cards to help individuals and families impacted by COVID-19 meet basic household needs.
- The COVID Call Center fielded 22,000 calls and emails in the first six months of FY 2023 with requests for information, vaccination appointments, and wraparound support for COVID-19, other respiratory illnesses and mpox. The Call Center was integral to the department's mpox response and mpox vaccination effort.
- The Behavioral Health Division opened the Behavioral Health Resource Center, a day center offering basic services and providing peer-led mental health and substance use services to more than 1,000 people each week who are living outside.
- Corrections Health collaborated with Behavioral Health to develop a system of coordinated care for Adults in Custody returning from Oregon State Hospital as a result of the Mosman order. The division also increased partner coordination of transition services. In December 2022 alone the Transition Services Program managed 247 referrals, and released 33 individuals with a plan for continued management of behavioral and physical health issues.

## Successes and Challenges (continued)

- The Health Department supported the Multnomah County Board in passing a ban on the sale of flavored tobacco products including menthol. This ban has been a long-standing, community-driven public health priority.

No one could have predicted the challenges we faced as a lead agency in the continuing COVID-19 response in the midst of persistent, highly destructive racism. Additionally, the unexpected mpox outbreak response and an increase in extreme weather events strained department resources. Throughout, we have remained agile, applying lessons learned and shifting our approaches to best address ongoing and emergent community needs. Our principal challenge has been maintaining an adequate workforce to carry out our mission. Other challenges include:

- Management of ever-changing and unique public health challenges, including unprecedented labor shortages and extreme weather events.
- Significant safety challenges for our employees working in the field, at departmental worksites, and at temporary vaccine and testing sites.
- The need to redesign HR practices as a result of the significant increase in the number of recruitments and the high turnover.
- Continued transition to teleworking or hybrid work.
- Heightened levels of stress and trauma for BIPOC staff and our client community, all disproportionately impacted by the pandemic and the impacts of continued racial violence.

### COVID-19 & American Rescue Plan

The Health Department was the County's lead for all COVID-19 response activities. In FY 2023, the Health Department began a complex transition from COVID-19 response to recovery. In FY 2024, we will continue to wrap up our pandemic response and refocus on our core Health Department services. The infrastructure built during the pandemic and our collective learnings will prepare us for new emergencies and ongoing communicable disease functions. The FY 2024 budget demonstrates the department's significantly declining reliance on American Rescue Plan (ARP) funds. In FY 2024, all Health Department divisions are shifting to management of the ongoing, long-term impacts of the pandemic as well as refocusing on the core services of the Health Department.

Key pandemic-related activities included: facility-specific outbreak response, testing and vaccination in clinical, community and corrections settings, County staff vaccination, crisis counseling, culturally-specific wrap-around supports, and data analysis. As the pandemic evolved and national, state and local case numbers began to subside, the department pivoted from an emergency response to long-term disease management efforts. In FY 2023, the ramp down of most public health interventions for COVID-19 – testing, vaccination, isolation and quarantine, wrap-around support – will continue. These services will fully ramp down by mid-year or be pivoted to address needs associated with other ongoing communicable diseases and respiratory illnesses, such as mpox, RSV and influenza.

In FY 2024, the department will continue its transition from pandemic response to ongoing support of core Health Department services and planning for new emergencies and continuing disease outbreak functions.

It will be many years before the full impact of the COVID-19 pandemic is known. However, in the last two years the physical, psychological and economic impacts of the pandemic have clearly taken a toll on communities already sagging under the weight of health disparities. Postponed care for chronic diseases, increased mental health challenges, complex and compounded substance use, economic stress and increased community violence are just some of the pandemic effects that we are already seeing. Demand for Health Department core services is as high now as ever and continues to grow.

In this year's budget, American Rescue Plan (ARP) requests were kept narrow and directed toward projects or programs that can be delivered in the short term.



## Diversity, Equity, and Inclusion

The Health Department aspires to achieve a vision of thriving communities that nurture the health and resilience of all. Our mission is to work with communities to advance health equity, protect the most vulnerable, and promote health and wellness for everyone. Our values speak to how we engage with our diverse communities and one another. They set the intention for the organizational culture we wish to create.

### Health Department Values

- **Compassion and Care:** We treat all with kindness, dignity and respect as we seek to uplift one another's humanity.
- **Racial Equity:** We acknowledge that racism negatively affects everyone in our county, and we commit to accelerating our progress in eliminating racial inequities.
- **Integrity:** In protecting our community's health, we lead with conviction, honor our commitments, and deliver on our promises.
- **Empowerment:** We work collaboratively to ensure that our policies and programs amplify people's voices and uplift community-driven solutions.
- **Connection:** Our success depends on the diversity, brilliance, and care of one another. So that employees reach their full potential, we further environments that instill trust, promote safety and foster belonging.

### Workforce Equity Strategic Plan (WESP)

The Health Department uses an equity and inclusion lens to create an equitable workplace and deliver equitable services. The Workforce Equity Strategic Plan (WESP) is one of the primary vehicles for making progress toward the County's and department's internal equity goals.

The WESP aims to support an organizational culture of safety, trust, and belonging. This foundation is the basis for equity work in the areas of promotion and professional development, employee retention, and recruitment and workforce development. By working along all avenues of the employee experience, we can attract, cultivate, and retain a dynamic, diverse workforce to best serve the needs of Multnomah County communities.

The Health Department carries out WESP work through our Mentoring Matters program, our commitment to diverse interviewing panels, our active review of our class compensation to ensure positions are appropriately classed for the work required, and our current review of position descriptions. One important expression of our continuing focus on WESP goals is our ongoing equity training series.

### Equity-Centered Budgeting and the Community Budget Advisory Committee (CBAC)

Equity considerations are at the heart of all Health Department work, not just in budgeting. From program development and ongoing community engagement to hiring practices and vendor selection, we strive to embed equity in all our processes. However, equity in department budgeting is key to ensuring our equity goals are being promoted in both our staffing and service decisions.

### Diversity, Equity, and Inclusion (continued)

In preparing the FY 2024 budget, department leaders were directed to submit budgets that identified specific equity impacts of any reductions or reallocations of program offers. In addition, leaders were asked to provide mitigation strategies for those reductions/reallocations that would reduce their impact on our Black, Indigenous and other People of Color (BIPOC) communities.

Division leaders used the following questions to guide their budgeting:

- How does this change in spending impact our ability to achieve our racial equity goals?
- Does a shift in spending disproportionately benefit or hurt specific groups in our internal and external/public communities, including staff?
- What steps have we taken to ensure that the proposed budget decision does not cause disproportionate harm to marginalized groups in our community, or perpetuate existing racial inequities?
- Do the staff or leaders involved in the decision-making process provide diverse racial perspectives?
- Might the proposed spending change have negative long-term impacts on communities who have been hit hardest by the COVID-19 pandemic?
- How can the department/division budget be balanced in a way that protects efforts to work towards racial equity?

In addition to the work being done by division leaders, the Health Department's Community Budget Advisory Committee (CBAC) is active throughout the year. Starting in the summer, the Committee meets with leadership from each division who are asked to describe how their functions and services support the Department's mission, vision and values.

The CBAC is responsible for making recommendations to the Board of County Commissioners on the priority of out of target program offers. Each out of target program offer is evaluated by the CBAC using the following criteria:

- Alignment with the CBAC's values which include advancing racial justice
- Impact on communities who experience health disparities, including BIPOC communities

Through input from divisional leaders, our frontline program staff, and our CBAC we ensure that we identify any potential equity impacts of our budgeting decisions. We prioritize areas of the greatest need and seek to fill identified gaps in our regional public health systems for the benefit of Multnomah County residents.

#### **Health Department Office of Equity and Inclusion**

In general, the Department's Office of Equity and Inclusion (OEI) provides key leadership and guidance as we continually strengthen our accountability around equity issues. This work includes providing budget input, policy

### Diversity, Equity, and Inclusion (continued)

leadership, systematic data review to monitor equity impacts, and guidance to departmental leadership on best practices for integrating equity into decision making. They provide education, facilitation, coaching and technical support across the department. The Equity Manager has regular contact with senior leadership as a member of the Department Leadership Team.

In FY 2023, the Office of Equity and Inclusion (OEI) was moved into the Health Department Director's office, with the Equity Manager reporting directly to the Department Director. When the Health Department's Equity Manager accepted a leadership role in another County department, Health Department leadership initiated a national search for our new Equity Manager.

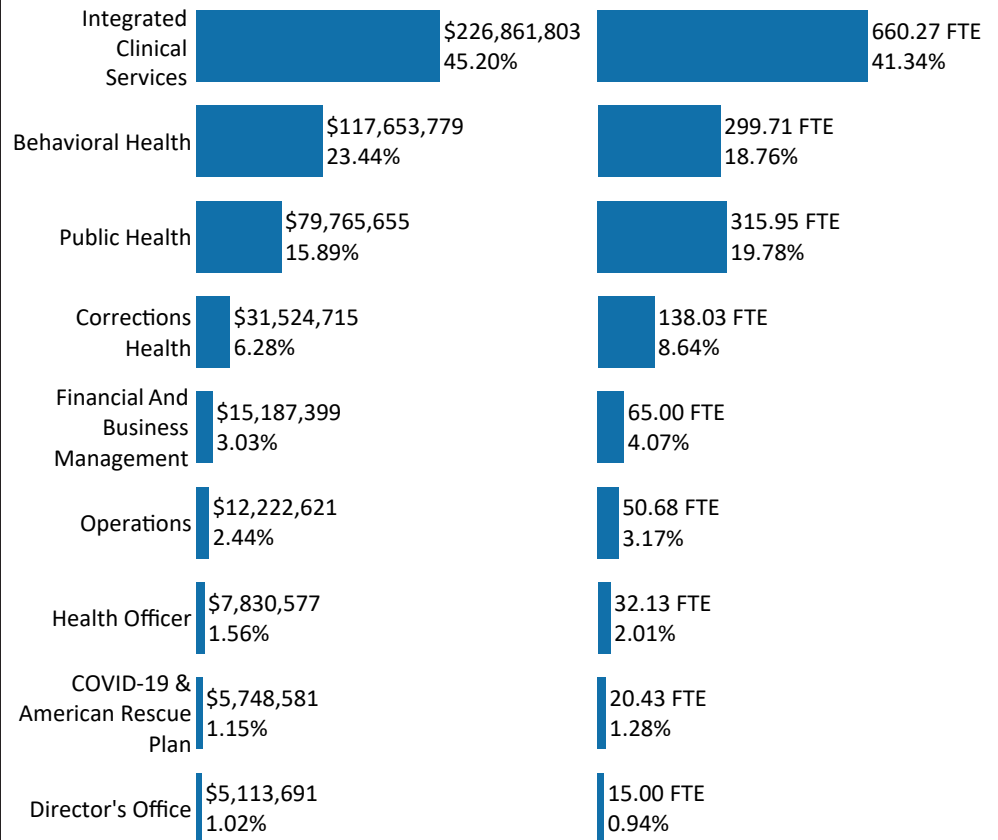
The Health Department's Equity Manager will lead the implementation of OEI's strategic goals for FY 2022 through FY 2024, which include:

- Accelerate culture change efforts to support our organization's recovery from the trauma and intensity of the COVID-19 response and help institute healthy, inclusive and equitable work environments for employees across the department.
- Ensure the Health Department implements recommendations prioritized in the Workforce Equity Strategic Plan (WESP).
- Build capacity among Health Department managers and supervisors to lead inclusively with race.

### Budget by Division

Division Name	FY 2024 General Fund	Other Funds	Total Division Cost	Total FTE
Director's Office	\$5,113,691	\$0	\$5,113,691	15.00
Operations	11,932,026	290,595	12,222,621	50.68
Financial And Business Management	15,187,399	0	15,187,399	65.00
Health Officer	5,846,035	1,984,542	7,830,577	32.13
Public Health	34,403,472	45,362,183	79,765,655	315.95
Integrated Clinical Services	0	226,861,803	226,861,803	660.27
Corrections Health	31,524,715	0	31,524,715	138.03
Behavioral Health	37,444,499	80,209,280	117,653,779	299.71
COVID-19 & American Rescue Plan	0	5,748,581	5,748,581	20.43
<b>Total Health Department</b>	<b>\$141,451,837</b>	<b>\$360,456,984</b>	<b>\$501,908,821</b>	<b>1,597.20</b>

*Includes cash transfers, contingencies and unappropriated balances*



### Director's Office

The Health Department's Director's Office provides executive leadership and strategic direction in service to the department's mission, vision and values. The Director's Office works with elected leaders, stakeholders, health system partners, community members and staff to ensure that department services advance health equity and promote health and wellness for everyone in Multnomah County.

The Strategy and Grant Development Team resides in the Director's Office and provides project management support to the Department to identify, secure and sustain resources to support internal and external capacity to address community needs. The team's approach includes equity-based and data driven program development that's focused on building partnerships and reducing disparities in BIPOC and other communities impacted by health, social, and economic inequities.

The Director's Office is responsible for ensuring that the Department meets its strategic objectives while fostering a culture that supports a diverse and qualified workforce. 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 prevention and population-based community health services and outcomes. The Director also collaborates with a wide range of local non-profit organizations, health system partners, and local agencies to provide safety-net health care and behavioral health care services to improve public health across the region.

The Director's Office convenes the Department Leadership Team to provide strategic direction, solve shared problems, ensure organizational alignment, and assume collective responsibility for the Department's performance in service to its mission.

### Significant Changes

With the recent creation of an Operations Division, the Director's Office, Human Resources and Finance and Business Management divisions have undergone a restructuring. The Director's Office now includes the Director and the Office of Diversity and Equity. The new Operations Division includes Human Resources and the Health Data and Analytic Team.

This new structure and leadership capacity at the operational level allows the Director to focus on large-scale initiatives such as the Behavioral Health Resource Center, the Behavioral Health Emergency Coordination Network, Gun Violence Prevention, as well as helping develop an overarching strategic plan featuring pillars of Public and Population Health, Behavioral Health, Workforce Development, Infrastructure, and Racial Equity.

### Operations

The Health Department Operations Division provides foundational support to the entire Health Department with a focus on timely hiring, enhancing employee experience, increasing employee retention, mapping quality outcomes, increases in policy compliance, enhancing privacy and HIPAA protections, ensuring meaningful messaging to diverse communities, and heightening readiness for emergencies.

Human Resources provides expertise, leadership, consultation for hiring, transfers, and promotions. This team supports all staff through the life-cycle of their tenure with the department in terms of pay, benefits, and other aspects of the employee experience. The Learning and Development team is responsible for professional development opportunities, mentoring support, and leadership development and coordination of training across the department.

The Communications and Marketing team is responsible for crafting and distributing essential health information to diverse communities across Multnomah County through campaigns and messaging including social media, print mailers, highly visible public service campaigns, radio announcements, and in brochures and guides designed to reach Multnomah County's many culturally specific communities. They also offer a suite of services to other divisions including graphic design, branding, website management, social media management, internal communications, and video productions.

The division's centralized and strategic data and quality programs provide data analytics, data governance, and policy administration. The division is also responsible for planning for continuity of operations during any emergency to ensure the department can meet its mission.

### Significant Changes

This new division is under the consolidated leadership of the Deputy Director of Operations, a position added in FY 2023, with a goal of ensuring that staff across the Department have the resources, information, and support they need to effectively serve the community.

## Financial & Business Management

Finance and business management services are critical to the department's ability to achieve its mission. Its teams form the critical infrastructure required to effectively and responsibly manage the department's \$450+ million budget. Services include accounting, financial reporting, budget development and monitoring, compliance, medical billing, procurement, and contract services. Teams collaborate with the Department of County Management, County's Budget Office, the County CFO's Office, Central Finance, the County Attorney and our internal services providers in the Department of County Assets. The division manages more than 15,000 invoices, 250,000 medical claims, 700 contract and procurement actions. More than 150 federal and state grants annually are paid, submitted, and executed.

The Financial and Business Management division is committed to centering equity in policy and practice and in service to the Health Department's value of racial equity and mission to reduce health disparities. The division will continually invest time and resources into identifying and then dismantling internal and external structures that contribute to inequity, including the culture of white supremacy. We pride ourselves on our ability to recruit, retain and promote a diverse, inclusive, and high-performing workforce. The division is working to advance the objectives outlined in the Workforce Equity Strategic Plan by committing resources for an equity and inclusion committee and operationalizing its policy recommendations. The division is committed to the creation of a culture of safety, trust and belonging for all Health Department employees.

## Significant Changes

In FY 2023 teams across the Financial and Business Management Division (FBM) continued to experience increased workloads due to the department's pandemic recovery efforts. An influx of funding with complex requirements increased the need for additional compliance monitoring, audit preparation and response, new vendor relationships, increased invoice processing, new and revised contracts, changes to medical billing requirements, additional financial reporting, and cross-departmental and cross-County coordination. Although the public health emergency declaration expired, the division's workload will remain high in FY 2024. COVID-19 related activities include reconciliations, close-out, audit preparation and response, grant reporting, and the revision of contract terms and conditions.

During this last year the billing team collaborated with clinical services across the department to implement Good Faith Estimates (GFE) in alignment with Federal requirements. GFEs provide the total expected cost of any health care item and service provided in our clinics and protect our clients against surprise medical bills.

The Financial and Business Management Division remains committed to meaningful and impactful engagement with the community. To reduce barriers in the procurement and contracting processes the division is creating virtual and in-person training and materials for our internal and external partners. Technical assistance will provide staff and contracted organizations with tools they need to meet fiscal compliance requirements.

### Health Officer

The Health Officer Division includes the regional Health Officer, Medical Examiner, Emergency Medical Services (EMS), and Public Health Emergency Preparedness programs. These programs provide vital services 24 hours per day, 7 days per week, 365 days per year. The regional Health Officer program provides statutorily required public health physician consultation, technical direction, and leadership to support public health activities across the three Portland metro region counties. Through a combination of EMS franchise fees and County General Fund, the regional Multnomah County Health Officer supervises four health officers and serves as the physician link to health systems and underserved communities.

The Medical Examiner's Office (MEO) operates 24/7/365 providing death investigations to determine the cause and manner for approximately 1 in 3 deaths in Multnomah County. Investigations are required by statute for deaths including homicides, suicides, overdoses, and accidental deaths.

The Emergency Medical Services (EMS) program includes EMS Administration, the EMS Medical Director and the Tri-County 911 (TC911) social worker intensive case management program for high utilizers of 911 and emergency departments. EMS services are almost exclusively funded by franchise fees paid by American Medical Response, with TC911 drawing nearly all of its funding from a Health Share of Oregon grant.

The Public Health Emergency Preparedness (PHEP) program is funded by State grants. The program works to improve response readiness by maintaining emergency plans, operations, and Public Health response capabilities. The staff of this program are also responsible for management of the Medical Reserve Corp (MRC) volunteer program. The MRC organizes local volunteers who hold appropriate medical licenses or certifications to donate their time and expertise to prepare for and respond to emergencies and support ongoing preparedness initiatives.

The Health Officer Division's programs are critical to the County's public health emergency response. Our functions support the entire public health system to respond to all types of crises, including respiratory virus surges, new threats such as mpox, or the current epidemic levels of substance use disorder and fatal overdose.

### Significant Changes

The Medical Examiner program continues to adjust to a very high caseload as the number of deaths requiring investigation continues to increase year over year. This increase leads to increased body storage costs and a need for additional administrative support. Additionally, the State Medical Examiner recently announced that the State will no longer oversee the majority of routine death certification. As of July 1, 2023 a Physician within the Health Officer division will become responsible for signing death certificates corresponding to record review and death investigation results. This change will significantly impact the Health Officer division. This budget makes an initial investment in addressing this need as the County continues to assess the impact (40052B).



### Public Health

The Public Health Division is the local public health authority (LPHA) for Multnomah County. It is responsible for protecting the health of the public, including through mandated functions. Public Health coordinates with the County Board of Health (BOH) to identify pressing public health issues, particularly in BIPOC communities, and set health policy and system changes that address them. Priority issues include racial and ethnic disparities in leading causes of preventable death, disease, illness, and injury; economic and social conditions; and COVID-19 recovery. Public Health works from a foundation of leading with race in partnership with community across the following program areas:

- Communicable Disease Services, which prevents the spread of reportable contagious diseases, through epidemiology, investigation, harm reduction, partnerships, and clinical and immunization services.
- Environmental Health, which protects the safety of residents by inspecting licensed facilities such as restaurants and pools; controlling disease vectors; and addressing lead poisoning, air and climate quality, and neighborhood/transportation design.
- Prevention & Health Promotion, which improves population health through partnerships; technical assistance; and culturally specific policies and strategies. Initiatives are chronic disease and violence prevention; substance misuse prevention; tobacco control and prevention; adolescent health; and parent, child and family health.

Public Health's COVID-19 work was and continues to be coordinated with other Department Divisions, County Departments, the BOH, and community stakeholders over the last three years. Toward the end of FY 2023 and into FY 2024 there will be a more formal ramp down of COVID-19 specific response activities. Ongoing COVID-19 activities include epidemiology, outbreak response in high risk settings, targeted vaccination, and culturally specific communication and outreach for impacted community members.

### Significant Changes

Public Health is recovering from the years of responding to the acute phase of the COVID-19 pandemic. In FY 2024 we will be refocusing efforts on domains that have been further aggravated by the global pandemic through a modernized public health lens. This includes addressing the leading causes of death and years of life lost through a health equity lens working with health data and community voice. Pressing areas in this budget include addressing communicable diseases that have increased as a result of the pandemic, addressing the increase and complexity of drug overdoses, addressing the social determinants of health that drive chronic disease disparities, addressing climate change and climate adaptation needs, and maintaining our culturally-specific liaison and coalition work that crosses all of our program areas.

Non COVID-19 related changes include: Implementation of some sizable grant investments (OHA Public Health Modernization and a large CDC Infrastructure Grant) to support work across the division and among community partners. Also, Community Immunization Program has two program offers (40199B, 40010C); and Parent, Child, and Family Health is implementing Epic Electronic Health Record across programs (40096B, 40097). This budget also includes a one-time-only ARPA funded Public Health Approach to Gun Violence (40199X).

### Integrated Clinical Services (ICS)

Multnomah County's Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Together, our eight primary care clinics, seven dental clinics, nine student health centers, seven pharmacies, and laboratory services serve more than 56,000 unique clients per year, with a focus on people who otherwise have limited access to health care. Health Center services include highly specified care for persons living with HIV, as well as for immigrant and refugee populations. As a Federally Qualified Health Center, the program must follow Federal Health Resources and Services Administration (HRSA) regulatory requirements and specific governance, financial, operational, and clinical quality policies.

The Health Center Program welcomes all persons, regardless of insurance status, ability to pay, or documentation status. Our Health Center prioritizes culturally and linguistically appropriate care, supporting clients in a way that works for them. Sixty percent of our clients identify as people of color, and more than 40 percent are best served in a language other than English; we serve clients speaking more than 100 different languages. Nearly 15% of our clients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

### Significant Changes

As part of the national response to the COVID-19 pandemic, Federally Qualified Health Centers have been deeply involved in prevention, testing, treatment, and outreach to high-risk populations. ICS will continue to support the COVID-19 pandemic response through the integration of testing and treatment into clinical operations across all services areas. American Rescue Plan Act (ARPA) roles that have been supported by time-limited funds and are not linked to integrated care programs will end in FY 2023. In FY 2024 the Health Center will seek to expand access to care for persons experiencing homelessness through a new mobile healthcare program offering primary care, dental, and behavioral health services. The Mobile Clinic will assist these populations with Oregon Health Plan and other health services enrollment and navigation. This work is part of Program Offer 40027.

As part of ongoing financial and quality improvement initiatives, the Health Center will also transition central lab processing to an external vendor. This will reduce the wait time on test results. Health Center Medical Laboratory Technicians will continue to lead quality assurance activities, training and competencies, and the processing of "point of care" specimens collected during the client appointment at the Health Center. All existing services will continue to be offered to clients at the Health Center.

Workforce development programming and support roles will be added in FY 2024, including innovative training programs for Expanded Function Dental Assistants and Pharmacy Technicians. These initiatives will enable the division to fill high demand roles, and will provide improved health care access to our clients and robust professional development opportunities for our staff.

### Corrections Health

Corrections Health works to ensure access to health care and safeguard the health of individuals detained at Multnomah County Detention Center, Multnomah County Inverness Jail, and the Donald E. Long Juvenile Detention Center. The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care. A disproportionate percentage of Multnomah County's Black, Indigenous, and other People of Color (BIPOC) community are incarcerated and as health risks and diseases rarely impact all communities equally, the work of Corrections Health addresses the critical health needs of some of the most vulnerable in our community.

Corrections Health staff at the adult facilities provide around-the-clock evaluation, diagnosis and treatment to over 30,000 individuals each year. Many people in our care have serious, unstable or chronic health conditions, including severe behavioral health challenges. At the juvenile facility, licensed nursing staff, providers and mental health consultants provide services 16 hours each day to over 2,000 youth each year. More than one third of the people served by Corrections Health receive mental health treatment.

Because most individuals in custody return to their communities, health improvements made in detention (for example, treating communicable disease) benefit the overall health of their families and community at large. By stabilizing substance use and behavioral health conditions, detainees can more fully participate in their legal cases, which protects their constitutional rights and promotes a more fair and efficient judicial process.

### Significant Changes

Correction Health's recruitment and hiring practices promote a workforce that resembles the BIPOC demographic of the population served. Further efforts will continue in FY 2024 to evaluate policies, procedures and practices to ensure that equity is embedded throughout Corrections Health processes, while maintaining appropriate access to essential care. A significant enhancement of the nursing and Mental Health Consultant staffing models, funded in the FY 2024 budget (40107, 40059B, 40050, 40051, 40049) will function to reduce overtime and mandatory overtime work shifts, while promoting morale to staff who work in a challenging environment.

The rising cost of pharmaceuticals and outside medical services – including specialty clinic evaluations, ambulance services and emergency room visits – continues to be a challenge, particularly as Corrections Health continues to address the impacts of COVID-19. Corrections Health continues to improve transition planning efforts before release, so that people with significant medical (including substance use disorders) or behavioral needs, receive continuity of care upon their release. These efforts improve community health and are aimed at reducing recidivism. The scope of work in the transition program continues to grow and the need for transition services is regularly highlighted in court proceedings.

### Behavioral Health

Multnomah County Behavioral Health Division (BHD) works to maintain and enhance high-quality, accessible, client-driven, culturally-responsive and trauma-informed systems of care to promote wellness and recovery for children, youth, and adults experiencing mental health or addiction challenges. The division's budget decisions are grounded in the values of racial justice and equity, cultural humility, stewardship, transparency, integrity, and courage. In FY 2024, BHD will prioritize programs and services working at an intersection of homelessness and behavioral health. These include County-delivered services and those delivered by contracted community providers.

The BHD is committed to addressing gaps in the system of care for the most vulnerable, including individuals who are chronically homeless, victims of abuse, and other marginalized communities and people. The division prioritizes upholding a consumer-driven system and creating access to supportive housing.

The division operates the Community Mental Health Program (CMHP) which provides "safety net" services to the most vulnerable adults and historically marginalized people and communities. This work includes providing oversight of adult residential services programs, intensive care coordination including the CHOICE Model program, behavioral health crisis services; a 24/7 crisis line available to all residents in Multnomah county; involuntary commitment services, adult protective services, mobile crisis response, and culturally-specific services and programming to support jail diversion efforts.

The division also provides prevention and early intervention to children, youth and young adults. This includes wrap-around services, school-based mental health programs in more than 39 schools across the county, mental health services and consultation for those impacted by gun violence, as well as intervention with young adults experiencing their first episode of psychosis. In addition, the Addictions and Prevention Program provides services for gambling and substance use disorders (SUD) in children and adults; and prevention programs to address substance use, gambling, and suicide.

For FY 2024, BHD prioritized promising programs launched in FY 2023, including the Gun Violence Impacted Families Team (40110), Behavioral Health Resource Center (40105A/B/C), and the Old Town Inreach Program (40069B). BHD is excited to demonstrate the significant impacts these programs have made in the lives of community members in the months to come.

The division will take the lead in overseeing the Behavioral Health Emergency Coordinating Network (BHECN). BHECN will 1) function as a structure that coordinates stakeholder resources towards new community sobering, stabilization and triage services; 2) ensure alignment of other stakeholder resources outside the scope of BHECN; and 3) act as a model for the future network upon the launch of new services (40108).

The BHD is setting in motion a new multi-phase revenue strategy. The goal of this strategy involves maximizing opportunities for revenue with all third party funders for contracted services. This will allow the division and the County to focus limited County resources on new innovation and expanded services for the most vulnerable in our community.

### Significant Changes

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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 2024 General Fund	Other Funds	Total Cost	FTE
<b>Director's Office</b>					
40000A	Health Department Director's Office	\$4,987,691	\$0	\$4,987,691	15.00
40000B	Director's Office - In/Out of Scope Services	126,000	0	126,000	0.00
<b>Operations</b>					
40039A	Human Resources	4,635,884	290,595	4,926,479	24.88
40039B	Human Resources - ICS Recruitment	152,753	0	152,753	1.00
40044	Health Data and Analytic Team	3,265,577	0	3,265,577	5.00
40046	Health Department Operations	3,877,812	0	3,877,812	19.80
<b>Financial &amp; Business Management</b>					
40003	Health Department Facilities, Safety and Administrative Support	291,186	0	291,186	2.00
40040A	Financial and Business Management Services	9,975,474	0	9,975,474	37.00
40040D	Behavioral Health Finance Billing	228,142	0	228,142	0.00
40041	Medical Accounts Receivable	2,074,175	0	2,074,175	12.00
40042A	Contracts & Procurement	2,618,422	0	2,618,422	14.00
<b>Health Officer</b>					
40002	Tri-County Health Officer	531,652	421,840	953,492	1.94
40004	Ambulance Services (Emergency Medical Services)	2,527,076	1,257,075	3,784,151	13.80
40005	Public Health & Regional Health Systems Emergency Preparedness	64,814	305,627	370,441	1.39
40052	Medical Examiner	2,550,776	0	2,550,776	15.00
40052B	Medical Examiner State Backfill	125,000	0	125,000	0.00
40106	Health Officer In/Out of Scope Services	46,717	0	46,717	0.00
<b>Public Health</b>					
40001	Public Health Administration and Quality Management	1,972,689	452,505	2,425,194	11.80
40006	Tobacco Prevention and Control	738,588	1,491,369	2,229,957	7.35
40007	Health Inspections and Education	6,745,307	32,620	6,777,927	37.40
40008	Vector-Borne Disease Prevention and Code Enforcement	2,287,645	0	2,287,645	12.10
40009	Vital Records	3,899	882,936	886,835	5.10
40010A	Communicable Disease Prevention and Control	1,877,388	3,031,030	4,908,418	20.25

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Public Health (continued)</b>					
40010B	Communicable Disease Clinical and Community Services	1,796,945	4,204,749	6,001,694	26.12
40010C	Communicable Disease Community Immunization Program	0	196,470	196,470	1.07
40012B	Services for Persons Living with HIV - Regional Education and Outreach	76,826	6,172,394	6,249,220	5.80
40018	Women, Infants, and Children (WIC)	2,785,683	4,357,932	7,143,615	46.00
40037	Environmental Health Community Programs	846,074	1,520,267	2,366,341	11.30
40048	Community Epidemiology	1,359,669	177,609	1,537,278	7.67
40053	Racial and Ethnic Approaches to Community Health	714,430	1,344,695	2,059,125	6.07
40054	Nurse Family Partnership	982,455	2,287,186	3,269,641	10.20
40055	Home and Community Based Consulting	172,422	550,762	723,184	3.80
40056	Healthy Families	873,127	3,292,023	4,165,150	5.56
40058	Healthy Birth Initiative	1,586,174	2,525,541	4,111,715	17.75
40060	Community & Adolescent Health	1,970,702	2,420,304	4,391,006	20.13
40061	Harm Reduction	1,873,858	3,510,637	5,384,495	9.70
40061B	Harm Reduction - Opioid Settlement Investment	280,000	0	280,000	1.00
40096A	Public Health Office of the Director	3,595,699	6,677,189	10,272,888	37.48
40096B	Public Health In/Out of Scope Services	548,291	0	548,291	3.87
40097	Parent, Child, and Family Health Management	1,315,601	233,965	1,549,566	8.44
<b>Integrated Clinical Services</b>					
40012A	FQHC-HIV Clinical Services	0	7,848,493	7,848,493	35.25
40016	FQHC-Medicaid/Medicare Eligibility	0	3,109,143	3,109,143	20.40
40017	FQHC-Dental Services	0	28,519,559	28,519,559	120.46
40019	FQHC-North Portland Health Clinic	0	5,751,342	5,751,342	24.95
40020	FQHC-Northeast Health Clinic	0	6,579,772	6,579,772	27.03
40022	FQHC-Mid County Health Clinic	0	13,543,213	13,543,213	55.10
40023	FQHC-East County Health Clinic	0	11,934,229	11,934,229	47.25
40024	FQHC-Student Health Centers	0	7,844,173	7,844,173	33.96
40026	FQHC-La Clinica de Buena Salud	0	3,563,322	3,563,322	13.90
40027	FQHC-Southeast Health Clinic	0	6,098,114	6,098,114	26.30
40029	FQHC-Rockwood Community Health Clinic	0	6,487,688	6,487,688	27.65
40030	FQHC-Clinical Director	0	1,844,547	1,844,547	3.00
40031	FQHC-Pharmacy	0	39,142,849	39,142,849	61.63

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Integrated Clinical Services (continued)</b>					
40032	FQHC-Lab and Medical Records	0	3,427,424	3,427,424	18.50
40033	FQHC-Primary Care and Dental Access and Referral	0	4,700,662	4,700,662	30.25
40034A	FQHC-Administration and Operations	0	12,044,951	12,044,951	43.80
40034B	FQHC - Contingency and Reserves	0	50,000,000	50,000,000	0.00
40036	FQHC-Community Health Council and Civic Governance	0	679,500	679,500	3.00
40102	FQHC Allied Health	0	6,562,370	6,562,370	38.84
40103	FQHC-Quality Assurance	0	7,180,452	7,180,452	29.00
<b>Corrections Health</b>					
40049	Corrections Health Juvenile Detention	1,766,187	0	1,766,187	6.00
40050A	Corrections Health Multnomah County Detention Center (MCDC)	4,009,348	0	4,009,348	21.35
40050B	Corrections Health MCDC Clinical Services and 4th Floor Housing	3,662,482	0	3,662,482	9.90
40050C	Corrections Health MCDC Housing Floors 5, 6, 7 & 8	3,561,522	0	3,561,522	14.00
40050D	Corrections Health - In/Out of Scope Services	1,145,176	0	1,145,176	8.08
40051A	Corrections Health Inverness Jail (MCIJ) Clinical Services	4,696,329	0	4,696,329	24.65
40051B	Corrections Health MCIJ General Housing Dorms 4 - 11	3,147,068	0	3,147,068	7.50
40051C	Corrections Health MCIJ Dorms 12 - 18 and Infirmary	2,283,037	0	2,283,037	8.50
40059A	Corrections Health Behavioral Health Services	5,852,906	0	5,852,906	30.65
40059B	Corrections Health Behavioral Health Nurse Practitioner Restoration	189,552	0	189,552	0.80
40107	Corrections Health Staff Augmentation	1,211,108	0	1,211,108	6.60
<b>Behavioral Health</b>					
40065	Behavioral Health Division Administration	2,133,969	2,022,466	4,156,435	13.08
40067	Medical Records for Behavioral Health Division	243,430	414,727	658,157	4.75
40068	Behavioral Health Quality Management	1,447,776	2,789,828	4,237,604	20.82
40069	Behavioral Health Crisis Services	1,208,166	14,783,611	15,991,777	30.58
40069B	Old Town Inreach	1,131,429	0	1,131,429	0.00
40069C	Bridge Mental Health Services for Youth	150,000	0	150,000	0.00
40070	Mental Health Crisis Assessment & Treatment Center (CATC)	661,340	0	661,340	0.00
40071	Behavioral Health Division Adult Protective Services	1,206,991	257,342	1,464,333	8.00

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Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Behavioral Health (continued)</b>					
40072	Mental Health Commitment Services	1,985,932	2,967,953	4,953,885	24.10
40073	Peer-run Supported Employment Center	120,389	0	120,389	0.00
40074	Mental Health Residential Services	1,523,961	8,703,688	10,227,649	11.80
40075	Choice Model	0	5,197,814	5,197,814	13.32
40077	Mental Health Treatment & Medication for the Uninsured	705,591	0	705,591	0.00
40078	Early Assessment & Support Alliance	487,657	2,094,381	2,582,038	13.10
40080	Community Based MH Services for Children & Families	754,221	314,395	1,068,616	5.77
40081	Multnomah County Care Coordination	0	11,484,484	11,484,484	50.68
40082A	School Based Mental Health Services	2,397,192	2,948,333	5,345,525	31.39
40082B	School Based Mental Health Services - In/Out of Scope Services	593,995	0	593,995	2.35
40083	Behavioral Health Prevention Services	207,430	421,878	629,308	3.30
40084A	Culturally Specific Mental Health Services	2,085,647	0	2,085,647	0.00
40084B	Culturally Specific Mobile Outreach and STP	786,797	0	786,797	0.00
40085	Adult Addictions Treatment Continuum	2,454,095	10,889,602	13,343,697	5.40
40086	Addiction Services Gambling Treatment & Prevention	0	1,497,907	1,497,907	3.20
40087	Addiction Services Alcohol & Drug Prevention	0	745,983	745,983	1.30
40088	Coordinated Diversion for Justice Involved Individuals	1,780,660	4,830,981	6,611,641	22.50
40089	Addictions Detoxification & Post Detoxification Housing	1,654,024	829,079	2,483,103	0.50
40090	Family & Youth Addictions Treatment Continuum	121,853	159,787	281,640	0.00
40091	Family Involvement Team	35,648	356,139	391,787	0.00
40099A	Early Childhood Mental Health Program	1,809,799	544,390	2,354,189	11.89
40099B	Preschool For All Early Childhood	0	1,731,715	1,731,715	10.98
40099C	Early Childhood Mental Health Program - In/Out of Scope Services	101,061	0	101,061	0.50
40100	Trauma Intervention Services	57,989	0	57,989	0.00
40101	Promoting Access To Hope (PATH) Care Coordination Continuum	613,695	237,467	851,162	8.90
40105A	Behavioral Health Resource Center (BHRC) - Day Center	1,339,025	2,030,330	3,369,355	1.50
40105B	Behavioral Health Resource Center (BHRC) - Shelter/Housing	1,102,642	1,955,000	3,057,642	0.00



# Health Department

fy2024 adopted budget

Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Behavioral Health (continued)</b>					
40105C	Behavioral Health Resource Center (BHRC) - Day Center CGF Support	2,571,429	0	2,571,429	0.00
40108	BHECN - Behavioral Health Emergency Coordinating Network	2,000,000	0	2,000,000	0.00
40109	Behavioral Health - Continuing COVID Response	586,793	0	586,793	0.00
40110	Gun Violence Impacted Families Behavioral Health Team	1,229,587	0	1,229,587	0.00
40111	Culturally Specific Mental Health Workforce Development	154,286	0	154,286	0.00
<b>COVID-19 &amp; American Rescue Plan</b>					
40199B	ARP - Public Health Communicable Disease Community Immunization Program	0	1,718,068	1,718,068	8.88
40199T	Public Health CDC COVID-19 Health Disparities	0	2,623,098	2,623,098	4.50
40199U	Public Health REACH COVID-19/Flu Vaccine Supplement	0	825,000	825,000	3.05
40199X	ARP - Public Health Gun Violence	0	449,082	449,082	3.00
40199Y	Early Assessment and Support Alliance (EASA) COVID-19 Stimulus Funding	0	133,333	133,333	1.00
<b>Total Health Department<sup>1</sup></b>		<b>\$141,451,837</b>	<b>\$360,456,984</b>	<b>\$501,908,821</b>	<b>1,597.20</b>

<sup>1</sup> Includes cash transfers, contingencies, and unappropriated balances.



## 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 the 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 the law.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,018,536	\$0	\$2,574,257	\$0
Contractual Services	\$1,898,136	\$0	\$2,054,881	\$0
Materials & Supplies	\$106,755	\$0	\$108,936	\$0
Internal Services	\$186,766	\$0	\$249,617	\$0
<b>Total GF/non-GF</b>	<b>\$4,210,193</b>	<b>\$0</b>	<b>\$4,987,691</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,210,193</b>		<b>\$4,987,691</b>	
<b>Program FTE</b>	10.75	1.00	14.00	1.00

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 2023: 40000A Health Department Director's Office

In FY 2024 this division now houses the department's Equity Team. Program offer 40003, which oversees facilities and safety is now a part of the Financial & Business Management Division. In FY 2023 this program was a part of the Director's Office.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$90,000	\$0	\$126,000	\$0
<b>Total GF/non-GF</b>	<b>\$90,000</b>	<b>\$0</b>	<b>\$126,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$90,000</b>		<b>\$126,000</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: FY 2023: 40000B Director's Office - In/Out of Scope Services

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T  
**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, Public Health works to promote and protect health, and prevent disease for all residents within Multnomah County. PHA-QM sets Public Health's strategic direction and supports programs in achieving operational and fiscal accountability.

**Program Description**

PHA-QM provides administrative support and project management to ensure that the PHD fully performs its foundational role and achieves legal requirements 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, diverse communities within Multnomah County. Strategies of the PHD include direct services; policy interventions; prevention initiatives; public education and communications; community partnerships; planning; capacity building; and research, evaluation, and assessment. The primary goal of PHA-QM is to provide support to PHD programs so they can reduce health disparities experienced by BIPOC communities. PHA-QM program areas include:

**Administration** - This program area provides core administrative functions for the PHD to support division-wide infrastructure. Division-wide administration ensures accountability through achieving performance standards related to Public Health Modernization, effective financial management, the PHD Strategic Plan, and Community Health Improvement plan.

**Project Management** - This program area supports quality assurance and improvement; performance measurement; information management; public health workforce development; public health informatics; project management for emerging public health issues with departmental and community significance (such as the opioid epidemic); and academic partnerships.

**Racial Equity** - PHA-QM works closely with the Public Health Office of the Director and all PHD programs to use community- and program-level data to analyze racial disparities; engage culturally specific groups to reach BIPOC communities; and include BIPOC communities in the design of programs, assessments, planning, interventions, and direct services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of quality and strategy projects identified	6	6	6	6
Outcome	% of identified projects successfully completed	90%	90%	95%	90%

**Performance Measures Descriptions**

Projects include both COVID-19-related and non-COVID-19-related projects.

## Legal / Contractual Obligation

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

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,917,731	\$308,902	\$1,659,727	\$357,022
Contractual Services	\$0	\$170,959	\$17,535	\$27,512
Materials & Supplies	\$101,850	\$14,018	\$111,071	\$8,942
Internal Services	\$215,440	\$60,365	\$184,356	\$59,029
<b>Total GF/non-GF</b>	<b>\$2,235,021</b>	<b>\$554,244</b>	<b>\$1,972,689</b>	<b>\$452,505</b>
<b>Program Total:</b>	<b>\$2,789,265</b>		<b>\$2,425,194</b>	
<b>Program FTE</b>	11.80	2.00	9.80	2.00

Program Revenues				
Intergovernmental	\$0	\$554,244	\$0	\$452,505
<b>Total Revenue</b>	<b>\$0</b>	<b>\$554,244</b>	<b>\$0</b>	<b>\$452,505</b>

## Explanation of Revenues

This program generates \$49,876 in indirect 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.

State \$ 204,409- PHM Local - OPS

Federal \$ 248,096- PE-62 Overdose Prevention-Counties

## Significant Program Changes

**Last Year this program was:** FY 2023: 40001 Public Health Administration and Quality Management





## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$412,802	\$651,248	\$435,451	\$361,088
Contractual Services	\$0	\$264,972	\$0	\$0
Materials & Supplies	\$7,506	\$36,139	\$0	\$10,308
Internal Services	\$72,727	\$109,155	\$96,201	\$50,444
<b>Total GF/non-GF</b>	<b>\$493,035</b>	<b>\$1,061,514</b>	<b>\$531,652</b>	<b>\$421,840</b>
<b>Program Total:</b>	<b>\$1,554,549</b>		<b>\$953,492</b>	
<b>Program FTE</b>	0.99	1.16	0.99	0.95

Program Revenues				
Intergovernmental	\$0	\$1,061,514	\$0	\$421,840
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,061,514</b>	<b>\$0</b>	<b>\$421,840</b>

## Explanation of Revenues

This program generates \$50,444 in indirect 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:

\$ 41,840 - Tri-County Health Officer Clackamas County

\$ 380,000 - Tri-County Health Officer Washington County

## Significant Program Changes

**Last Year this program was:** FY 2023: 40002 Tri-County Health Officer

The Multnomah County Health Officer FTE increased from 0.90 FTE to 1.00 FTE starting in 2020 and has remained at the level throughout the pandemic. Multnomah County added additional Health Officer position and capacity in FY 2023 using American Rescue Plan (ARP) funds, which increased the total number of Health Officers from two to three. Washington County has a reduction in FY24 which will reduce both the revenue and the Washington County Health Officer FTE from 1.0 down to 0.8 FTE. Multnomah likewise will see a reduction of Multnomah County funded Health officer time back to the pre pandemic coverage level of 0.9 FTE. The Health Officer program will see a reduction of 1.1 FTE in FY24 due to loss of the ARPA funded Health Officer 0.8 FTE, reduction of Washington County's Health Officer 0.2 FTE, and the reduction of the Multnomah County Health Officer 0.1 FTE.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$396,388	\$0	\$215,059	\$0
Materials & Supplies	\$158	\$0	\$166	\$0
Internal Services	\$71,389	\$0	\$75,961	\$0
<b>Total GF/non-GF</b>	<b>\$467,935</b>	<b>\$0</b>	<b>\$291,186</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$467,935</b>		<b>\$291,186</b>	
<b>Program FTE</b>	4.00	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 2023: 40003 Health Department Leadership Team Support

The pandemic, telework and neighborhood safety created new challenges and opportunities. Clients and community members experiencing houselessness and poverty have congregated in the areas immediately surrounding the Gladys McCoy building. This team has helped clients connect with services while also planning for and responding to critical safety issues. The Facilities and Safety Liaison established new safety and security policies, data collection systems, analysis and reporting. In collaboration with an advisory committee and Health Department leadership the Liaison identified best practices in safety and security, developed monthly communications and implemented a new program to distribute personal body alarms. This program offer reduced 1.00 FTE Administrative Analyst to meet the General Fund constraint.

**Department:** Health Department      **Program Contact:** Aaron Monnig  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Multnomah County Emergency Medical Services (MCEMS) MCEMS plans, procures, contracts, regulates, monitors, and coordinates EMS system activities to comply with the county Ambulance Service Plan, county health code (MCC 21.400), and Oregon Administrative Rules, including a franchised ambulance (AMB) contractor, fire departments, and licensed nonemergency ambulance providers. Under Medical Direction, the system receives 9-1-1- calls, dispatches resources, provides care, and transports patients to the appropriate facilities

**Program Description**

MCEMS regulates all ambulance business per State and local law including inspection and licensing of ambulances, monitoring of emergency ambulance operations, supervising medical care, levying fines for substandard performance or for violations of county code or administrative rules. MCEMS provides medical supervision, oversight, and guidance to 911 emergency dispatchers, fire and ambulance first response personnel, and non-911 ambulance providers. MCEMS sets medical standards of emergency, pre-hospital care and provides on-scene medical consultation to first responders through a subcontract with OHSU's Medical Resource Hospital. MCEMS provides pre-hospital system regulation and coordination of all 911 medical dispatch and first response for the county. The City of Portland's Bureau of Emergency Communications triages each medical call and dispatches the most appropriate resource. Portland, Gresham, Airport and other volunteer Fire departments and districts throughout the County provide 911 medical first response, accounting for 111,160+ calls annually. American Medical Response (AMR) provides 911 ambulance service through an exclusive, franchise fee-based contract with Multnomah County. MCEMS assures that 911 medical dispatch and response is consistent across providers and agencies; maintains contracts for medical first response; responds to complaints related to EMS care; monitors and enforces ambulance response and performance; coordinates and supervises annual joint agency training to assure medical protocols are applied consistently across agencies; establishes clinical quality standards for EMS care and uses quality improvement processes to monitor and enhance the system; coordinates major event planning and medical equipment specifications; and liaises with local hospitals. MCEMS also manages the Tri-County 911 Service Coordination Program (TC911), a brief, yet intensive care management intervention serving 500+ frequent users of EMS systems in Clackamas, Washington, and Multnomah Counties. Licensed clinicians help link people to medical, behavioral health, housing, long term care, and other services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Ambulance response for urgent, life threatening calls in the Urban zones is < or equal to 8 min. 90% of the time.	93%	90%	90%	90%
Outcome	Ambulance response in urgent, life threatening calls in Rural areas is < or equal to 20 minutes, 90% of the time.	93%	90%	90%	90%
Output	TC911 serves highest users of EMS system through care coordination, case management, and referral linkages.	583	500	500	500

**Performance Measures Descriptions**

The exclusive ambulance service contractor has geographic response time standards for 911 dispatched medical calls. Life-threatening calls in Urban zones shall receive a response within 8 minutes, and rural areas within 20 minutes. Response times will be met 90% or more of the time. TC911 is funded to serve 450 Medicaid members and 50+ non-Medicaid clients annually.

## 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 exclusive ambulance franchise agreement with American Medical Response, contracts with OHSU, and intergovernmental agreements with local fire and rescue jurisdictions.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,515,049	\$941,323	\$1,684,126	\$955,045
Contractual Services	\$504,647	\$18,700	\$560,754	\$18,700
Materials & Supplies	\$96,677	\$7,498	\$93,693	\$6,277
Internal Services	\$233,893	\$264,905	\$188,503	\$277,053
<b>Total GF/non-GF</b>	<b>\$2,350,266</b>	<b>\$1,232,426</b>	<b>\$2,527,076</b>	<b>\$1,257,075</b>
<b>Program Total:</b>	<b>\$3,582,692</b>		<b>\$3,784,151</b>	
<b>Program FTE</b>	7.52	6.38	7.87	5.93

Program Revenues				
Fees, Permits & Charges	\$2,067,821	\$0	\$2,166,546	\$0
Intergovernmental	\$72,566	\$0	\$67,915	\$0
Other / Miscellaneous	\$0	\$1,232,426	\$0	\$1,257,075
<b>Total Revenue</b>	<b>\$2,140,387</b>	<b>\$1,232,426</b>	<b>\$2,234,461</b>	<b>\$1,257,075</b>

## Explanation of Revenues

This program generates \$133,420 in indirect revenues.

Lic. fees \$175,000, the ambulance franchise fee \$1,421,511, and first responder medical direction contracts \$67,915 and ambulance medical direction \$551,035 pay for MCEMS administration and medical direction costs. Fees are established and collected through agreements with the exclusive emergency ambulance contractor and other jurisdictions. The services' revenues equal the County's expense in providing the service. If expenses increase, the County's exclusive ambulance contractor covers the diff. The County's exclusive ambulance services contract and MCC 21.400 provide authority for MCEMS to levy fines for substandard performance (\$19,000). Fines collected pay for EMS system enhancements. The County pays two fire first response agencies in eastern MC to provide EMS first response in areas of the County not otherwise served by a Fire Department to provide EMS first response. The EMS Social Work Program (aka TC911) has a contract with Health Share of Oregon through June 30, 2024 to serve Medicaid members (\$1,257,075). The County supplements this with general funds to allow service to non-Medicaid clients using EMS frequently.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40004 Ambulance Services (Emergency Medical Services)

**Department:** Health Department      **Program Contact:** Aaron Monnig  
**Program Offer Type:** Existing      **Program Offer Stage:** 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. The Health Department Public Health Preparedness (HDPHP) program assures that we can carry out the County’s unique public health responsibilities in an emergency and contributes to this.

**Program Description**

Responding to emergencies with severe health impacts equitably (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. 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).

This program is funded through two grants that help the County meet Public Health modernization goals of public health emergency preparedness and response. The program staff work collaboratively across the region and with the State to ensure effective, equitable, and coordinated public health preparedness and response .

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Ensure proper PH leadership and prog. representation in emerg. activation and exercise over the year.	100%	100%	100%	100%
Outcome	coordinate at least one Medical Reserve Corp call down exercise or activation notification	N/A	N/A	1	1

**Performance Measures Descriptions**

## Legal / Contractual Obligation

ORS 431 and 433 empower the County and Health Department to plan, coordinate, and operationally lead in matters related to preserving the life and health of the people within 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 this includes two grants the Public Health Emergency Preparedness Grant and the Cities Readiness Initiative Grant. Both sources of federal funds are dedicated to public health emergency preparedness, and cannot supplant other funding or be used to build general emergency preparedness or public health capacities.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$27,043	\$259,392	\$23,588	\$263,445
Materials & Supplies	\$13,853	\$0	\$14,497	\$523
Internal Services	\$23,263	\$39,636	\$26,729	\$41,659
<b>Total GF/non-GF</b>	<b>\$64,159</b>	<b>\$299,028</b>	<b>\$64,814</b>	<b>\$305,627</b>
<b>Program Total:</b>	<b>\$363,187</b>		<b>\$370,441</b>	
<b>Program FTE</b>	0.17	1.26	0.08	1.31

Program Revenues				
Intergovernmental	\$0	\$299,028	\$0	\$305,627
<b>Total Revenue</b>	<b>\$0</b>	<b>\$299,028</b>	<b>\$0</b>	<b>\$305,627</b>

## Explanation of Revenues

This program generates \$36,803 in indirect revenues.

State Public Health Emergency Preparedness is supported by the Federal Centers for Disease Control (CDC) funds received through an intergovernmental agreement with the Oregon Department of Human Services.

Federal: \$ 259,988 - Public Health Emergency Prep

Federal: \$ 45,639 - OHA Cities Readiness Initiative (CRI)

## Significant Program Changes

**Last Year this program was:** FY 2023: 40005 Public Health & Regional Health Systems Emergency Preparedness

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive 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. 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, and associated chronic disease, with particular attention to reducing tobacco-related racial and ethnic disparities.

**Program Description**

Tobacco Control and Prevention Program works to prevent and reduce tobacco and nicotine use and exposure in Multnomah County, with particular attention to reducing tobacco-related racial and ethnic disparities. Short-term goals include preventing new and continued use of tobacco products specifically targeted to youth, American Indians/Alaska Natives, African Americans, and LGTBQ communities. The program does this through policy interventions such as restricting the sale of flavored tobacco and nicotine products, including menthol. Program components include: strategies to reduce youth access to, and use of, tobacco and nicotine products; counter-marketing; support and resources for smokers who want to quit; engagement of diverse communities to reduce tobacco-related disparities; surveillance and evaluation; promotion of smoke-free environments; and policy/regulation, including tobacco retail licensing. Tobacco retail licensing includes several activities, including annual compliance inspections, minimum legal sales age inspections, enforcement inspections, surveillance and monitoring, trainings, outreach, and consultation to increase retailer compliance with all laws related to the sale of tobacco and nicotine products.

Utilizing national, state, and county-level data on use and health impacts of tobacco products, programmatic activities are tailored to address racial disparities by creating prevention strategies to reach specific priority populations, ongoing evaluation of tobacco retail regulation, and employing language services to ensure access to all materials and services. Specific priority populations are engaged through partnerships (funded and unfunded) with community-based organizations serving those populations. Annually, tobacco retailers give feedback on the regulatory processes that impact their businesses, and the licensing system is evaluated for any disproportionate enforcement burden. Originally, the licensing system was developed with a diverse rules advisory committee as well as findings from the health equity impact assessment.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of tobacco retail licenses issued	899	800	785	800
Outcome	Number of policies established to reduce tobacco use and exposure	0	2	1	1
Output	Number of retailer inspections	347	1,000	1,000	1,500
Output	Number of community partnerships	26	45	45	55

**Performance Measures Descriptions**

- 1) Number of tobacco retail licenses issued under the County ordinance.
- 2) Number of policies is a measure of concrete changes resulting from program's work and partnerships.
- 3) Retailers inspected on-site and virtually (includes annual compliance inspection, minimum legal sales age inspections, suspension inspections, education, and outreach as needed).
- 4) Number of partnerships measures program reach among communities, especially those experiencing disparities.



## 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 Code § 21.561, § 21.563

ICAA OARS plus MSA, SYNAR, RICO, FDA, and Family Smoking Prevention and Tobacco Act.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$550,415	\$388,871	\$602,878	\$941,569
Contractual Services	\$15,000	\$28,000	\$15,750	\$314,888
Materials & Supplies	\$25,806	\$2,019	\$24,706	\$47,317
Internal Services	\$91,772	\$106,179	\$95,254	\$187,595
<b>Total GF/non-GF</b>	<b>\$682,993</b>	<b>\$525,069</b>	<b>\$738,588</b>	<b>\$1,491,369</b>
<b>Program Total:</b>	<b>\$1,208,062</b>		<b>\$2,229,957</b>	
<b>Program FTE</b>	4.05	2.80	4.05	3.30

Program Revenues				
Fees, Permits & Charges	\$647,560	\$0	\$738,588	\$0
Intergovernmental	\$0	\$525,069	\$0	\$1,491,369
<b>Total Revenue</b>	<b>\$647,560</b>	<b>\$525,069</b>	<b>\$738,588</b>	<b>\$1,491,369</b>

## Explanation of Revenues

This program generates \$131,537 in indirect revenues.

Direct State \$ 463,369 - Tobacco Prevention

Direct State \$ 1,000,000 - Tobacco Prevention - BM 108

Other \$ 28,000 - Tobacco Prevention & Cessation

\$ 738,588 - Tobacco Retail Licenses

## Significant Program Changes

**Last Year this program was:** FY 2023: 40006 Tobacco Prevention and Control

Continued COVID-19 Impacts: Tobacco Retail License holders conduct in-person business by office appointment; trainings offered virtually; continuation of virtual inspections with some in-person inspections of retail establishments. Legal sales age inspections resumed in May 2022 and resulted in more inspections during FY23 but still not to the pre-pandemic level. In FY24, inspections expected to increase with return of in-person services and start of outreach for new policy banning the sale of flavored tobacco and nicotine products in Multnomah County as of 1/1/24. Significant increase in community partnerships due to funding offered by OHA effective 1/1/21. OHA funded direct investments in communities disproportionately impacted by tobacco use, to support culturally-specific programs, initiatives, communications, policies, systems and environmental change strategies. Funding will also result in new limited duration staffing.

**Department:** Health Department      **Program Contact:** Andrea Hamberg  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40008, 40010A  
**Program Characteristics:**

### Executive Summary

Health Inspections and Education (HIE) is a legally mandated, fee-supported program that protects the public from disease and injury by investigating food and waterborne disease; educating about food safety practices; and performing inspections of licensed facilities. The program goal is to ensure the safety of inspected facilities. For example, HIE ensures food at restaurants/food carts is safe to eat, pools and spas are safe to swim in, hotels/motels are free of hazards, and child care facilities are safe environments. HIE also responds to disease outbreaks that occur in these settings. In 2020, the program became the first in the nation to license and inspect food cart pods. Participation in the Food and Drug Administration's Program Standards aligns Multnomah County health standards with national standards.

### Program Description

HIE protects the health and safety of the entire community by providing education, assuring safe food and water, controlling disease, improving workplace safety, and reducing unintentional injuries. HIE achieves these goals through the following functions:

**Facility Inspection** – Facilities include 4,739 restaurants, mobile restaurants, hotel/motels, RV parks, organizational camps, warehouses, commissaries, vending machines, and jails. 476 pools/spas; 858 schools, childcare, adult foster care, and other service providers. 44 small water systems (inspected every 3 to 5 years) and an additional 10 water systems (responding to alerts as needed).

**Foodborne Illness Outbreak Response** - Registered Environmental Health Specialists investigate local foodborne illness in collaboration with Communicable Disease Services and are key participants in emergency response. HIE conducted 1 foodborne illness and 8 vibrio investigations in restaurants in the previous calendar year.

**Food Handler Training and Certification** – HIE provides online and in-person training about safe food preparation in seven languages to food workers at all literacy levels to support health equity and entry into the workforce.

HIE promotes racial equity by analyzing survey and inspection data to ensure businesses owned by persons of color, immigrants/refugees, and other marginalized populations are not penalized due to cultural, linguistic, or other systemic barriers to accessing, understanding, and following mandated health and safety standards. The Food Service Advisory Board, which consists of local food service industry representatives, county regulatory officials, consumers, educators, and dietitians, meets throughout the year to discuss program changes.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of licenses issued	5,719	6,583	6,136	7,002
Outcome	Number of Priority & Priority Foundation violations	2,646	5,766	2,931	4,021
Output	Number of facility inspections	10,433	13,968	10,927	10,893
Output	Number of Food Worker Cards issued	9,693	11,245	10,723	12,073

### Performance Measures Descriptions

- 1) Measure excludes facilities inspected but not licensed.
- 2) Priority and Priority Foundation Violations are items noted during inspections that can directly affect the health of the consumer and require immediate correction. Note: Violations could not be cited if a virtual inspection was performed.
- 3) Facilities inspected on-site (e.g. restaurants, mobile units, etc.).
- 4) Number of people who completed certification in the given year.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$4,890,067	\$24,588	\$5,295,253	\$27,557
Contractual Services	\$402,690	\$0	\$428,020	\$0
Materials & Supplies	\$158,627	\$501	\$226,964	\$1,213
Internal Services	\$764,913	\$3,305	\$795,070	\$3,850
<b>Total GF/non-GF</b>	<b>\$6,216,297</b>	<b>\$28,394</b>	<b>\$6,745,307</b>	<b>\$32,620</b>
<b>Program Total:</b>	<b>\$6,244,691</b>		<b>\$6,777,927</b>	
<b>Program FTE</b>	36.72	0.18	37.21	0.19

Program Revenues				
Fees, Permits & Charges	\$3,313,039	\$0	\$6,060,750	\$0
Intergovernmental	\$0	\$28,394	\$0	\$32,620
<b>Total Revenue</b>	<b>\$3,313,039</b>	<b>\$28,394</b>	<b>\$6,060,750</b>	<b>\$32,620</b>

## Explanation of Revenues

This program generates \$3,850 in indirect revenues.

Multnomah County Environmental Health receives \$32,620 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.

\$6,060,750 - Inspection Licenses and Fees; includes 6% fee increase.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40007A Health Inspections and Education

COVID-19-Related - In FY 2023, HIE returned to providing in-person inspections, which saw an increase in the number of violations. In FY22, the HIE office was closed to the public, meaning services were provided by mail, fax, email, or phone. Field staff teleworked with limited (staggered) numbers going into the office. The majority of facility inspections were conducted virtually, which resulted in a large drop in violations since the State does not allow cited violations through virtual inspections. Technical assistance opportunities were hindered due to the telework environment. HIE provided financial support to local restaurant operators through a CARES Act funded grant program.

**Department:** Health Department      **Program Contact:** Andrea Hamberg

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

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

The Vector program protects the public from emerging and imminent vector-borne diseases by monitoring, collecting, and testing mosquitoes, birds, and rats, and enforcing health-based nuisance codes. Climate changes in the Northwest (warming winter temperatures, increase in rainfall, and urban landscape management) will increase the risk of vector-borne diseases, and this program addresses this increased risk by anticipating and responding to observed changes.

**Program Description**

Vector Control and Code Enforcement are core public health services that protect the public from diseases carried by and transmitted via contact with animals, using World Health Organization and Center for Disease Control best practices. This is accomplished through

Mosquito Control - suppression of mosquito populations to lower the risk of West Nile Virus and other mosquito-borne viruses and reducing the mosquito breeding habitat through water control and vegetation management.

Disease Surveillance - collection, identification, and laboratory analysis of mosquitoes, birds, and rats to identify diseases and monitoring the spatial and temporal distribution of species to determine at-risk areas and populations.

Rodent Control – performing complaint-based inspections for property owners and businesses and providing education and free abatement materials.

Nuisance Code Enforcement - addressing public health code violations, investigating and removal of illegal dumping, and enforcement of city codes regarding livestock.

Outreach and Education - attend fairs, festivals, and activities throughout the county with a focus on events in areas that are in low income neighborhoods or communities of color to provide education and resources in multiple languages on protection from vector-borne disease.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of rodent inspections conducted	359	700	40	700
Outcome	Number of service referrals that improve vector abatement	76	45	177	75
Output	Number of acres treated for mosquitoes	592	2,000	8,000	2,000
Quality	Inspection and monitoring of mosquito producing sites	755	600	800	600

**Performance Measures Descriptions**

1) Rodent inspections are generated by submitted complaints. 2) Mosquito referrals are complaint-based and use integrated pest management strategies for abatement, which include education, removal of breeding source(s), and biological and chemical treatments. 3) Pulled from database and pesticide use numbers. 4) Pulled from surveillance records.

## Legal / Contractual Obligation

Legal mandates are ORS 452 Vector Control, OAR 333-018 Communicable Disease and Reporting, OAR 333-019 Communicable Disease Control, OAR 603-052 Pest and Disease Control, OAR 603-057 Pesticide Control, 1968 Agreement City of Portland and Multnomah County, MCC Chapter 15 Nuisance Control Law, PCC Title 8.40 Rodent Control, PCC Title 8.44 Insect Control, PCC Title 29 Property Maintenance Regulations, NPDES General Aquatic Permit for Mosquito Control 2300A

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,478,652	\$0	\$1,716,147	\$0
Contractual Services	\$34,100	\$0	\$62,355	\$0
Materials & Supplies	\$134,581	\$0	\$176,185	\$0
Internal Services	\$328,081	\$0	\$332,958	\$0
<b>Total GF/non-GF</b>	<b>\$1,975,414</b>	<b>\$0</b>	<b>\$2,287,645</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,975,414</b>		<b>\$2,287,645</b>	
<b>Program FTE</b>	11.62	0.00	12.10	0.00

Program Revenues				
Fees, Permits & Charges	\$0	\$0	\$342,446	\$0
Service Charges	\$342,446	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$342,446</b>	<b>\$0</b>	<b>\$342,446</b>	<b>\$0</b>

## Explanation of Revenues

\$ 277,000- CoP BES Vector Control Rats  
 \$ 65,446- Specified Animals

## Significant Program Changes

**Last Year this program was:** FY 2023: 40008A Vector-Borne Disease Prevention and Code Enforcement

In FY23, extreme rains and flooding created historic levels of mosquitoes and staff that were assigned to work on rodent response were redeployed to work mosquito surveillance and abatement. Before FY24, these staff will have transitioned back to rodent response. 2 FTE are vacant due to failed recruitment and will be filled by FY24.

**Department:** Health Department      **Program Contact:** Andrea Hamberg  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 program’s goal is to accurately report birth and death certificates in Multnomah County in order to provide accurate data that is used to inform public health prevention and intervention activities. This goal supports achievement of positive health outcomes and equitable opportunities for health to all Multnomah County residents.

**Program Description**

The Vital Records Program issues birth and death certificates within the first six months after a birth or death, and within 24-hours of receipt of a request for certificate. The program assures accurate, timely, and confidential registration of birth and death events, minimizing the opportunity for identity theft, and assuring accurate record of important data such as cause of death and identification of birth parents. Death certificates can be issued to family members, legal representatives, governmental agencies, or to a person or agency with personal or property rights. Birth records can be released to immediate family including grandparents, parents, siblings, 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 data analysis to inform public health decision-making, including the identification of racial health disparities and informing responsive public health interventions. For example, during the COVID-19 pandemic, marginalized communities of color were severely impacted by the virus, and information provided on death certificates helped identify racial disparities in COVID fatalities.

The program engages local funeral homes, family members, and legal representatives to maximize accuracy of reported information. The program is constantly evolving to better meet community needs by soliciting regular feedback from its clients. For example, the program is in the process of launching an online platform that can be conveniently accessed by the public.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of birth and death certificates issued	43,692	38,000	48,000	50,000
Outcome	Average number of days to issue error free certificate	1	1	1	1

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Legal mandates are ORS 97, 146, 432; OAR 830 and 333.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$601,310	\$3,515	\$587,061
Contractual Services	\$0	\$18,082	\$384	\$18,169
Materials & Supplies	\$4,000	\$13,110	\$0	\$17,405
Internal Services	\$0	\$250,434	\$0	\$260,301
<b>Total GF/non-GF</b>	<b>\$4,000</b>	<b>\$882,936</b>	<b>\$3,899</b>	<b>\$882,936</b>
<b>Program Total:</b>	<b>\$886,936</b>		<b>\$886,835</b>	
<b>Program FTE</b>	0.00	5.30	0.00	5.10

Program Revenues				
Fees, Permits & Charges	\$0	\$882,936	\$0	\$882,936
<b>Total Revenue</b>	<b>\$0</b>	<b>\$882,936</b>	<b>\$0</b>	<b>\$882,936</b>

## Explanation of Revenues

This program generates \$82,013 in indirect revenues.

This is a fee driven, self-sustaining program. The fee schedule is established by the State of Oregon.

Fees \$ 882,936 - Vital Stats Birth Certs

## Significant Program Changes

Last Year this program was: FY 2023: 40009 Vital Records

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Communicable Disease Services (CDS) is a foundational public health program that protects community health by upholding the State of Oregon infectious disease statutes for disease tracking and investigation, disease intervention and control, and response evaluation. CDS is a trusted community resource and responds 24/7 to events of public health importance, such as the COVID-19 pandemic.

**Program Description**

CDS protects the people of Multnomah County from preventable infectious diseases through core public health functions. These include epidemiologic investigation; identifying causes of illness and new outbreaks; assuring preventive health measures for reportable disease exposures and outbreaks; planning and response for emerging or new infectious diseases; analyzing changes in disease patterns, and tuberculosis (TB) case management. CDS also works with government and community partners to build infectious disease capacity within the region. Staff conduct investigations to seek out people who have been exposed to serious diseases to get them the information and care they need to stay healthy. CDS works to prevent disease by providing health education in communities. For people who already have a communicable disease, the program assures access to medicine, care, and education intended to prevent the spread of illness. For healthcare providers, the program assures availability of appropriate diagnostic testing by linking providers to state and national laboratories. CDS works closely with schools and congregate settings for vulnerable populations like Long Term Care Facilities to stop outbreaks. CDS is also at 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 (CDC).

CDS staff identify racial, ethnic, social, and other community groups who are at risk of (or are) being impacted by infectious diseases as well as those at risk of future illness, and prioritizes resources accordingly. CDS develops and uses multiple data sources and epidemiology tools to understand changes in disease and evaluate public health interventions. CDS works with individuals who experience a communicable disease, their families, community partners, and other County programs to build strong and trusting relationships, listen to community experiences, and respond to questions or concerns about the risks and impacts of communicable diseases. CDS continues to strengthen relationships by working directly with community groups or members to share data and by partnering with culturally specific credible community leaders to provide health education.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of disease report responses	4,133	5,500	4,758	4,250
Outcome	Location of contacts (pertussis, meningococcal meningitis, Hepatitis A and B) within one day	88%	70%	90%	70%
Quality	Percent of tuberculosis (TB) patients completing treatment within 12 months	100%	96%	100%	96%

**Performance Measures Descriptions**

Performance Measure 1: FY22 actual and FY23 estimate are low due to overall lower disease reports secondary to COVID-19, stay at home orders, and changing access to in person services. FY24 offer is set to follow this trend. Disease trends continue to fluctuate due to COVID-19 and other health system uncertainty.

Performance Measure 2: High priority diseases: pertussis, meningococcal meningitis, Hepatitis A and acute Hepatitis B)



## Legal / Contractual Obligation

ORS Chapters 433. OAR 333-012-0065: Epi/Accident Investigation and Reporting. OAR 333, Division 17, 18 and 19: Disease Control, Reporting, and Investigation/Control. 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. LPHA PEs 01, 03, 25, 43. OHA and CLHO BT/CD & TB Assurances. OAR 437: OR-OSHA: Bloodborne Pathogens 1910.1030. CDC: 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,252,481	\$2,110,922	\$1,600,662	\$1,874,972
Contractual Services	\$58,395	\$381,355	\$54,483	\$124,116
Materials & Supplies	\$89,350	\$74,107	\$86,920	\$43,165
Internal Services	\$516,864	\$614,345	\$135,323	\$988,777
<b>Total GF/non-GF</b>	<b>\$1,917,090</b>	<b>\$3,180,729</b>	<b>\$1,877,388</b>	<b>\$3,031,030</b>
<b>Program Total:</b>	<b>\$5,097,819</b>		<b>\$4,908,418</b>	
<b>Program FTE</b>	7.33	14.39	8.71	11.54

Program Revenues				
Intergovernmental	\$0	\$2,925,920	\$0	\$2,785,589
Other / Miscellaneous	\$0	\$214,309	\$0	\$220,441
Service Charges	\$0	\$40,500	\$0	\$25,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,180,729</b>	<b>\$0</b>	<b>\$3,031,030</b>

## Explanation of Revenues

This program generates \$236,215 in indirect revenues.

- Federal \$ 13,180 - ST:TB Outreach
- State \$ 984,809 - ST:St Support for PH
- State \$ 101,500 - ST:TB Case Mgmt
- State \$ 25,000 - ST:OHS CDC Hep B
- Federal \$ 211,472 - EIP 93.317
- State \$ 301,015 - Public Health Modernization
- State \$ 1,033,913 - PH Modernization Local
- State \$ 49,700 - HSO County Based Services
- State \$ 90,000 - Oregon Refugee Health Promotion
- \$ 220,441 - Occ Health Fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40010A Communicable Disease Prevention and Control

The 1.5 reduction in FTE is the elimination of one vacant Office Assistant 2 position and the shift of 0.5 FTE Community Health Specialist 2 to another cost center.



## Legal / Contractual Obligation

ORS 433 mandates disease prevention & control. Oregon State DHS HIV Prevention, HIV Early Intervention Services and Outreach, and STD contractual program elements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$374,699	\$4,115,406	\$1,340,864	\$2,591,331
Contractual Services	\$124,681	\$2,412,167	\$0	\$541,784
Materials & Supplies	\$181,660	\$159,425	\$73	\$304,806
Internal Services	\$762,634	\$579,332	\$456,008	\$766,828
<b>Total GF/non-GF</b>	<b>\$1,443,674</b>	<b>\$7,266,330</b>	<b>\$1,796,945</b>	<b>\$4,204,749</b>
<b>Program Total:</b>	<b>\$8,710,004</b>		<b>\$6,001,694</b>	
<b>Program FTE</b>	2.80	32.45	7.55	18.57

Program Revenues				
Intergovernmental	\$0	\$7,045,823	\$0	\$3,853,542
Service Charges	\$0	\$220,507	\$0	\$351,207
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,266,330</b>	<b>\$0</b>	<b>\$4,204,749</b>

## Explanation of Revenues

This program generates \$325,209 in indirect 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. \$39,700 - HSO County Based Services, Federal \$250,000 - Surveillance Network - GY05, Federal \$369,138 - HIV Prevention Block - CTS Clinic, State \$1,894,286 - HIV Early Intervention & Outreach GY06, Federal \$10,500 - ELC Gonococcal Infections, Federal \$324,500 - Sexually Transmitted Diseases Client Services, State \$732,318 - Public Health Modernization Local - STD, State \$20,100 - TB Class B Waiver, Federal \$98,000 - TB Class B Waiver, \$170,599 - STD Program Mcaid FFS, \$3,753 - STD Program Mcare, \$107,890 - STD Prog Pt Fee 3rd Party, \$68,965 - STD Program Pt Fees, Local \$115,000 - TBD Clackamas EISO in 403100

## Significant Program Changes

**Last Year this program was:** FY 2023: 40010B Communicable Disease Clinical and Community Services

In FY 2023, the OHA 5 year HIV Early Intervention Services and Outreach (EISO) grant award ended. Beginning in January, 2023, OHA has continued funding EISO activities at a significantly reduced level. Budgeted EISO grant funding to the STD program area for FY24 is \$1,894,286 in contrast to the \$4,861,365 budgeted for FY23. The EISO grant operates on a calendar year grant cycle and funding reductions went into effect January, 2023, however the program has leveraged Public Health Modernization and other revenue to maintain previous staffing levels for the second half of FY23. Effective July 2023, major program adjustments will need to be implemented in order to fit into the constraints of the drastically reduced budget. This will include reductions to staffing and direct service delivery. Prioritization of services retained will be informed by surveillance and informatics data, utilizing an equity lens.

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Community Immunization Program (CIP) reduces the transmission and effects of vaccine-preventable infectious diseases such as COVID-19, flu, MPOX, childhood vaccines through direct vaccine administration, supporting other providers, and educating communities. The program assures that schools and childcare facilities comply with state school immunization rules. The CIP uses a racial equity focus to reduce childhood vaccine disparities. The CIP is part of public health readiness to respond to emerging infectious diseases.

**Program Description**

As a program within Communicable Disease Services (CDS), the goal of the Community Immunization Program (CIP) is to be a trusted community resource that protects the people of Multnomah County from vaccine-preventable communicable diseases, including COVID-19. As vaccine-preventable diseases spread from person-to-person, vaccination is important not only for individual health but also for the health of the community and places where children live, play, and go to school. CIP assures state and federally funded program components and approaches are implemented to protect community health. Key areas of work supported by this program offer include:

Safety-net vaccine administration services: CIP maintains an experienced vaccination team to provide low barrier COVID, flu, and childhood vaccines with an equity focus. This resource is also the foundation to quickly scale up a culturally-competent public health vaccination response to emerging infectious diseases or large outbreaks.

State school immunization laws - CIP issues exclusion orders as needed and assures that all children and students are complete or up-to-date on their immunizations. The program works in BIPOC and other underserved communities to address health and vaccine inequities. In FY22, CIP will assist over 600 facilities in complying with State mandates.

Community health education and Health System access improvement: CIP works with partners to identify racial, ethnic, and other community groups who are disproportionately under-represented in vaccination rates, particularly children and elders. CIP provides and supports culturally specific community education about vaccine. CIP participates in convening partners for review of data and systems/policy improvements to reduce barriers to vaccine access through private and public providers. CIP is committed to the values of innovation, collaboration, diversity, and accountability and works closely with community partners, health systems, Medicaid Coordinated Care Organizations, and the Oregon Health Authority to reach BIPOC and other underserved communities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of immunizations provided to children under 18, including COVID-19 vaccines	5403	350	450	400
Outcome	Percentage of COVID-19 Vaccine provided to BIPOC individuals.	58%	70%	40%	60%
Output	Number of schools and childcare entities assisted with immunization law requirements.	450	480	450	449
Outcome	New: number of community partners and stakeholders provided with information sessions/educational materials	N/A	N/A	N/A	75

**Performance Measures Descriptions**

Measures represent past program offers 40010C and 40199B in FY23. Measure #2: The FY23 estimate reflects a lower percentage of BIPOC individuals due to the large mobilization for MPOX in Q1 and Q2, which was not primarily among BIPOC communities. Measure #4: private schools and childcares with whom CIP works directly. An additional 213 public/other schools served by MESD through subcontract.

## Legal / Contractual Obligation

State-Supplied Vaccine Accountability - OAR 333.047. School Immunization - ORS 433.267, 433.273 and 433.284; OAR 333-050-0010 through 333-050-0140; and ORS 433.235 through 433.284. ALERT Immunization Registry - OAR 333-049-0010 through 333-049-0130; ORS 433.090 through 433.102. Vaccine Education and Prioritization Plan - ORS 433.040; OAR 333-048-0010 through 333-048-0030.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$163,087	\$0	\$135,499
Contractual Services	\$0	\$11,598	\$0	\$20,000
Materials & Supplies	\$0	\$63	\$0	\$17,698
Internal Services	\$0	\$31,240	\$0	\$23,273
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$205,988</b>	<b>\$0</b>	<b>\$196,470</b>
<b>Program Total:</b>	<b>\$205,988</b>		<b>\$196,470</b>	
<b>Program FTE</b>	0.00	1.26	0.00	1.07

Program Revenues				
Intergovernmental	\$0	\$205,988	\$0	\$180,000
Service Charges	\$0	\$0	\$0	\$16,470
<b>Total Revenue</b>	<b>\$0</b>	<b>\$205,988</b>	<b>\$0</b>	<b>\$196,470</b>

## Explanation of Revenues

This program generates \$18,929 in indirect revenues.

Federal \$ 90,000 - State of Oregon LPHA

State \$ 90,000 - State of Oregon LPHA

\$ 16,470 - Medicaid FFS

## Significant Program Changes

**Last Year this program was:** FY 2023: 40010C Communicable Disease Community Immunization Program

Community Immunization Program work is described in 40010C and 40199B in FY23, only in 40010C for FY24.

**Department:** Health Department      **Program Contact:** Nick Tipton  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County.

The HIV Health Services Center (HHSC) provides community-based primary care and support services to 1,550 highly vulnerable people living with HIV. Services target low-income, uninsured, and people experiencing homelessness, mental illness, and substance abuse. These services contribute to lower mortality from HIV, fewer disease complications and their associated costs, and reduced transmission of HIV in the community.

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

HHSC, the only Ryan White clinic in Oregon, offers culturally specific LGBTQI HIV/HCV outpatient medical care, mental health services, case management, health education, HIV prevention, art therapy, anal cancer screening and treatment, intimate partner violence (IPV) universal education and screening with referral to community resources, risk reduction support, medication-assisted therapy, and treatment adherence counseling. Onsite clinical pharmacy services increase patients' access to and use of HIV medications. HHSC integrates prevention into all services to reduce client risk of HIV transmission. HHSC integrates primary/specialty care via telehealth, telemedicine, in person visits in coordination with field services provided by our navigation and field nursing care management team using National HIV best practices and treatment guidelines.

The clinic is supported by an active Client Advisory Council and a well-established network of HIV social services providers. HHSC is an AIDS Education and Training Center site, training more than 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. The clinic provides a monthly Nursing Community of Practice webinar for the 10 state region around current HIV nursing related best practices that include equity, race, COVID-19 strategies in working with persons living with HIV.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unduplicated HIV clinic clients	1,863	1,500	1,550	1,625
Outcome	Percent of clients whose last viral load test is below 200 copies	90%	90%	90%	90%

### Performance Measures Descriptions

**Output:** This measure shows how many unique clients were seen at the HIV Health Services Center during the fiscal year.  
**Outcome:** This test measures how much virus is in the blood. Below 200 is a strong sign of individual health and also a very low chance of transmitting HIV to others. Supports the Undetectable equals Untransmittable campaign.

## Legal / Contractual Obligation

Federal HIV grant and contract funds are restricted. Part A grant requires 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill and 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. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,749,569	\$0	\$5,689,228
Contractual Services	\$0	\$108,296	\$0	\$139,317
Materials & Supplies	\$0	\$265,904	\$0	\$274,556
Internal Services	\$0	\$1,601,320	\$0	\$1,745,392
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,725,089</b>	<b>\$0</b>	<b>\$7,848,493</b>
<b>Program Total:</b>	<b>\$6,725,089</b>		<b>\$7,848,493</b>	
<b>Program FTE</b>	0.00	31.68	0.00	35.25

Program Revenues				
Intergovernmental	\$0	\$3,416,930	\$0	\$3,352,688
Service Charges	\$0	\$3,308,159	\$0	\$4,495,805
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,725,089</b>	<b>\$0</b>	<b>\$7,848,493</b>

## Explanation of Revenues

This program generates \$677,534 in indirect revenues.

\$ 4,495,805 - Medical Fees

Federal: \$ 1,347,499 - RW-Part A

Federal: \$ 374,930 - RW-Part D

Federal: \$ 13,120 - RW-Part F

Federal: \$ 45,000 - PC 330

Federal: \$ 763,855 - RW-Part C

State: \$ 396,372 - RW-OHA

State: \$ 121,912 - OHA - HIV

Federal: \$ 90,000 - AIDS Education and Training

\$ 200,000 - Special Projects SPINS

## Significant Program Changes

**Last Year this program was:** FY 2023: 40012A FQHC-HIV Clinical Services

The HIV Health Services Center will add one .8 FTE Community Health Nurse to help with increasing volume of medication administration work as well as chronic disease case management and care coordination aimed at addressing impacts of social determinants of health with clients living with HIV

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

HIV Grant Administration & Planning (HGAP) provides community-based services to 2,800 highly vulnerable people living with HIV through administering and coordinating federal and state grants. The program focuses services 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 Description

HGAP’s goal is to support individuals living with HIV to achieve successful HIV treatment resulting in improved quality of life, greater health, longer life, and virtually no transmission to other people if the client is virally suppressed. HGAP coordinates a regional 6-county system that achieves these goals by promoting access to high quality HIV services through contracts with the counties’ local health departments and community organizations. HGAP works with partners to address viral suppression disparities that exist for Blacks/African Americans, injection drug users, and youth/young adults ages 13-29. People who are unstably housed/experiencing homelessness also have significant barriers to treatment that result in lower viral suppression rates.

With these disparities in mind, HGAP funds the following services: Peer Support & Service Navigation - 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 - rent and assistance finding permanent affordable housing to ensure ability to remain engaged in medical care and adherent to medications. Food - congregate meals, home delivered meals, and access to food pantries to eliminate food insecurity and provide nutrition for managing chronic illness. Planning - a community-based Planning Council (at minimum 1/3, but generally about 40%, are consumers) identifies service needs and allocates funding accordingly.

HGAP analyzes both health outcome data (viral suppression, new diagnoses, linkage to care) and data on access to services by race and ethnicity to identify populations (a) disproportionately impacted by HIV infection, (b) with less favorable health outcomes, and (c) experiencing barriers to care. HGAP presents these data, as well as data by age and risk category, to the Ryan White Planning Council to guide resource allocation, outreach, and quality improvement projects. In order to better identify disparities for communities with small numbers, a BIPOC-focused consumer data review group meets to improve the use and presentation of BIPOC data.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unduplicated HGAP clients served (all service types/whole 6-county system)	2,899	2,820	2,900	2,900
Outcome	Percent of HGAP clients (all 6 counties) who are virally suppressed	90%	92%	91%	91%
Outcome	Increase viral suppression rate of Black/African Americans	88%	90%	88%	89%

### Performance Measures Descriptions

Viral load is a measure of the amount of HIV virus in the blood. Lowering (or eliminating) the viral load a specific amount is called viral suppression. Reaching and maintaining HIV viral suppression is a primary goal of HIV treatment for short and long term health. In addition, if someone is virally suppressed, they will not transmit HIV to partners through sex.



## 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; 4) 5% allocated toward quality management and evaluation; and 5) The County must spend local funds for HIV services at least at the level spent in the previous year.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$3,276	\$898,803	\$0	\$956,780
Contractual Services	\$7,500	\$4,765,375	\$6,500	\$5,004,234
Materials & Supplies	\$500	\$31,673	\$525	\$24,010
Internal Services	\$61,515	\$185,860	\$69,801	\$187,370
<b>Total GF/non-GF</b>	<b>\$72,791</b>	<b>\$5,881,711</b>	<b>\$76,826</b>	<b>\$6,172,394</b>
<b>Program Total:</b>	<b>\$5,954,502</b>		<b>\$6,249,220</b>	
<b>Program FTE</b>	0.02	5.78	0.00	5.80

Program Revenues				
Intergovernmental	\$0	\$5,881,711	\$0	\$6,172,394
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,881,711</b>	<b>\$0</b>	<b>\$6,172,394</b>

## Explanation of Revenues

This program generates \$107,741 in indirect revenues.

Federal: \$ 2,671,453 - Ryan White Part A funds for 21-22: Medical, Case management, Non-medical case management, and Housing

State: \$ 3,500,941 - Oregon Health Authority Ryan White

## Significant Program Changes

**Last Year this program was:** FY 2023: 40012B Services for Persons Living with HIV - Regional Education and Outreach

This program's revenue has a net increase of \$290,683 (an increase of \$146,258 in Ryan White funds through OHA, and an increase in Federal Ryan White funds - \$144,425).

**Department:** Health Department      **Program Contact:** Belma Nunez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County.

The Medicaid Enrollment program 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.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

The Medicaid Enrollment program 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. Patients are also screened for eligibility to sliding scale (discounted fees) for services received if they are unable to obtain other coverage. Last year, more than 15,000 clients were screened and there were 1,300 projected enrollments into OHP.

The Medicaid Enrollment program provides outreach and education efforts that 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 recertification.

Starting in March 2020, Eligibility transitioned to screening clients both in person and by phone due to the COVID-19 pandemic. The introduction of the phone line allowed for clients to call in and reach an eligibility specialist to apply for OHP benefits, the sliding scale discount or other medical assistance programs. The Oregon Health Authority relaxed rules for obtaining signatures which allowed for applications to be completed by phone with virtual consent given by the client. Clients are still able to walk in and see an eligibility specialist at any primary care clinic for their eligibility needs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Annual number of clients screened	15,287	15,000	15,000	16,000
Outcome	% of Self Pay Patients in Medical	12.3%	14%	20.1%	11.5%
Outcome	% of Self Pay Patients in Dental	4.84%	7.35%	3%	7.78%

**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 Prog. is on contract with the State Division of Medical Assistance Progs. 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 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. Medical Assistance is in the scope of the Primary Care 330 Grant and must follow the HRSA Community Health Center Program operational and fiscal compliance requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,167,626	\$0	\$2,388,589
Contractual Services	\$0	\$24,000	\$0	\$18,000
Materials & Supplies	\$0	\$14,523	\$0	\$13,491
Internal Services	\$0	\$630,577	\$0	\$689,063
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,836,726</b>	<b>\$0</b>	<b>\$3,109,143</b>
<b>Program Total:</b>	<b>\$2,836,726</b>		<b>\$3,109,143</b>	
<b>Program FTE</b>	0.00	20.00	0.00	20.40

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$223,895
Service Charges	\$0	\$2,836,726	\$0	\$2,885,248
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,836,726</b>	<b>\$0</b>	<b>\$3,109,143</b>

## Explanation of Revenues

This program generates \$333,686 in indirect 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.

\$ 223,895 - HD FQHC PC330 - NPC GY22

\$ 903,587 - HD FQHC FQHC Medicaid Wraparound

\$ 1,981,661 - HD FQHC OHP Enrollment Medicaid FFS

## Significant Program Changes

**Last Year this program was:** FY 2023: 40016 FQHC-Medicaid/Medicare Eligibility

The program has partially transitioned to telework due to the COVID-19 pandemic, including an adjustment in operations to allow for services by telephone.

Clients enrolled in the Oregon Health Plan have maintained their current benefit level throughout the pandemic. This has led to a significant reduction in the number of OHP new and renewal applications processed at the Health Center. Beginning in mid-FY 2022, the FQHC revenue and expenses were transferred from the General Fund into a newly created FQHC Enterprise Fund which is shown in Other Funds.

**Department:** Health Department      **Program Contact:** Azma Ahmed  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. ICS-Dental provides County residents with essential, urgent, routine, and preventive services in clinic settings and school-based programs. ICS-Dental works with community partners, targeting under-served populations, providing service to nearly 27,000 people in Multnomah County. ICS-Dental is the largest Safety Net provider for vital dental care in the County and provides additional child based services to uninsured and underinsured clients.

### Program Description

Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over 60% of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of FPL. The Dental program has three distinct service components.

7 dental clinics provide comprehensive and urgent dental treatment for Medicaid 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 (SCOH) Program provides dental education, and dental sealant services to children in Multnomah County schools, provides outreach, education, and dental treatment specifically to children 0-36 months in our clinic setting, known as our Baby Day program.

The 3rd component of the program consists of mentoring and training dental assistants, dental hygiene and students in dental schools. These students provide services under the preceptorship of our providers, which helps cultivate a workforce interested in providing public health care. In FY 24, the dental program will also have an internal workforce development program that encourages folks from communities we serve to become dental assistants in our clinic system.

Dental services are an essential program that provides education, prevention, and dental treatment to the poorest and most vulnerable in Multnomah County. Services include dental sealants, which have been a mainstay at our SCOH Program for many years, preventive measures, and improving access for clients 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 people, in a reasonable, and cost-effective manner.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Billable patient visits	64,719	80,496	72,824	80,689
Outcome	No show rate	19%	17%	18%	15%

### Performance Measures Descriptions

**Output:** The number of patient visits who receive clinical care within the fiscal year. The number of encounters will be critical in light of COVID-19 pandemic coupled with race, equity and fiscal viability. The projected number of encounters were adjusted to align with anticipated COVID-19 recovery, patient demand for services, predicted staffing, and historical no-show rates. **Outcome:** % of appointments for which patients did not show per fiscal year.

## Legal / Contractual Obligation

Dental services are a requirement of the Bureau of Primary Health Care 330 Grant. Dental services in the scope of the Primary Care 330 Grant must follow the HRSA Community Health Center Program operational and fiscal compliance requirements. The Dental Program is also accredited under The Joint Commission and follows TJC accreditation standards, which include infection control, patient safety, patient rights, and many more. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$19,075,421	\$0	\$20,739,587
Contractual Services	\$0	\$226,574	\$0	\$362,801
Materials & Supplies	\$0	\$1,172,506	\$0	\$1,298,895
Internal Services	\$0	\$5,658,683	\$0	\$6,118,276
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$26,133,184</b>	<b>\$0</b>	<b>\$28,519,559</b>
<b>Program Total:</b>	<b>\$26,133,184</b>		<b>\$28,519,559</b>	
<b>Program FTE</b>	0.00	130.36	0.00	120.46

Program Revenues				
Intergovernmental	\$0	\$312,000	\$0	\$312,000
Other / Miscellaneous	\$0	\$819,088	\$0	\$2,083,173
Beginning Working Capital	\$0	\$0	\$0	\$1,667,228
Service Charges	\$0	\$25,002,096	\$0	\$24,457,158
<b>Total Revenue</b>	<b>\$0</b>	<b>\$26,133,184</b>	<b>\$0</b>	<b>\$28,519,559</b>

## Explanation of Revenues

This program generates \$2,850,321 in indirect revenues.  
The primary source of revenue is Medicaid payments and patient fees.

Fees \$ 24,457,158- Dental Patient Fees  
Federal \$ 312,000 - Federal Primary Care (330) Grant  
Federal \$ 2,667,228 - Care Oregon Dental Incentives  
State \$ 1,083,173 - Strategic Oral Health Investment grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40017 FQHC-Dental Services

The dental program will improve efficiency by changing the way it utilizes dental chairs and EFDA staffing to allow for increased access to patient care. This fiscal year, we are creating a workforce development pathway for dental assistant. The program will also leverage partnership with community colleges & dental hygiene schools to increase the workforce pipeline.

The projected number of encounters have been adjusted to align with anticipated COVID19 recovery, patient demand for services, predicted staffing, and historical no show rates. Based on this information we project that the dental program can deliver 73,777 visits in FY 24, a number that will provide ample access and program fiscal viability. Some vacant roles are being re-purposed to accommodate the workforce development pathways.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Women, Infants and Children Program (WIC) serves approximately 13,000 pregnant and nursing people and their infants and young children per month. WIC promotes positive health outcomes through strengthening nutrition across the life course with healthy foods and nutrition education, promoting and supporting breastfeeding, and providing comprehensive health and social service referrals.

**Program Description**

WIC provides nutritious food, nutrition education and counseling, growth monitoring, health screening, breastfeeding support, and other support networks to eligible families. WIC acts as a referral center for other health and social services, including prenatal care, immunizations, Head Start, housing and day care assistance, SNAP and other food assistance, as well as other County health programs, such as home visiting services and more. Multnomah County WIC leads with race and actively applies an equity lens to all services, programs, delivery methods, education options, staffing, and technology systems. Multnomah County WIC is a leader in innovation, and a regional partner for cross-cutting health programming and equity expertise. In 2022, WIC served approximately 19,000 unique clients with over 58,000 visits and Multnomah County WIC participants received healthful foods totaling \$7.8 million to support both nutritional health and food insecurity. During 2022, and continuing into 2023, WIC services have been exclusively remote, due to the federal waivers in place from the impact of the COVID-19 pandemic. Nonetheless, WIC has maintained its caseload and retained staff at over 95%. In early 2021, participating families rated the remote service model and its quality in meeting their needs as “excellent” in a large-scale text survey. By design, WIC exclusively serves populations experiencing health disparities and uses nutrition science research and program data to inform services. Data indicate health disparities among people of color, especially Black, Indigenous, and low income women, infants, and children, which is reflected in WIC demographic data. The program has responded through signage in multiple languages, staff who speak multiple languages fluently, interpretation services contracts, and technology to promote better access. Currently, 86% of WIC staff have language and/or cultural KSAs or are themselves immigrants or refugees. These approaches enable WIC to reach populations most disparately impacted by food and nutrition insecurity. WIC partners with culturally specific agencies and advisory boards and surveys clients to inform service delivery. For example, our WIC program partnered with Racial and Ethnic Approaches to Community Health (REACH) to bring culturally specific cooking and nutrition classes for our Black/African American/African Immigrant communities. In partnership with REACH, we hosted a Town Hall on Implicit Bias in Lactation Support. Our Breastfeeding Peer Counseling program has experienced a 50% increase in Caseload over the past 12 months.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of WIC clients in one year who receive healthful foods with E-WIC benefits	19,141	20,000	19,000	19,500
Outcome	% of WIC clients initiating breastfeeding	92%	94%	93%	93%
Outcome	# of nutrition education contacts with WIC families	57,078	48,000	57,000	57,000
Quality	% of clients served per month in languages other than English	25%	25%	25%	26%

**Performance Measures Descriptions**

The number of nutrition education contacts with WIC families represents almost a 3% increase in services in 2022. Percentage of clients served in a language other than English increased from 24% in January 2022 to 26% in January 2023.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,354,729	\$3,633,855	\$1,717,259	\$3,807,116
Contractual Services	\$58,881	\$0	\$59,330	\$2,495
Materials & Supplies	\$130,766	\$0	\$136,426	\$19,159
Internal Services	\$888,249	\$488,389	\$872,668	\$529,162
<b>Total GF/non-GF</b>	<b>\$2,432,625</b>	<b>\$4,122,244</b>	<b>\$2,785,683</b>	<b>\$4,357,932</b>
<b>Program Total:</b>	<b>\$6,554,869</b>		<b>\$7,143,615</b>	
<b>Program FTE</b>	12.40	31.95	14.06	31.94

Program Revenues				
Intergovernmental	\$0	\$3,352,540	\$0	\$4,357,932
Other / Miscellaneous	\$0	\$769,704	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,122,244</b>	<b>\$0</b>	<b>\$4,357,932</b>

## Explanation of Revenues

This program generates \$529,162 in indirect 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 FY 2017, 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.

Fed Thru State \$ 3,537,320 - State WIC grant;

Fed Thru State \$ 75,000 - State Maternal & Child Health (Title V) grant

Other \$ 745,612 - HSO county Based services -WIC.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40018 Women, Infants, and Children (WIC)

In FY 2024, despite increased costs, WIC anticipates retaining our FY23 budgeted FTE which maintains stability in operations and supports our efforts to promote centering race and the cultural communities WIC serves, as well as provide organizational structure to maintain capacity in equity-based services. 5.0 temporary FTE that were budgeted in PO #40199C in FY23, will be retained for 6 months to assist with the reopening of WIC.

COVID-19-Related Impacts - WIC services became completely remote in March 2020, remaining so throughout 2022.

USDA waivers to maintain exclusively remote service are currently in place through April 2023. We do not anticipate them to be additionally extended. In Spring of FY 2023, WIC anticipates moving to both remote and in-person services.

**Department:** Health Department      **Program Contact:** Katie Thornton  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. North Portland Health Center (NPHC) serves around 3,800 clients per year. The majority of North Portland Health Center clients represent historically underserved (Black, Indigenous, People of Color) BIPOC communities and vulnerable populations. NPHC is an important health care safety net for the community and is part of the County's FQHC.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

North Portland Health Center primary care is designed as a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. NPHC provides comprehensive, culturally appropriate services that include:

- Primary care services including treatment of acute and chronic illnesses, behavioral health, drug & alcohol treatment, family planning, prenatal and preventive services (well child, immunizations), and community health education.
- Pharmacy and lab services
- Enabling services: Medicaid eligibility screening, medical interpretation, transportation, case management and health education

The clinic provides culturally appropriate care to a diverse population with the largest groups served being the Latinx diaspora (42%), Black community (16%) and the white community (32%). The remaining 12% of our patients identify as Asian, Native American and Pacific Islander.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual patients served	4,169	4,000	4,750	5,000
Outcome	Number of visits completed	14,106	14,865	12,000	13,000

**Performance Measures Descriptions**

**Output:** Individual Patients Served. This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Specialty Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.



## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$0	\$3,857,143	\$0	\$4,205,490
Contractual Services	\$0	\$130,815	\$0	\$122,693
Materials & Supplies	\$0	\$166,110	\$0	\$171,808
Internal Services	\$0	\$1,164,752	\$0	\$1,251,351
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,318,820</b>	<b>\$0</b>	<b>\$5,751,342</b>
<b>Program Total:</b>	<b>\$5,318,820</b>		<b>\$5,751,342</b>	
<b>Program FTE</b>	0.00	25.50	0.00	24.95

<b>Program Revenues</b>				
Intergovernmental	\$0	\$673,895	\$0	\$450,000
Service Charges	\$0	\$4,644,925	\$0	\$5,301,342
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,318,820</b>	<b>\$0</b>	<b>\$5,751,342</b>

## Explanation of Revenues

This program generates \$587,506 in indirect revenues.

This program is supported by a federal BPHC grant, as well as Medicaid/Medicare fee revenue.

\$ 117,126 - Medical Fees

Federal \$ 450,000 - Federal Primary Care/Homeless grant

Federal \$ 5,184,216 - FQHC Medicaid Wraparound/Medicare

## Significant Program Changes

Last Year this program was: FY 2023: 40019 FQHC-North Portland Health Clinic

**Department:** Health Department      **Program Contact:** Katie Thornton  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Northeast Health Clinic is located in one of Portland’s oldest historic African American neighborhoods and provides integrated primary care, dental, and pharmacy services to a diverse patient population. The Northeast Health Center plays a significant role in providing safety net medical services to residents in the community. The Health Center provided care to 4,686 clients in FY 2022. NEHC is an important health care safety net for the community and is part of the County's Federally Qualified Health Center (FQHC).

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Northeast Health Clinic is designed as a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. NEHC provides comprehensive, culturally appropriate services that include:

- Primary care services, including treatment of acute and chronic illnesses, behavioral health, drug & alcohol treatment, family planning, prenatal and preventive services (well child, immunizations), and community health education
- Limited specialty care including gynecology, and acupuncture
- Pharmacy and lab services
- Enabling services: Medicaid eligibility screening, medical interpretation, transportation assistance, case management and health education

In FY 2022, the clinic saw 4,686 patients who were provided services in more than 15 different languages. NEHC plays a significant role in providing safety net medical services to residents in the community. The clinic provides culturally appropriate care to a diverse population with the largest groups serving being the Black diaspora (28%), the Latinx diaspora (35%) and those who identify as white (28%). The remaining 10% of our patients identify as Asian, Native American and Pacific Islander.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual patients served	4,686	5,000	5,200	5,500
Outcome	Number of visits completed	14,393	18,327	15,000	16,000

**Performance Measures Descriptions**

**Output: Individual Patients Served.** This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Speciality Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines. Northeast Health Center is contracted with OHSU to offer Colposcopy and LEEP procedures.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,219,021	\$0	\$4,526,452
Contractual Services	\$0	\$143,287	\$0	\$143,287
Materials & Supplies	\$0	\$196,716	\$0	\$188,998
Internal Services	\$0	\$1,648,791	\$0	\$1,721,035
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,207,815</b>	<b>\$0</b>	<b>\$6,579,772</b>
<b>Program Total:</b>	<b>\$6,207,815</b>		<b>\$6,579,772</b>	
<b>Program FTE</b>	0.00	28.20	0.00	27.03

Program Revenues				
Intergovernmental	\$0	\$985,060	\$0	\$985,060
Service Charges	\$0	\$5,222,755	\$0	\$5,594,712
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,207,815</b>	<b>\$0</b>	<b>\$6,579,772</b>

## Explanation of Revenues

This program generates \$632,346 in indirect revenues.

Northeast Health Clinic is supported by the federal BPHC grant, , Medicaid/Medicare and other medical fees.

Federal \$ 1,456,881 - Charges for Services Intergovernmental  
 Federal \$ 985,060 - Federal Primary Care (330) grant  
 Federal \$ 4,012,453 - FQHC Medicaid Wraparound  
 \$ 125,378 - Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40020 FQHC-Northeast Health Clinic

There is a reduction of 0.50 fte Office Assistant 2 and 1.25 fte Medical Assistant . A 0.50 fte regional Licensed Community Practical Nurse was added (to be shared with NPHC).

**Department:** Health Department      **Program Contact:** Amaury Sarmiento  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Mid-County Health Center (MCHC) is located in one of the most culturally diverse areas of Multnomah County and plays a significant role in providing safety net medical services to residents in the community. Over the past 12 months, the Health Center provided care to 8,674 clients. With the Refugee Clinic and culturally diverse staff, MCHC is an important partner and contributor to the refugee and asylee resettlement efforts.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Mid County Health Center primary care is designed as a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. MCHC provides comprehensive, culturally appropriate services that include:

- Primary care services including treatment of acute and chronic illnesses, behavioral health, drug & alcohol treatment, family planning, prenatal and preventive services (well child, immunizations), and community health education.
- Refugee and asylee medical screenings in contract with Oregon Department of Human Services.
- Limited specialty services including gynecology
- Pharmacy and lab services
- Enabling services: Medicaid eligibility screening, medical interpretation, transportation, case management and health education

MCHC is tightly linked with refugee resettlement agencies ( Sponsors Organized to Assist Refugees SOAR, Catholic Charities, Lutheran Community Services), the Centers of Disease Control and the State of Oregon. 65% of MCHC clients are immigrants or were refugees from areas, e.g., Ukraine, Afghanistan, DRC, Burman, Russia, Latin America, Kosovo.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual patients served	9,887	9,500	9,500	9,500
Outcome	Number of visits completed	33,659	41,693	33659	35,659

**Performance Measures Descriptions**

**Output:** Individual Patients Served. This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Specialty Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines. Mid County Health Center is contracted with the Oregon Department of Human Services to complete refugee and asylee medical screenings.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$8,576,099	\$0	\$9,852,797
Contractual Services	\$0	\$97,407	\$0	\$97,407
Materials & Supplies	\$0	\$608,117	\$0	\$608,116
Internal Services	\$0	\$2,739,422	\$0	\$2,984,893
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,021,045</b>	<b>\$0</b>	<b>\$13,543,213</b>
<b>Program Total:</b>	<b>\$12,021,045</b>		<b>\$13,543,213</b>	
<b>Program FTE</b>	0.00	54.40	0.00	55.10

Program Revenues				
Intergovernmental	\$0	\$928,950	\$0	\$928,950
Service Charges	\$0	\$11,092,095	\$0	\$12,614,263
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,021,045</b>	<b>\$0</b>	<b>\$13,543,213</b>

## Explanation of Revenues

This program generates \$1,376,436 in indirect revenues.

Mid County Health Clinic is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal \$ 3,047,979 - Medical Fees  
 Federal \$ 928,950 - Federal Primary Care (330) grant  
 Federal \$ 9,391,907 - FQHC Medicaid Wraparound  
 \$ 174,377 - Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40022 FQHC-Mid County Health Clinic

An office assistant role is added to support coordination for primary care and refugee screening services.

**Department:** Health Department      **Program Contact:** Lynne Wiley  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. East County Health Center plays a significant role in providing safety net medical services to residents in the Gresham/East Multnomah County communities. Over the past 12 months, the Health Center provided care to 9,055 clients. Of clients empaneled to the East County Health Center, 53% are Spanish speaking and 20% do not qualify for insurance coverage.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 60% are best served in a language other than English, including more than 100 different languages. Nearly 20% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

East County Health Center primary care is designed as a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. ECHC provides comprehensive, culturally appropriate services that include:

- Primary care services, including treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations)
- Integrated pharmacy and lab services
- Wraparound services: Medicaid eligibility screening, medical interpretation, transportation, case management and health education.

Over the past 12 months, the clinic saw 9,055 patients with services provided in many languages. East County Health Center plays a significant role in providing safety net medical services to residents in the community. The clinic provides culturally appropriate care to a diverse population with the largest groups served being the Latinx diaspora (64%), and the white (23%). The remaining (13%) of our patients identify as mostly Asian, Middle Eastern/North African, and Pacific Islander.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual Patients Served	8,684	9,931	9,800	9,800
Outcome	Number of visits completed	24,634	24,879	24, 879	24,988

**Performance Measures Descriptions**

**Output:** Individual Patients Served. This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Speciality Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$7,881,297	\$0	\$8,833,268
Contractual Services	\$0	\$297,736	\$0	\$318,224
Materials & Supplies	\$0	\$397,518	\$0	\$307,818
Internal Services	\$0	\$2,258,855	\$0	\$2,474,919
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,835,406</b>	<b>\$0</b>	<b>\$11,934,229</b>
<b>Program Total:</b>	<b>\$10,835,406</b>		<b>\$11,934,229</b>	
<b>Program FTE</b>	0.00	49.20	0.00	47.25

Program Revenues				
Intergovernmental	\$0	\$1,085,315	\$0	\$1,085,315
Service Charges	\$0	\$9,750,091	\$0	\$10,848,914
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,835,406</b>	<b>\$0</b>	<b>\$11,934,229</b>

## Explanation of Revenues

This program generates \$1,234,475 in indirect revenues.

East County Health Clinic is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal \$ 2,647,944 - Medical Fees - charges for services  
Federal \$ 1,085,315 - Federal Primary Care (330) grant  
Federal \$ 7,891,391 - FQHC Medicaid Wraparound  
\$ 309,579 - Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40023 FQHC-East County Health Clinic

ECHC Added 1.0 fte Provider position and reduced 0.4 fte Program Supervisor position to be shared with RCHC. The reduction also included 2.0 fte Office Assistant 2 and a 0.5 fte Medical Assistant.

**Department:** Health Department      **Program Contact:** Alexandra Lowell  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Student Health Center (SHC) program provides access to comprehensive preventive, primary, and mental healthcare for Multnomah County school-aged youth at nine Student Health Centers and is part of the County's FQHC. This program makes primary and behavioral health care services easily accessible for nearly 6,000 K-12 students each year, contributing to better health and learning outcomes for school-aged youth.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 20% of our patients have no insurance, 95% of our clients live below 200% of the Federal Poverty Guideline and nearly 2,000 of our patients report experiencing houselessness. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Healthcare for school aged youth is a basic need. The SHC sites provide critical points of access to health care regardless of insurance status through partnerships with schools, families, healthcare providers, and community agencies. SHCs contribute to learning readiness and optimize the learning environment by linking health and education for student success--in school and life.

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 preventive care and early identification and intervention, thereby promoting healthy behaviors and resilience as well as reducing risk behaviors. Program locations are geographically diverse and all Multnomah County K-12 aged youth are eligible to receive services at any SHC location, including students who attend other schools, those not currently attending school, students experiencing houselessness. The SHCs provide culturally appropriate care to a diverse population with the largest groups served being those who identify as Latinx (29%), White (29%), Black (15%), and Asian (9%). The remaining 5% of our patients identify as Pacific Islander, Native American, and Native Hawaiian. (Seventeen percent of clients services did not share or refused to share their race/ethnicity.)

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	% of patients with one or more visits with a health assessment in the last year	45%	51%	51%	51%
Outcome	Number of visits completed	18,436	16,796	14,000	16,159

**Performance Measures Descriptions**

Output: Clients (age >5 to <21) with at least one office visit encounter in the last 12 months who had health assessment. The health assessment is an exceptional tool to understand the physical and social health of the client. Outcome: The number of visits completed indicates a general level of utilization of our services and financial viability. FY22 visit numbers include the specific COVID vaccine visits performed in SHC, in addition to the regular array of primary care visits.



## Legal / Contractual Obligation

Student Health Centers (SHC) complies with CLIA (Laboratory accreditation) requirements, CCO contractual obligations, compliance with the Bureau of Primary Health 330 Grant (HRSA), and Patient-Centered Primary Care Home (PCPCH). SHC Primary Care is also accredited under Joint Commission and follows TJC accreditation guidelines.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,541,685	\$0	\$5,566,123
Contractual Services	\$0	\$163,378	\$0	\$173,778
Materials & Supplies	\$0	\$237,042	\$0	\$315,225
Internal Services	\$0	\$1,614,195	\$0	\$1,779,047
Capital Outlay	\$0	\$0	\$0	\$10,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,556,300</b>	<b>\$0</b>	<b>\$7,844,173</b>
<b>Program Total:</b>	<b>\$6,556,300</b>		<b>\$7,844,173</b>	
<b>Program FTE</b>	0.00	28.24	0.00	33.96

Program Revenues				
Intergovernmental	\$0	\$1,504,913	\$0	\$1,439,475
Other / Miscellaneous	\$0	\$85,000	\$0	\$95,000
Service Charges	\$0	\$4,966,387	\$0	\$6,309,698
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,556,300</b>	<b>\$0</b>	<b>\$7,844,173</b>

## Explanation of Revenues

This program generates \$777,588 in indirect 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.

Federal \$ 5,886,925 - Medical Fees  
 State \$ 1,066,096 - State SHC Grant  
 Federal \$ 373,379 - PC 330 Grant  
 \$ 95,000 - Roots & Wings  
 \$ 422,773 - Charges for Services -patient fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40024 FQHC-Student Health Centers

SHC added 1.5 fte Medical Assistant, 0.9 fte Community Health Nurse, 1.75 fte Clinical Svcs Specialist and a 0.8 float Office Assistant Sr.

**Department:** Health Department      **Program Contact:** Amaury Sarmiento  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. La Clinica de Buena Salud (The Good Health Clinic), provides comprehensive, culturally appropriate primary care and behavioral health services to the underinsured and uninsured residents of NE Portland's Cully Neighborhood and is part of the County's FQHC. La Clinica was strategically located, in partnership with the local community, to provide culturally competent care and vital services to approximately 2,000 people each year.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

La Clinica de Buena Salud is designed as a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. La Clinica provides comprehensive, culturally appropriate services that include:

- Primary care services, including treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations)
- Integrated pharmacy and lab services
- Wraparound services: Medicaid eligibility screening, medical interpretation, transportation, case management and health education

Although La Clinica was initially primarily served the Latinix community, the program has expanded and responded to the area's changing demographics which includes the Somali immigrants and refugees, Vietnamese, and Russian speaking families in the Cully neighborhood and beyond.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual patients served	2,083	2,100	2,100	2,100
Outcome	Number of visits completed	7,769	9,901	8,101	9,901

**Performance Measures Descriptions**

**Output:** Individual Patients Served. This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Specialty Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,013,157	\$0	\$2,607,371
Contractual Services	\$0	\$128,118	\$0	\$128,118
Materials & Supplies	\$0	\$99,410	\$0	\$99,410
Internal Services	\$0	\$631,094	\$0	\$728,423
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,871,779</b>	<b>\$0</b>	<b>\$3,563,322</b>
<b>Program Total:</b>	<b>\$2,871,779</b>		<b>\$3,563,322</b>	
<b>Program FTE</b>	0.00	12.50	0.00	13.90

Program Revenues				
Intergovernmental	\$0	\$826,069	\$0	\$826,068
Service Charges	\$0	\$2,045,710	\$0	\$2,737,254
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,871,779</b>	<b>\$0</b>	<b>\$3,563,322</b>

## Explanation of Revenues

This program generates \$364,250 in indirect revenues.

La Clinica de Buena Salud is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal \$ 666,890 - Medical Fees - Medicaid/Medicare  
 Federal \$ 826,068 - Federal Primary Care/330 grant  
 Federal \$ 1,970,362- FQHC Medicaid Wraparound  
 \$ 100,002 - Charges for Services -Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2023: 40026 FQHC-La Clinica de Buena Salud

Added an office assistant and medical assistant to support lab and primary care services.

**Department:** Health Department      **Program Contact:** Nick Tipton  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Southeast Health Clinic (SEHC) provides comprehensive, culturally appropriate primary care and behavioral health services to 3,200 people each year in the Southeast Multnomah County communities. Southeast Health Center is centrally located to serve persons living in the area as well as the central region and clients living downtown (many who were previously a Westside Clinic patient).

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Southeast Health Center is a Person Centered Medical Home. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, medication assisted therapy (MAT) and collaboration with community partners. SEHC provides comprehensive, culturally appropriate services that include:

- Primary care services, including treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations)
- Integrated pharmacy, dental, and lab services
- Wraparound services: Medicaid eligibility, interpretation, transportation, case management and health education.

Race and ethnicity of SEHC Primary Care clients reflect 15.3% Asian, 9% Black, 1% American Indian and 1.5% Pacific Islander. A key population that SEHC serves is the homeless population that continues to grow in the SEHC region, noting a 22.1% increase from 2017 to 2019. Our non-binary population who report Intimate Partner violence is experiencing a rise in houselessness over 186.7% increase (.4% to 1.1%) (2019 PIT report). Using wrap around services for our clients experiencing houselessness that include intensive case management/navigation services, addressing food insecurities (food banks, CSA partnerships for health with local farms), and referrals to community partnerships in addition to primary/specialty care is critical.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of patients served	2,320	3,400	3,400	3,500
Outcome	Number of visits completed	5188	7,370	10,500	7,400
Outcome	Number of Mobile Clinic visits completed (medical and dental)	N/A	N/A	N/A	3,500

### Performance Measures Descriptions

**Output:** Individual Patients Served. This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Specialty Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,755,896	\$0	\$4,601,283
Contractual Services	\$0	\$67,314	\$0	\$82,314
Materials & Supplies	\$0	\$139,850	\$0	\$220,985
Internal Services	\$0	\$914,070	\$0	\$1,193,532
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,877,130</b>	<b>\$0</b>	<b>\$6,098,114</b>
<b>Program Total:</b>	<b>\$3,877,130</b>		<b>\$6,098,114</b>	
<b>Program FTE</b>	0.00	17.22	0.00	26.30

Program Revenues				
Intergovernmental	\$0	\$1,365,404	\$0	\$1,365,404
Service Charges	\$0	\$2,511,726	\$0	\$4,732,710
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,877,130</b>	<b>\$0</b>	<b>\$6,098,114</b>

## Explanation of Revenues

This program generates \$642,798 in indirect revenues.  
Southeast Health Clinic is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal: \$ 166,500 - Federal Primary Care (330) grant  
 Federal: \$ 760,677 - Federal Primary Care/Homeless grant(330)  
 Federal: \$ 438,227 - Mobile Van Services(330)  
     \$ 111,688 - Charges for Services (Patient Fees)  
     \$4,116,264 - FQHC PC Mcaid/Mcare  
     \$ 504,758 - FQHC Mobile Health MCaid/Mcare

## Significant Program Changes

**Last Year this program was:** FY 2023: 40027 FQHC-Southeast Health Clinic

The Mobile Clinic aims to provide medical, dental and other health services to clients experiencing homelessness, in addition to other marginalized populations, by working with community partners across Multnomah County. The Mobile Clinic will assist these populations with OHP and other health services enrollment. The mobile clinic adds 6.0 fte and SEHC added 1.5 fte Medical Assistant, 0.5 Office Assistant 2 and 1.2 Nurse Practitioner positions.

**Department:** Health Department      **Program Contact:** Lynne Wiley  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 78237, 78238, 78239  
**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Rockwood Community Health Clinic provided comprehensive, culturally appropriate primary care and behavioral health services to 3790 patients this year.

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring access to healthcare. Rockwood Community Health Clinic (RCHC) is designed as a Patient-Centered Medical Home (PCMH). This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. RCHC provides comprehensive, culturally appropriate services that include:

- Primary care services, including treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations)
- Integrated pharmacy and lab services
- Wraparound services: Medicaid eligibility screening, medical interpretation, transportation, case management and health education.

Over the past 12 months, the RCHC clinic saw 11,132 patients with services provided or interpreted in 16 plus languages. RCHC plays a significant role in providing safety net medical services to residents in a historically underserved community. The clinic provides culturally appropriate care to a diverse population with the largest groups served being Hispanic (36%), and White (32%). The remaining 32% of our patients identify as Asian, Black, Karen, Burmese, Russian, Somali, Zomi, Dari, Farsi, Nepali, Swahili, and Rohingya.

One-time-only facilities program offers for Rockwood were funded in the FY 2024 Budget year related to ongoing repairs and investments into the building following its acquisition in January 2023 (78237-78239).

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Individual patients served	4,246	4,560	4,455	4,760
Outcome	Number of visits completed	16,155	16,371	16,270	16,564

### Performance Measures Descriptions

**Output: Individual Patients Served.** This measure describes the number of unique clients assigned to this site and have received clinical care within the last 12 months.

**Outcome:** This is the total number of in clinic visits including PCP, BHP, and Nursing Specialty Care on site. Higher visit volumes means the clinic is better able to address the complex medical needs of the community more effectively.

## Legal / Contractual Obligation

The Health Center complies with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,204,021	\$0	\$4,809,988
Contractual Services	\$0	\$241,091	\$0	\$187,057
Materials & Supplies	\$0	\$190,957	\$0	\$190,357
Internal Services	\$0	\$1,169,336	\$0	\$1,300,286
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,805,405</b>	<b>\$0</b>	<b>\$6,487,688</b>
<b>Program Total:</b>	<b>\$5,805,405</b>		<b>\$6,487,688</b>	
<b>Program FTE</b>	0.00	28.10	0.00	27.65

Program Revenues				
Intergovernmental	\$0	\$764,768	\$0	\$764,768
Service Charges	\$0	\$5,040,637	\$0	\$5,722,920
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,805,405</b>	<b>\$0</b>	<b>\$6,487,688</b>

## Explanation of Revenues

This program generates \$671,956 in indirect revenues.

Rockwood Community Health Center is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Charges for Svcs: \$ 98,794 - FQHC Rockwood Patient Fees

Federal: \$ 764,768 - Federal Primary Care (330) grant

Federal: \$ 5,624,126 - Mcaid/Mcare Charges for Services, FFS;APM

## Significant Program Changes

**Last Year this program was:** FY 2023: 40029 FQHC-Rockwood Community Health Clinic

One front desk office assistant is added to support primary care, and a Nurse Practitioner Fellow has been added as limited duration. Additionally, challenges in hiring permanent staff have led to an increase in budgeting for Temp. All of this combined with the increased wages, indirect, fringe and insurance account for the significant increases in permanent and temp staffing.

**Department:** Health Department      **Program Contact:** Bernadette Thomas  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Clinical Director's Office ensures that all clinical staff have the necessary training, skills and knowledge to practice safely and competently. Additionally, it ensures safe, cost effective patient care and ensures that providers are trained in health equity to meet of our shared goals of eliminating health disparities in access to care and health care outcomes.

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare. Primary functions of this program include:

- Develops and oversees strategic initiatives to improve care quality, achieve health equity, safety, cost effectiveness, and access; develops and implements patient care guidelines, policies, procedures, including the Health Center's response to COVID-19; Represents and advocates for the care of the clients served at Multnomah County Community Health Centers to external stakeholders such as the Oregon Health Authority, Coordinated Care Organizations (Medicaid payors) to ensure that health care funding meets the needs of the community; Recruits, hires health care providers (pharmacists, dentists, physicians, nurse practitioners including psychiatric nurse practitioners, physician's assistants), credentials and monitors provider performance; oversees medical, nursing and integrated behavioral health; Ensures that patient care meets all rules, regulations and standards set forth by regulatory agencies including the Joint Commission (TJC), contractors, grantors and accrediting agencies. This required element ensures safety, quality of care, as well as to keep HRSA grant funding intact. Accountable for legal conformance, quality and safety of patient care, need-based and scientifically justified service design, and efficient use of public funds. This includes Joint Commission (TJC), HRSA, PCPCH, Reproductive Health Grants, and consultation with HIV services on Ryan White grant; Supervises Site Medical Directors, the Behavioral Health and Addictions Manager, Primary Care Medical Director and Deputy Medical Director, Pharmacy Director, and Dental Director to achieve the above items.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	80% of primary care providers are maintaining and serving their maximum panel size	79%	80%	78%	80%
Outcome	Maintain compliance with regulatory and licensing standards/boards	100%	100%	100%	100%
Output	Increase # of patients seen in the past year calendar year (unique patients) to pre-covid numbers	50,028	N/A	54,000	60,000
Quality	Implement quarterly peer review, all services.	NA	NA	NA	100%

### Performance Measures Descriptions

Measure 1 focuses on value in care delivery and good patient outcomes (including access to care)

Measure 2 maintains regulatory standards required by the health center program.

Measure 3 This output has been changed to include the number of unique clients served by the health center (medical and dental).

Measure 4 is part of our Racial Equity, Diversity, Inclusion (RE.D.I.) initiative



## 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, HRSA 330 Primary Care grant compliance, stipulations of multiple federal and state grants, and CCO contractual obligations.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,400,488	\$0	\$1,317,565
Contractual Services	\$0	\$86,000	\$0	\$106,000
Materials & Supplies	\$0	\$87,144	\$0	\$112,408
Internal Services	\$0	\$307,311	\$0	\$308,574
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,880,943</b>	<b>\$0</b>	<b>\$1,844,547</b>
<b>Program Total:</b>	<b>\$1,880,943</b>		<b>\$1,844,547</b>	
<b>Program FTE</b>	0.00	4.10	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$87,588	\$0	\$116,413
Other / Miscellaneous	\$0	\$276,100	\$0	\$278,000
Beginning Working Capital	\$0	\$200,000	\$0	\$200,000
Service Charges	\$0	\$1,317,255	\$0	\$1,250,134
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,880,943</b>	<b>\$0</b>	<b>\$1,844,547</b>

## Explanation of Revenues

This program generates \$184,064 in indirect revenues.  
The Clinical Directors Office is funded with State grants and patient revenue.

State: \$ 116,413 - Federal and State family Planning  
 \$ 1,250,134 - FQHC Medicaid Wraparound(charges for services)  
 \$ 278,000 - Medicaid Quality and Incentives  
 \$ 200,000 - Beginning Working Capital

## Significant Program Changes

**Last Year this program was:** FY 2023: 40030 FQHC-Clinical Director

ICS hired a Human Resources specialist 2 to help recruit and retain providers and professional staff. This position was transferred to HD Human Resources.

**Department:** Health Department      **Program Contact:** Michele Koder  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The pharmacy program provides critical medication access to Health Department clients as well as emergency preparedness programs. The pharmacies dispense approximately 380,000 prescriptions per year to insured, underinsured and uninsured clients of Primary Care Clinics, Dental Clinics, Student Health Centers, HIV Health Services Center, Sexually Transmitted Disease (STD) Clinic, Communicable Disease Services and Harm Reduction clinics. The program also provides integrated clinical pharmacy services among the seven primary care clinics and HIV Health Services Center (FQHC services).

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Medications are primarily purchased through the 340B drug pricing program (a US federal government program created in 1992 that requires drug manufacturers to provide outpatient drugs to eligible covered entities at significantly reduced prices). Different contracts are used to provide a limited supply of medications for individuals upon release from County Corrections, Expedited Partner Therapy, and naloxone to community partners and first responders. The pharmacies tailor services to each individual and provide talking prescription labels, dual language labels and customized adherence packaging.

Revenue generated by the pharmacies are used to provide discounted medications for underinsured and uninsured clients - no client is denied medication due to inability to pay. Revenue is also used to support other services within ICS, including but not limited to, medication disposal services and the Clinical Pharmacy program.

The Clinical Pharmacy program currently consists of 10 clinical pharmacists who are embedded in primary care clinics and the HIV Health Services Center. Clinical pharmacists offer essential services that go beyond dispensing medication: they assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and manage chronic conditions such as diabetes.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Prescription Volume	369,584	372,000	380,000	390,000
Outcome	Average Prescription Cost	32	38	34	36
Outcome	Capture rate	52%	60%	55%	60%
Quality	Adherence Support	715	700	750	800

### Performance Measures Descriptions

1. Prescription Volume (prescriptions filled) reflects the number of prescriptions filled during the fiscal year. 2. Average Prescription Cost reflects the costs associated with filling a prescription minus the actual cost of the medication. 3. Capture Rate is the percentage of prescriptions filled by primary care providers that are filled at County pharmacies. 4. Adherence Support refers to the number of clients enrolled in appointment-based refills and medication synchronization services or who receive specialized packaging to assist in the proper use of medications.

## Legal / Contractual Obligation

Various grants require the provision of pharmacy services. State mandated public health services are provided. Pharmacy services are a requirement of the Bureau of Primary Care 330 Grant and those services and revenue must be in compliance with the HRSA Community Health Center Program operational and fiscal requirements. In addition, pharmacies must comply with all Oregon Board of Pharmacy and DEA regulations and are accredited by The Joint Commission.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$10,633,173	\$0	\$11,895,116
Contractual Services	\$0	\$114,464	\$0	\$318,037
Materials & Supplies	\$0	\$21,940,418	\$0	\$23,097,544
Internal Services	\$0	\$3,617,083	\$0	\$3,832,152
Capital Outlay	\$0	\$200,000	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$36,505,138</b>	<b>\$0</b>	<b>\$39,142,849</b>
<b>Program Total:</b>	<b>\$36,505,138</b>		<b>\$39,142,849</b>	
<b>Program FTE</b>	0.00	63.53	0.00	61.63

Program Revenues				
Service Charges	\$0	\$36,505,138	\$0	\$39,142,849
<b>Total Revenue</b>	<b>\$0</b>	<b>\$36,505,138</b>	<b>\$0</b>	<b>\$39,142,849</b>

## Explanation of Revenues

This program generates \$1,661,747 in indirect revenues.  
Pharmacy is funded exclusively through prescription fees (third party reimbursements) and patient fees.

Federal \$ 36,470,054 - Intergovernmental  
\$ 2,672,795 - Patient Fees/Charges for services

## Significant Program Changes

Last Year this program was: FY 2023: 40031 FQHC-Pharmacy

Pharmacy program reduced 1.0 Office Assistant 2, 1.0 fte Program Specialist and 1.0 Program supervisor positions and added 1.0 fte Operations Supervisor position.

**Department:** Health Department      **Program Contact:** Matthew Hoffman  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Central Lab and the Health Information Management program support the delivery of care to clients of Health Department services including Primary Care, Student Health Centers, Sexually Transmitted Disease Clinic, Communicable Diseases Services, Dental, and Corrections Health. Medical Records helps to ensure comprehensive clinical documentation and compliance with all applicable licensing, regulatory and accreditation standards as well as serving as the Privacy Manager for the Health Department.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

The Central Lab and the Health Information Management program support the delivery of care to clients of Health Department services including Primary Care, Student Health Centers, Sexually Transmitted Disease Clinic, Communicable Diseases Services, Dental, and Corrections Health. The lab handles approximately 250,000 specimens per year. Medical Records fulfills approximately 13,000 medical records requests per year. Performs laboratory tests on client and environmental specimens, manages external laboratory contracts, prepares for emergencies (including bioterrorism), and assists with the surveillance of emerging infections. Access to laboratory testing assists in the diagnosis, treatment, and monitoring of clients receiving healthcare in Health Department facilities.

Health Information Management program 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of records requests completed	12644	13,000	13,000	13,000
Outcome	Lab proficiency/competency assessments completed	95	95	95	95

**Performance Measures Descriptions**

Output: Number of records requests completed is an indicator of work performance of Medical Records program; Quality: Proficiency and Competency assessments completed are an indicator of appropriate skills and training of Lab staff.

## Legal / Contractual Obligation

Federal and state mandates in addition to the Bureau of Primary Health Care 330 Grant require maintenance of health records, including medical, dental, and pharmacy, as well as the provision of laboratory services. The electronic health record (EHR) and practice management contractual obligations are per the contractual agreement with the Health Department and OCHIN. The laboratory program is accredited by the Joint Commission. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$3,635,018	\$0	\$2,347,550
Contractual Services	\$0	\$86,500	\$0	\$54,500
Materials & Supplies	\$0	\$139,818	\$0	\$39,338
Internal Services	\$0	\$1,122,931	\$0	\$986,036
Capital Outlay	\$0	\$150,000	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,134,267</b>	<b>\$0</b>	<b>\$3,427,424</b>
<b>Program Total:</b>	<b>\$5,134,267</b>		<b>\$3,427,424</b>	
<b>Program FTE</b>	0.00	31.60	0.00	18.50

Program Revenues				
Beginning Working Capital	\$0	\$500,000	\$0	\$334,426
Service Charges	\$0	\$4,634,267	\$0	\$3,092,998
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,134,267</b>	<b>\$0</b>	<b>\$3,427,424</b>

## Explanation of Revenues

This program generates \$327,952 in indirect revenues. Revenue generated from laboratory services are included in the medical visit revenue posted to the health clinics and is used to offset the cost of services not collected from clients.

### Lab

\$ 856,329 - Fee for Services (FFS) - Medicaid - CareOregon

\$ 848,995 - Fee for Services (FFS) - Medicare

### Medical Records

\$ 334,426 - Other - Medicaid Quality and Incentives

\$ 1,387,674 - FQHC Medicaid Wraparound

## Significant Program Changes

**Last Year this program was:** FY 2023: 40032 FQHC-Lab and Medical Records

Beginning in FY 2024, Central Lab operations will be discontinued (this does not impact sterilization, records mgt, or HIPAA). This change will bring Quest Diagnostics directly into the primary care clinic laboratories. Quest will be installing their own computers with their own laboratory information system (LIS) and will provide phlebotomists for venipuncture and specimen processing. Current Medical Laboratory Technicians will bring greater support for the medical assistants and nurses by continuing their expertise in quality control, quality assurance, quality improvement and training staff on point of care testing.

**Department:** Health Department      **Program Contact:** Tony Gaines  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Multnomah County Health Center is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Patient Access Center (PAC) is the gateway for existing patients and all new community members seeking to establish care with Multnomah County Health Department’s (MCHD) Primary Care and Dental programs. PAC also provides written translation, oral and sign language interpretation throughout the department’s programs and services, as well as triage and recall appointments.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

The Patient Access Center (PAC) is the point of entry for scheduling new and established clients for the Primary Care clinics. PAC also schedules new and established dental clients seeking both urgent and routine dental services. PAC provides appointments and referrals in collaboration with County and other community organizations, ensuring consistent patient information and tracking. PAC also provides information for MCHD medical, dental, social services and key community service partners.

PAC’s Language Services program provides interpretation in over 80 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 to receive culturally competent interpretation throughout all of the MCHD programs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of calls answered	310,000	320,000	320,000	320,000
Outcome	Average telephone abandonment rate (goal: at or below 15%)	37%	15%	20%	15%

**Performance Measures Descriptions**

Output: Number of calls answered by PAC during the fiscal year. This number is an indicator of performance and demand for services.  
Outcome: Average percent of calls that are disconnected before a PAC representative can answer. This is an indicator of performance and patient experience.

## Legal / Contractual Obligation

PAC is in the scope of the Primary Care 330 Grant must follow the HRSA Community Health Center Program operational and fiscal compliance requirements.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,728,817	\$0	\$3,540,156
Contractual Services	\$0	\$45,660	\$0	\$110,000
Materials & Supplies	\$0	\$12,401	\$0	\$24,922
Internal Services	\$0	\$888,235	\$0	\$1,025,584
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,675,113</b>	<b>\$0</b>	<b>\$4,700,662</b>
<b>Program Total:</b>	<b>\$3,675,113</b>		<b>\$4,700,662</b>	
<b>Program FTE</b>	0.00	27.00	0.00	30.25

Program Revenues				
Intergovernmental	\$0	\$758,626	\$0	\$906,600
Other / Miscellaneous	\$0	\$640,000	\$0	\$640,000
Beginning Working Capital	\$0	\$605,000	\$0	\$111,362
Service Charges	\$0	\$1,671,487	\$0	\$3,042,700
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,675,113</b>	<b>\$0</b>	<b>\$4,700,662</b>

## Explanation of Revenues

This program generates \$494,560 in indirect revenues.

The Patient Access Center (PAC) is funded with Medicaid revenue, HRSA/Bureau of Primary Care grant revenue and medical fees. ARPA funds were approved in order to support the addition of Limited Duration (LD) PAC positions.

\$ 3,042,700 - Medical Fees FQHC Medicaid Wraparound

\$ 751,362 - Medicaid Quality and Incentive & Beginning Working Capital(BWC)

Federal: \$ 906,600 - Federal Primary Care (330) grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40033 FQHC-Primary Care and Dental Access and Referral

PAC added 3.5 Community Health Nurse triage nurse positions and eliminated 1.0 fte Office Assistant 2 position. A Manager 2 position was transferred from PC Planning and infrastructure program offer to PAC.

**Department:** Health Department      **Program Contact:** Adrienne Daniels  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Administration and Operations Program provides pivotal administrative, operational, and financial oversight of the Health Center program by developing and implementing fiscal accountability programs and access to health care. This includes teams and staff who help implement workflows, quality evaluations, financial reporting, patient engagement strategies, and workforce support.

**Program Description**

This program supports services within the project scope of the Bureau of Primary Health Care (BPHC) grant. BPHC funding requires strict adherence to federal laws mandating which services must be provided by FQHCs, which results in additional Medicaid revenue.

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Activities supported in this program include developing and implementing fiscal accountability and monitoring infrastructure, management of revenue cycle activities, implementation of strategic projects, support for operational workflows to increase patient access to care, and projects designed to improve health outcomes. Examples of this type of work include support for transitioning and training clinical teams to expand virtual care, designing patient communication campaigns for managing chronic diseases, and designing reporting materials to reflect operational needs in fiscal and value based pay systems.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Medical Coding Accuracy: % of claims accepted by insurance partners	N/A	N/A	N/A	95%
Outcome	% of patient communication materials are developed in the top five patient languages	N/A	100%	100%	100%
Outcome	Completion of annual strategic planning activities and three year plan in alignment with CHC Board's vision.	100%	100%	100%	100%

**Performance Measures Descriptions**

Medical Coding Accuracy: improves insurance billing and payment rates, which supports fiscal sustainability. Patient Communication: providing accessible materials in prevalent languages improves patient experience, health promotion, and effective disease management. Strategic planning: All FQHCs are required to complete strategic planning every three years, which should include both operational, fiscal, and facilities planning in partnership with the Community Health Center Board.



## Legal / Contractual Obligation

Quality services are a requirement of the Bureau of Primary Health Care's 330 Grant. Services in the scope of the grant and health center program must follow the HRSA Community Health Center Program's operational, fiscal, and governance requirements. The program is also accredited under The Joint Commission and follows TJC accreditation guidelines. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$7,272,998	\$0	\$9,243,423
Contractual Services	\$0	\$224,500	\$0	\$263,000
Materials & Supplies	\$0	\$123,125	\$0	\$247,868
Internal Services	\$0	\$1,953,711	\$0	\$2,290,660
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$9,574,334</b>	<b>\$0</b>	<b>\$12,044,951</b>
<b>Program Total:</b>	<b>\$9,574,334</b>		<b>\$12,044,951</b>	
<b>Program FTE</b>	0.00	46.40	0.00	43.80

Program Revenues				
Intergovernmental	\$0	\$1,120,963	\$0	\$1,225,755
Other / Miscellaneous	\$0	\$1,887,481	\$0	\$5,196,500
Beginning Working Capital	\$0	\$1,450,000	\$0	\$650,000
Service Charges	\$0	\$5,115,890	\$0	\$4,972,696
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,574,334</b>	<b>\$0</b>	<b>\$12,044,951</b>

## Explanation of Revenues

This program generates \$1,291,306 in indirect revenues.

Administration and Operations activities are funded with HRSA grant revenue, Medicaid fees, and quality incentive payments. Program leadership are working with CCO's to develop sustainable funding for quality assurance, data reporting work.

- \$ 5,116,696 - FQHC Medicaid Wraparound
- \$ 3,302,500 - Federal Primary Care (330) grant
- Federal: \$ 1,225,755 - Medicaid Quality and Incentives
- \$ 1,800,000 - CareOregon grant award for Quality & Patient Engagement
- \$ 600,000 - CareOregon Workforce Sustainability grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40034 FQHC-Administration and Operations

Staff realignment with services and moving staff to the appropriate programs.

**Department:** Health Department      **Program Contact:** Adrienne Daniels  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Integrated Clinical Services (ICS) Division of the Health Department has negotiated new Federally Qualified Health Center (FQHC) and Alternative Payment Methodology (APM) rates with the State of Oregon for healthcare services reimbursement. The State established the new rates retroactively and reimbursed ICS for the difference. The newly established ICS (FQHC) enterprise fund is required to establish reserve and contingency funds to provide fiscal stability and compliance with HRSA requirements to ensure continuity of services.

**Program Description**

**ISSUE:** The ICS revenue will fluctuate from year to year.

**PROGRAM GOAL:** Reserve and contingency funds will help to provide ongoing fiscal stability and compliance.

**PROGRAM ACTIVITY:** ICS, the Federally Qualified Health Center, is majority funded by visit revenue from State and Federal sources. Both Federal and State revenue sources may fluctuate from year to year. During FY 2022 the State approved and implemented new reimbursement rates and made retroactive payments. These funds are required to be utilized for the continuation and of mandated healthcare services for the most vulnerable people of Multnomah County.

Reserve and contingency funds will create ongoing stability for ICS and protect the program from unexpected revenue declines from economic fluctuations and unexpected costs. These fiscal stability approaches are informed by government accounting best practices, Health Resource and Services Administration (HRSA) guidelines, and by Multnomah County's Financial and Budget Policies.

The reserve and contingency funds was established in FY 2023. Each year, funding will be added to the reserve. The reserve fund will ensure the long-term financial stability of the program. The contingency fund will allow ICS to address unforeseen future expenses.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percent of reserve goal met	N/A	N/A	N/A	100%
Outcome	Compliance with all HRSA 330 Grant financial requirements	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Unappropriated & Contingency	\$0	\$9,400,000	\$0	\$50,000,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$9,400,000</b>	<b>\$0</b>	<b>\$50,000,000</b>
<b>Program Total:</b>	<b>\$9,400,000</b>		<b>\$50,000,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$9,400,000	\$0	\$50,000,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,400,000</b>	<b>\$0</b>	<b>\$50,000,000</b>

Explanation of Revenues

\$50.0 million of Beginning Working Capital

Significant Program Changes

Last Year this program was: FY 2023: 40034B FQHC - Contingency and Reserves

**Department:** Health Department      **Program Contact:** Adrienne Daniels  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Multnomah County's Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Together, our eight primary care clinics, seven dental clinics, nine student health centers, seven pharmacies, and laboratory services serve more than 60,000 patients per year, with a focus on people who otherwise have limited access to health care.

The Community Health Center Board (CHCB) is the federally mandated consumer-majority governing board that oversees the County's Community Health Center (also known as a public entity Federally Qualified Health Center-FQHC).

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

The Community Health Center Board (CHCB) 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. The CHCB must have a minimum of 51% MCHD health center consumer membership to meet federally mandated program requirements for FQHCs. Meeting the federal mandated program requirements allows the Health Center retain the federal grant and all benefits associated with the FQHC status. The CHCB works closely with the Community Health Center 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 CHCB 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 persons who use the Health Department's FQHC clinical services. The Council is currently comprised of 10 members and is a fair representation of the communities served by the Health Department's Health Center services.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of CHCB Meetings	12	12	12	12
Outcome	Percentage of consumers involved on the CHCB	51%	51%	51%	51%

### Performance Measures Descriptions

**Output:** The Community Health Center Board must meet at least monthly, as required by Bureau of Primary Care FQHC requirements to perform board responsibilities.

**Outcome:** The Community Health Center Board must ensure 51% patient majority per federal requirements.

## Legal / Contractual Obligation

HRSA's 19 mandatory program requirements include Board Governance for the Community Health Center Board and oversight of quality assurance, health center policies, financial performance, patient satisfaction, health center executive director (ICS Director) accountability for the FQHC's compliance and operations.

All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$311,265	\$0	\$524,333
Contractual Services	\$0	\$32,000	\$0	\$36,000
Materials & Supplies	\$0	\$5,450	\$0	\$14,700
Internal Services	\$0	\$70,617	\$0	\$104,467
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$419,332</b>	<b>\$0</b>	<b>\$679,500</b>
<b>Program Total:</b>	<b>\$419,332</b>		<b>\$679,500</b>	
<b>Program FTE</b>	0.00	2.00	0.00	3.00

Program Revenues				
Other / Miscellaneous	\$0	\$419,332	\$0	\$679,500
<b>Total Revenue</b>	<b>\$0</b>	<b>\$419,332</b>	<b>\$0</b>	<b>\$679,500</b>

## Explanation of Revenues

This program generates \$73,249 in indirect revenues.  
 \$ 679,500- HD FQHC PCPM Funding - Health Council

## Significant Program Changes

**Last Year this program was:** FY 2023: 40036 FQHC-Community Health Council and Civic Governance

Added 1.0 Manager 1 position that was transferred from Admin and Operations program offer.

**Department:** Health Department      **Program Contact:** Andrea Hamberg  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T  
**Program Characteristics:**

**Executive Summary**

Environmental Health Community Programs (EHCP) works to eliminate environmental hazards that contribute to racial and ethnic health disparities. Program areas include community environments, toxics reduction, woodsmoke curtailment, and climate change, with an explicit focus on environmental justice and vulnerable populations, and addressing health inequities in lead poisoning, respiratory illness, cardiovascular disease, and traffic crash injury. Activities include monitoring and assessing environments, policies, and health; providing technical assistance and data expertise; reporting; communications; and direct services.

**Program Description**

EHCP is a continuum of services that ensure all county residents have access to optimal living conditions. 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: works closely with the REACH program to ensure safe and healthy neighborhoods through participation in local planning efforts, data analysis, and technical assistance to help community understand environmental risks. Housing: upholds County regulations on habitability, provides technical assistance and decision support relating to encampments, energy efficiency upgrades, and household toxics. Toxics Reduction: identifies exposure risks to contaminated land, air, water, consumer goods, and industrial production, and makes technical information accessible to the public as part of empowering communities to advocate on their own behalf. Woodsmoke: implements County Ordinance 1253, curtailing wood burning on winter days with high air pollution. Implementation includes issuing daily air quality forecasts; fielding complaints, investigations and enforcement; conducting outreach campaigns; monitoring health burdens from air pollution; and working with governmental and community stakeholders to reduce impacts among the populations most affected. Climate Change: works to understand upstream, emerging health issues related to climate change and protect the public's health from their impacts. With communities of color experiencing disproportionate burdens of the above issues, EHCP monitors racial disparities in exposures as well as outcomes as part of its environmental justice approach. Exposure measure examples include proximity to sources of air pollution, presence of lead, toxic fish consumption, urban heat, and access to physical activity. Outcome measures are drawn from data on deaths and illnesses linked to environmental hazards, such as cancer, asthma, heart disease, diabetes, dementia, lead poisoning, traffic crash injuries, heat illness, and vector-borne disease. These data then guide programming to focus on communities experiencing disparities through multilingual services, culturally specific education and communications, partnerships with community-based organizations and culturally specific County programs, and community engagement through coalitions, focus groups, and interagency work groups.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Reach and impressions of community members receiving information on environmental threats	7,008,203	800,000	22,814,212	14,000,000
Outcome	Number of children with reduced Elevated Blood Lead Level (EBLL) as a result of environmental investigations	704	60	70	65
Outcome	Number of policies adopted that include health- and health justice-based recommendations	7	10	9	15
Outcome	Proportion of people aware of and complying with the woodsmoke curtailment ordinance	32%	50%	81%	80%

**Performance Measures Descriptions**

1) Includes all program areas, counting community members receiving mailings, attending events, direct contact with staff, visiting websites/social media, and exposure to media campaigns. 2) Dependent on refugee arrivals 3) Policy recommendations are developed with an environmental justice lens. FY24 offer reflects increased staffing. 4) Measured by a survey. Compliance defined as respondents reporting burning wood only on "green days" or not at all.

## Legal / Contractual Obligation

City of Portland codes 8.20.210, 8.20.200, 29.30.110, 29.30.060, and Multnomah County Housing Code 21.800; Multnomah County Code Chapter 21.450 Air Quality Regulation of wood burning devices and recreational burning. Contract with State of Oregon, Port of Portland and Portland Bureau of Environmental Services to provide outreach & education related to consuming fish from Portland Harbor Superfund site. Contract with Port of Portland for similar outreach for Columbia Slough. Contract with Metro for brownfields analysis. Contract with Portland Water Bureau to provide information, education and access to water testing for lead. Contract with Health Share of Oregon to provide climate and health services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$517,922	\$1,340,459	\$748,597	\$991,835
Contractual Services	\$5,124	\$85,055	\$21,276	\$269,849
Materials & Supplies	\$13,936	\$70,633	\$75,601	\$40,278
Internal Services	\$520	\$255,016	\$600	\$218,305
<b>Total GF/non-GF</b>	<b>\$537,502</b>	<b>\$1,751,163</b>	<b>\$846,074</b>	<b>\$1,520,267</b>
<b>Program Total:</b>	<b>\$2,288,665</b>		<b>\$2,366,341</b>	
<b>Program FTE</b>	3.75	9.75	4.65	6.65

Program Revenues				
Intergovernmental	\$0	\$1,518,342	\$0	\$1,369,024
Service Charges	\$0	\$232,821	\$0	\$151,243
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,751,163</b>	<b>\$0</b>	<b>\$1,520,267</b>

## Explanation of Revenues

This program generates \$138,561 in indirect revenues.

\$ 128,000 - PWB City Lead Line

\$ 115,000 - Fish Advisory Outreach funding

State: \$ 868,211 - Modernization Local

\$ 22,813 - Brownfield Public Health Assessment Tool

\$ 151,243 - Fish Advisory IGA with EPA

\$ 175,000 - HealthShare of Oregon

\$ 60,000 - Columbia Slough Fish Consumption

## Significant Program Changes

**Last Year this program was:** FY 2023: 40037 Environmental Health Community Programs

The program filled permanent management positions. Due to recruitment delays, some new positions in FY23 have not been filled; we expect to do so before the start of FY24.

**Department:** Health Department      **Program Contact:** Steve Sutton  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Health Department’s Human Resources provides expertise, consultation and leadership to ensure a highly skilled and diverse workforce is hired and retained while upholding the department’s core values of equity and inclusion, managing the compliance of personnel rules and legal requirements and developing and maintaining partnerships with labor unions and community stakeholders. The Human Resources team is staffed with individuals of diverse educational, professional, cultural and lived backgrounds that offer a high-level of expertise and competency and also reflect our departments workforce core values.

**Program Description**

The program consists of critical functions that support the Health Department's Human Resources objectives. Recruitment and staffing continue to be a critical priority in our operating goals. The staffing crisis as well as the stress of on-going emergency response actions within the Health Department, drives our need to strengthen HR staff resources, build skills and increase capacity to respond at the highest level. Other Human Resources operations areas include Workday (employee enterprise system) implementation, Leave Administration, ADA, Privacy Compliance, Class Comp, Data Management and Employee Record Maintenance. The Workforce Equity Strategic Plan (WESP) focus areas; Organizational Culture, Promotion and Professional Development, Retention and Recruitment and Workforce Development require all functional and support areas of HR operations to achieve effective and measurable outcomes.

Offering employee relations that involve working with management and staff on matters related to team development, employee and supervisor performance management and coaching, and corrective action and discipline continue to be our priority as well. This work also involves partnering with union staff representing AFSCME Local 88, Dentists, Physicians and Psychiatrists, Pharmacists and Oregon Nurses Association collective bargaining agreements.

Other priorities include maintaining organizational effectiveness within our functional areas in addition to our ability to report accurate workforce data that will inform our decisions and align with our equity lens. Our objective is to continue to provide high-quality customer service and responsiveness to all levels of our workforce including during any emergency response coordination and actions.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	% increase in diversity of workforce	2.5	3	2	3
Outcome	% increase in diversity of hires through the increased focus on diversity in recruitment strategies	6	4	3	3
Output	% Completion of Annual Performance Planning and Review	71%	90%	90%	90%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$4,180,668	\$0	\$4,211,081	\$0
Contractual Services	\$7,859	\$0	\$8,252	\$0
Materials & Supplies	\$15,029	\$0	\$15,781	\$0
Internal Services	\$688,908	\$0	\$400,770	\$290,595
<b>Total GF/non-GF</b>	<b>\$4,892,464</b>	<b>\$0</b>	<b>\$4,635,884</b>	<b>\$290,595</b>
<b>Program Total:</b>	<b>\$4,892,464</b>		<b>\$4,926,479</b>	
<b>Program FTE</b>	26.68	0.00	24.88	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$290,595
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$290,595</b>

Explanation of Revenues

State: Public Health Modernization - \$152,720  
 Federal: Federal Strengthening Public Health Infrastructure & Workforce - \$137,875

Significant Program Changes

Last Year this program was: FY 2023: 40039A Human Resources

Human Resources reduced 2.00 FTE to meet constraint - One Office Assistant and one Human Resource Analysts II.

**Department:** Health Department      **Program Contact:** Steven Sutton  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Integrated Clinical Services Provider Recruitment Specialist program will provide targeted recruitment for highly qualified and diverse healthcare providers for the organization. This position will be responsible for actively seeking out and recruiting dentists, physicians, nurse practitioners, physician assistants, pharmacists, and other providers within ICS. The Specialist will also support the credentialing process, ensuring that all new providers meet ICS standards and requirements.

**Program Description**

Provider vacancies can have a significant impact on the financial stability of a health center. When a provider position remains unfilled, patients may choose to seek care elsewhere, resulting in a loss of revenue. This can have a ripple effect, as the health center may have to cancel or reschedule appointments, leading to decreased patient satisfaction and further reductions in revenue. Additionally, the cost of recruiting and training a new provider can be substantial, and a prolonged vacancy can result in increased labor costs as other providers are asked to pick up the slack. In order to maintain financial stability, it is important for health centers to fill provider vacancies in a timely manner. The ICS Provider Recruitment Specialist program is a strategically developed position, intended help mitigate the negative effects of provider vacancies by actively seeking out and recruiting the best candidates for open positions. The ICS Provider Recruitment Specialist will play a crucial role in the organization by helping to address equity in healthcare. The Specialist will be tasked with attracting a diverse pool of providers, including those from underrepresented groups, to ensure that all patients receive quality care regardless of their background or identity. To achieve this goal, the Specialist will use a variety of recruitment methods, such as attending job fairs, conducting outreach to professional organizations, and utilizing social media. The position is supported by research that shows that a diverse healthcare workforce leads to improved patient outcomes. Studies have shown that patients are more likely to trust and feel comfortable with providers who come from similar backgrounds or experiences. By attracting a diverse pool of providers, ICS will be able to better serve the needs of its patients and help close disparities in healthcare. The ICS Provider Recruitment Specialist program is an important step in ensuring that the organization provides equitable and quality healthcare to all patients. With the Specialist's expertise and dedication, ICS can attract and retain the best providers and continue to provide exceptional care for years to come.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of successful recruitments	N/A	N/A	N/A	20
Outcome	Reduction in vacancy days	N/A	N/A	N/A	30

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$152,753	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$152,753</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$152,753</b>	
<b>Program FTE</b>	0.00	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:

**Department:** Health Department **Program Contact:** Wendy Lear  
**Program Offer Type:** Support **Program Offer Stage:** Adopted  
**Related Programs:** 40041, 40042, 40040B, 40040C, 40040D  
**Program Characteristics:**

**Executive Summary**

This program offer supports the essential financial and business management services of the Health Department. Services include financial reporting, account balancing, cash management, accounts payable services and budget development. Equity is a core value that informs all decisions, planning and service provision in the division.

**Program Description**

This program provides financial reporting and forecasting, grant accounting, fiscal compliance, budget development, cash management and accounts payable services. Teams collaborate with the County's Budget Office and Central Finance units. Teams follow the County's budget, financial and administrative procedures, policies and practices. By managing complex federal, state, county and funder requirements, these fiscal stewards help ensure the department can achieve its mission.

The Financial and Business Management division is committed to centering equity in policy and practice and in service to the Health Department's value of racial equity and mission to reduce health disparities. The division will continually invest time and resources into identifying and then dismantling internal and external structures that contribute to inequity, including the culture of white supremacy. The division employs a finance strategy to preserve critical services and support infrastructure for improved health outcomes. We strive to build trusting partnerships with community partners we depend on and we genuinely engage with communities and staff to drive positive changes, especially in the areas of business, operational and financial management. We pride ourselves on our ability to recruit, retain and promote a diverse, inclusive and high-performing workforce. The division is working to advance the objectives outlined in the Workforce Equity Strategic plan by committing resources for an equity and inclusion committee and operationalizing its policy recommendations.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of invoices processed	15,442	12,500	14,500	14,000
Outcome	Yearly average % of all cash receipts recorded in the month in which they were received.	N/A	N/A	97%	97%
Quality	Number of audit findings in County's annual financial audit.	No findings	No findings	No findings	No findings

**Performance Measures Descriptions**

'# of invoices processed' measures output for the accounts payable unit. 'Yearly average % of all cash receipts recorded in the month in which they were received' measures the average timeliness of deposits through the fiscal year. This is a new measure implemented in FY23. The division aims to avoid auditing findings for the department by prioritizing compliance and ensuring accurate and accessible documentation.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$6,069,203	\$0	\$6,350,316	\$0
Contractual Services	\$308,638	\$0	\$266,507	\$0
Materials & Supplies	\$81,627	\$0	\$431,881	\$0
Internal Services	\$2,889,724	\$0	\$2,926,770	\$0
<b>Total GF/non-GF</b>	<b>\$9,349,192</b>	<b>\$0</b>	<b>\$9,975,474</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$9,349,192</b>		<b>\$9,975,474</b>	
<b>Program FTE</b>	38.00	0.00	37.00	0.00

Program Revenues				
Other / Miscellaneous	\$13,753,490	\$0	\$16,302,398	\$0
<b>Total Revenue</b>	<b>\$13,753,490</b>	<b>\$0</b>	<b>\$16,302,398</b>	<b>\$0</b>

Explanation of Revenues

Departmental Indirect - \$16,302,398

Significant Program Changes

Last Year this program was: FY 2023: 40040A Financial and Business Management Services

Financial and Business Management eliminated a 1.00 FTE administrative analyst position. In addition, the division added a 1.0 FTE Budget Analyst to assist with a growing workload in Behavioral Health and a 1.00 Financial Reporting Project Manager to provide expertise and management to the Financial Reporting team.

**Department:** Health Department      **Program Contact:** Braidy Estevez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40040A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program will support the revenue cycle processes of the Behavioral Health division. As experts in behavioral health reimbursement and billing processes, this team will optimize the use of a practice management system for accurate and timely billing.

**Program Description**

This program offer supports two positions on the finance team providing targeted support to the Behavioral Health division. This program offer will improve data quality and billing processes. The team will be responsible for cleaning up accounts receivable data to allow billing staff to reprocess Behavioral Health Division’s claims. This will allow the Behavioral Health division to maximize County revenue by adjusting payment, identifying owed amount, or further pursuing payment from the payer. This team will ensure accuracy of the encounters processed.

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**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of encounters processed for payment	N/A	7,000	7,000	7,000
Outcome	Percent of behavioral health receivables aged (older than 90 days )	N/A	33%	33%	33%

**Performance Measures Descriptions**

Number of encounters demonstrates the volume of work. % of receivables older than 90 days – is the percentage of total receivables that is over 90 days excluding self-pay balances. This metric measures the efficiency of collecting payments on older accumulating balances. Maintaining a lower rate is financially healthy. This program will support the ability to provide performance data.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$242,082	\$0	\$228,142	\$0
<b>Total GF/non-GF</b>	<b>\$242,082</b>	<b>\$0</b>	<b>\$228,142</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$242,082</b>		<b>\$228,142</b>	
<b>Program FTE</b>	2.00	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:

This program was funded with one-time-only funding in FY 2023. The program requested one-time-only funding for a second year in FY 2024 after evaluating the program's needs.

**Department:** Health Department      **Program Contact:** A Blumenauer  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40040A, 40042  
**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, behavioral health, and community-based health services.

**Program Description**

The Medical Accounts Receivable Team is responsible for billing and collecting more than \$80 million a year in 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), community based care (early childhood, healthy homes) and behavioral health services. 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.

The Financial and Business Management division is committed to centering equity in policy and practice and in service to the Health Department's value of racial equity and mission to reduce health disparities. The division will continually invest time and resources into identifying and then dismantling internal and external structures that contribute to inequity, including the culture of white supremacy. The division employs a finance strategy to preserve critical services and support infrastructure for improved health outcomes. We strive to build trusting partnerships with community partners we depend on and we genuinely engage with communities and staff to drive positive changes, especially in the areas of business, operational and financial management. We pride ourselves on our ability to recruit, retain and promote a diverse, inclusive and high-performing workforce. The division is working to advance the objectives outlined in the Workforce Equity Strategic plan by committing resources for an equity and inclusion committee and operationalizing its policy recommendations.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of encounters processed for payment	255,124	260,000	207,894	210,000
Outcome	Percent of receivables aged (older than 90 days )	32%	33%	26%	33%
Quality	Average Days In Accounts Receivable	22	32	20	32

**Performance Measures Descriptions**

Number of encounters demonstrates the volume of work. % of receivables older than 90 days – is the percentage of total receivables that is over 90 days excluding self-pay balances. This metric measures the efficiency of collecting payments. Average Days in Accounts Receivable is the number of days it takes to resolve outstanding balances.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,393,057	\$0	\$1,741,111	\$0
Materials & Supplies	\$101,687	\$0	\$106,771	\$0
Internal Services	\$219,917	\$0	\$226,293	\$0
<b>Total GF/non-GF</b>	<b>\$1,714,661</b>	<b>\$0</b>	<b>\$2,074,175</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,714,661</b>		<b>\$2,074,175</b>	
<b>Program FTE</b>	10.00	0.00	12.00	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 2023: 40041 Medical Accounts Receivable

FY 2023 – program has been working strategically on different initiatives aimed at improving performance which include quality improvement projects as well as training and development support for staff. To reduce reliance on contracted services the team added 2.00 additional Financial Specialists.

The team collaborated with program staff and successfully implemented system builds that facilitated the administration of Covid-19 treatment drugs and the MPXV (mpox) vaccine during the outbreak in 2022. In alignment with federal requirements the billing team collaborated with services across the department to implement Good Faith Estimates (GFE). GFEs provide the total expected cost of any health care item and service.

**Department:** Health Department      **Program Contact:** Nicole Rose  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40040A, 40042B  
**Program Characteristics:**

**Executive Summary**

Health Department Contracts and Procurement prepares and processes all contracts, intergovernmental and professional service agreements for the department. They provide purchasing support for a wide array of products, goods and services.

**Program Description**

This program processes more than 700 contract and procurement action requests. They procure a wide array of products, goods and services, totaling more than \$67 million per year. By writing clear and comprehensive agreements and by complying with federal, state and county procurement laws and regulations, the program safeguards the department from risk and procures cost effective high quality goods and services.

This program offer includes the vaccine depot where vaccines are received, stored and distributed. The depot processes on average 85+ orders per month. This is the primary point of contact for routine vaccine services management. The depot has a key role in emergency public health responses that require vaccine prophylaxis.

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**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of Action Request Forms Submitted	700	N/A	750	775
Outcome	Contract Cycle Time Report (days)	70.03	N/A	70.00	70.00
Output	MMP Item Purchasing	\$3.3 mil	N/A	\$4.0 mil	\$4.2 mil

**Performance Measures Descriptions**

The number of Action Request Forms (ARF) submitted describes the workload for the procurement and contract specialist. Contract Cycle time is a measure of how efficiently the team completes its work. Cycle time describes the time it takes for a contract specialist to complete the review process for a contract. MMP Item purchasing is an output measure of individual health department program goods requests processed by procurement in the marketplace.

## Legal / Contractual Obligation

ORS279A, 279B, 279C; County procedures Con-1 and Pur-1.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,953,294	\$0	\$2,286,186	\$0
Materials & Supplies	\$0	\$0	\$0	\$0
Internal Services	\$321,387	\$0	\$332,236	\$0
<b>Total GF/non-GF</b>	<b>\$2,274,681</b>	<b>\$0</b>	<b>\$2,618,422</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,274,681</b>		<b>\$2,618,422</b>	
<b>Program FTE</b>	13.00	0.00	14.00	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 2023: 40042 Contracts & Procurement

The team added and additional procurement associate to meet a growing workload.

As part of our intention to engage with our community in a more direct and impactful way and reduce barriers in the procurement and contracting process, the team is working to create virtual and in-person training and materials for our internal and external partners which make the process more accessible. Team members participated in a countywide effort to review our process and look for improvement and receive feedback from community partners.

**Department:** Health Department      **Program Contact:** Kathryn McKelvey  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer includes a team of developers, analysts and project managers who provide report development and analytic services to the department. In addition, the annual cost of the EPIC practice management, and the Electronic Health Record (EHR) system used by the Health Department is budgeted here.

**Program Description**

The Health Data and Analytic Team (HDAT) provides business intelligence, data development, analytics, data visualization, and data governance services for the entire department to support decision making. The team leads federal, state and local reporting processes to ensure compliance with funding requirements. They create and maintain hundreds of operational reports for on-going business intelligence needs.

A portion of 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). All of the medical and dental services provided by the Health department use this electronic healthcare system including: primary care, dental, student health centers, corrections health, STD and other community and home based services.

The Health Data and Analytic Team is committed to centering equity in policy and practice. The team will support the disaggregation of data and advocate for reports and dashboards that allow for a more complete and comprehensive analysis of disparities in health outcomes, recruiting, hiring and retention and help identify operational metrics that evaluate the equity impacts of department policies and practices. The department initiatives focused on IT prioritization and data governance center activities that advance racial equity and help to dismantle white supremacy.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of reports and/or requests created	125	350	406	420
Outcome	% of repeat customers for data & business intelligence	N/A	52%	52%	49%

**Performance Measures Descriptions**

The number of reports and requests created demonstrates workload volume for the team for department-wide development and analytic projects. The percentage of repeat customers for data and business intelligence is an indicator of the value the team provides in establishing trust and building usable products from our complex data systems. New internal customers are expected in FY23 so the repeat customer percentage is expected to dip slightly.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$891,781	\$0	\$944,664	\$0
Contractual Services	\$290,000	\$0	\$304,500	\$0
Materials & Supplies	\$1,778,506	\$0	\$1,867,431	\$0
Internal Services	\$147,655	\$0	\$148,982	\$0
<b>Total GF/non-GF</b>	<b>\$3,107,942</b>	<b>\$0</b>	<b>\$3,265,577</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,107,942</b>		<b>\$3,265,577</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 2023: 40044 Health Data and Analytic Team

**Department:** Health Department      **Program Contact:** Chantell Reed  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Operations supports the Health Department’s effectiveness by helping to set a unified departmental strategy and developing leaders who foster a culture of safety, trust and belonging. Services include strategic planning, executive coaching, leadership and team development, onboarding, mentorship, succession planning, equity and inclusion coaching and training, communications and marketing, and culture change.

**Program Description**

This program offer includes organizational learning and communications.

Learning & Development invests in employees at all levels of the organization by offering workshops, online learning, onboarding, mentoring support and leadership development to further a positive workplace culture. This program is also responsible for the Workday Learning platform functions, including the creation and maintenance of courses and offerings, Learning Partner administration, and departmental and division-specific online training coordination.

Communications and Marketing develops internal communications strategies to promote organizational cohesion. It also works to promote essential health services and disseminate timely health information to our diverse communities. Specific services include development of communication plans, graphic design, web content creation and maintenance, media campaigns and department-wide messaging to promote shared understanding and organizational cohesion.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of managers participating in coaching/learning to integrate Racially Just core competency	95	160	160	175
Outcome	# of people who saw any content from or about the Department web page including posts, stories, ads, etc.	1,518,337	1,000,000	1,000,000	1,000,000
Output	Number of employees completing leadership development training	85%	80%	80%	80%
Outcome	% of employees reporting they’ve applied leadership development content in their day to day work	91%	75%	90%	75%

**Performance Measures Descriptions**

Performance measures that report on the number of managers participating in leadership programs and coaching to integrate racial justice competencies speak to WESP commitments and culture change. Individuals reached through social media posts speak to a strong public health communications infrastructure, compelling messages, and more robust presence on social media platforms.

**Legal / Contractual Obligation**

n/a

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,954,364	\$0	\$3,491,486	\$0
Contractual Services	\$50,000	\$0	\$10,500	\$0
Materials & Supplies	\$118,865	\$0	\$113,057	\$0
Internal Services	\$301,393	\$0	\$262,769	\$0
<b>Total GF/non-GF</b>	<b>\$3,424,622</b>	<b>\$0</b>	<b>\$3,877,812</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,424,622</b>		<b>\$3,877,812</b>	
<b>Program FTE</b>	16.80	0.00	19.80	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 2022: 40046 Organizational Development

In FY 2023 the Organizational Development and Human Resources Divisions were combined under a new division - Operations. This program offer represents the Communications and Leadership components of the new division.

**Department:** Health Department      **Program Contact:** Dr. Julie Maher  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40096A  
**Program Characteristics:**

**Executive Summary**

Program Design and Evaluation Services (PDES) performs the public health foundational role of assessment and epidemiology. PDES collaborates with partners to determine the magnitude of disease, disorder, and injury burden among community populations; identify the determinants of health and disease; evaluate the impact of public health interventions; and assess the status of health equity to guide decisions made by public health leaders and programs, policy makers, clinicians, and community. Key components of PDES' approach are working to engage with community partners to make meaning of the data.

**Program Description**

PDES is an applied public health research, evaluation, and epidemiology unit shared between the Health Department's Public Health Division (PHD) and the Oregon Health Authority. PDES includes PHD's Community Epidemiology Services (CES) team. 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 the health of county residents. CES works closely with the Communicable Disease Services program to provide outbreak response through data analysis support, statistical modeling, and standardized investigative guidelines. CES has been instrumental in analyzing COVID-19 data to inform interventions and policy and developing best practices for accurately and equitably assessing COVID-19 data by race/ethnicity. CES also provides assessment and epidemiological services across PHD, including the areas of chronic disease, violence and injury, parent/child health, environmental exposures, social determinants of health, and health equity. Key CES functions include: 1) Providing support in quantitative and qualitative methods; traditional epidemiological analysis; social epidemiology; and equity-focused and trauma-informed methods in research, evaluation, and data management. 2) Informing program and policy through 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). 3) Disseminating analytic findings through data reports; peer-reviewed scientific manuscripts; policy briefs; web-based reports and platforms, such as the interactive Regional COVID-19 Data Dashboard; and presentations to County and State leadership, programs, and community partners. 4) Providing leadership across PHD in using data to assess racial/ethnic and other health disparities in collaboration with community partners. 5) Developing and implementing decolonizing data methods and working with community partners to make meaning of data. In addition to this work of their CES team, PDES secures about \$4 million annually in grants and contracts to provide program and policy evaluation services to the county PHD, OHA and other agencies, and to conduct public health research projects on key emerging issues. PDES evaluates whether PHD programs and policies are effective, collaborating with partners to identify areas for improvement and highlight successes (e.g., Healthy Birth Initiative, REACH, and STRYVE).

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of data-related community collaborations that involve all partners and combine data with action	13	9	16	9
Outcome	# of reports monitoring health status through surveillance, assessment, & community engagement	50	9	26	9
Outcome	# of analytic and reporting platforms to monitor COVID responses and health status of vulnerable populations	27	7	32	N/A
Outcome	# of dissemination products (presentations, briefs, reports, manuscripts) created for PDES evaluation	N/A	N/A	N/A	20

**Performance Measures Descriptions**

The calculated performance measures for FY22 and FY23 include the products from the Communicable Disease team because during COVID-19 we used a hybrid work model; hence, the measures are higher than expected. The performance measure offers for FY24 do not include the Communicable Disease team products. A performance measure was added for FY24; that measure is for PDES evaluation contracts and research grants done outside the CES team.



## Legal / Contractual Obligation

Oregon Revised Statutes (ORS) 431.413 - Powers and Duties of Local Public Health Departments: (a) Administer and enforce ORS 431.001-431.550 and 431.990. Of these required ORS-defined duties, this program administers key elements of ORS 431.132: Assessment and Epidemiology.

Program Design and Evaluation Services (PDES) is primarily grant and contract funded, and program continuation is required by those grants and contracts.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,242,378	\$221,229	\$1,221,894	\$142,450
Materials & Supplies	\$10,840	\$2,480	\$19,435	\$3,392
Internal Services	\$111,468	\$42,301	\$118,340	\$31,767
<b>Total GF/non-GF</b>	<b>\$1,364,686</b>	<b>\$266,010</b>	<b>\$1,359,669</b>	<b>\$177,609</b>
<b>Program Total:</b>	<b>\$1,630,696</b>		<b>\$1,537,278</b>	
<b>Program FTE</b>	7.17	1.48	6.85	0.82

Program Revenues				
Intergovernmental	\$0	\$266,010	\$0	\$177,609
<b>Total Revenue</b>	<b>\$0</b>	<b>\$266,010</b>	<b>\$0</b>	<b>\$177,609</b>

## Explanation of Revenues

This program generates \$19,901 in indirect revenues.  
State - \$177,609 - Public Health Modernization

## Significant Program Changes

**Last Year this program was:** FY 2023: 40048 Community Epidemiology

The Communicable Epidemiology Services (CES) team joined Program Design and Evaluation Services during FY23.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Providing health care to detained youth is the responsibility of Corrections Health. Corrections Health personnel care for 35 detained youth at any one time (+1,500 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

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 35 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. 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. In partnership with the Health Department's Clinical Systems Information program, an electronic medical record program implementation is in process. The program will include electronic medication prescription and administration. The electronic medical record will improve staff efficiency and promote client safety.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of client visits conducted by a CH nurse per year	2,000	1,500	1,500	1,500
Outcome	% of detained youth receiving mental health medications monthly	45%	50%	50%	50%

**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 medication 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,082,252	\$0	\$1,193,920	\$0
Contractual Services	\$121,455	\$0	\$127,528	\$0
Materials & Supplies	\$74,504	\$0	\$78,229	\$0
Internal Services	\$340,120	\$0	\$366,510	\$0
<b>Total GF/non-GF</b>	<b>\$1,618,331</b>	<b>\$0</b>	<b>\$1,766,187</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,618,331</b>		<b>\$1,766,187</b>	
<b>Program FTE</b>	5.60	0.00	6.00	0.00

Program Revenues				
Service Charges	\$102,198	\$0	\$102,198	\$0
<b>Total Revenue</b>	<b>\$102,198</b>	<b>\$0</b>	<b>\$102,198</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. Corrections Health receives \$102,198 in revenue that does not represent any direct client billing for services provided, rather payment to DCJ from Washington and Clackamas counties for housing youth and medical services that are provided while they are housed at Donald E. Long.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40049 Corrections Health Juvenile Detention

Increase four 0.80 FTE Community Health Nurse positions to 0.90 FTE to reduce mandates, overtime, burnout and to increase staff morale while reducing staff turnover. The increase will also allow care to increase from 16 hours/day to 24 hours/day.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This offer represents Corrections Health MCDC basic administration, support, booking and mental health care delivery programs. MCDC averages 40+ 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 are appropriately addressed in a hospital setting before booking. Suicide and self harm symptom identification is an essential mental health function. The mental health team is composed of psychiatric mental health nurse practitioners (PMHNPs), mental health consultants and mental health nurses for evaluation, monitoring and treatment for the many mentally ill clients booked into jail.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # of Reception Screening ("EPF"--Entry Progress Form) completed in one month	1,000	1,000	1,000	1,000
Outcome	% of positive screenings resulting in a referral to the mental health team per year	35%	35%	35%	35%

**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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$3,657,714	\$0	\$3,617,013	\$0
Contractual Services	\$15,000	\$0	\$15,750	\$0
Materials & Supplies	\$45,770	\$0	\$48,058	\$0
Internal Services	\$345,568	\$0	\$328,527	\$0
<b>Total GF/non-GF</b>	<b>\$4,064,052</b>	<b>\$0</b>	<b>\$4,009,348</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,064,052</b>		<b>\$4,009,348</b>	
<b>Program FTE</b>	17.70	0.00	21.35	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. Corrections Health no longer receives revenue through a co-pay system. Adults in custody are not charged a fee for health care services.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40050A Corrections Health Multnomah County Detention Center (MCDC)

Add 4 new Community Health Nurse positions to reduce mandates, overtime, burnout and increase morale in staff, while increasing retention.

**Department:** Health Department      **Program Contact:** Myque Obiero

**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This offer represents the MCDC 4th floor which is composed of 46 beds, two general and two mental health clinic rooms, one dental operatory, 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, and post-surgical 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. The fourth floor housing unit 4D is acute mental health with 10 beds. 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 Manager and mental health consultants 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # Adults in Custody (AIC) nursing assessments monthly	800	700	700	800
Outcome	Average active and constant suicide watches per month to prevent AIC injury or death	100	125	120	120

### 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,846,124	\$0	\$2,046,284	\$0
Contractual Services	\$731,748	\$0	\$768,335	\$0
Materials & Supplies	\$430,522	\$0	\$463,894	\$0
Internal Services	\$420,913	\$0	\$383,969	\$0
<b>Total GF/non-GF</b>	<b>\$3,429,307</b>	<b>\$0</b>	<b>\$3,662,482</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,429,307</b>		<b>\$3,662,482</b>	
<b>Program FTE</b>	10.30	0.00	9.90	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40050B Corrections Health MCDC Clinical Services and 4th Floor Housing

Reduced 2 Community Health Nurse positions from 0.80 FTE to 0.60 FTE. These requests were made by staff to prevent burnout.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential 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 Supported Recovery 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # AIC nursing assessments monthly	800	700	700	800
Outcome	Average active and constant suicide watches per month to prevent AIC injury or death	100	125	120	120

**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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,529,299	\$0	\$2,795,848	\$0
Contractual Services	\$375,000	\$0	\$393,750	\$0
Materials & Supplies	\$15,906	\$0	\$16,701	\$0
Internal Services	\$280,610	\$0	\$355,223	\$0
<b>Total GF/non-GF</b>	<b>\$3,200,815</b>	<b>\$0</b>	<b>\$3,561,522</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,200,815</b>		<b>\$3,561,522</b>	
<b>Program FTE</b>	14.20	0.00	14.00	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40050C Corrections Health MCDC Housing Floors 5, 6, 7 & 8

Reduced 1 Community Health Nurse position from 0.80 FTE to 0.60 FTE. These requests were made by staff to prevent burnout.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

In FY 2021, ICS received technical assistance from HRSA regarding financial and governance requirements related to FQHCs. This included clarification of how FQHC funds could be applied to services of the health center and staff roles which also supported non-health center services in Corrections Health and Public Health Programs. After review, HRSA clarified that funds from the FQHC cannot be spent on these out-of-scope programs or for staff who support out-of-scope activities. In response, Multnomah County removed County General Fund allocations from the ICS Budget and re-allocated them to Corrections Health and Public Health services to support out of scope activities. The County reallocated the County General Fund to support these services in FY 2022 and going forward.

**Program Description**

This program offer will provide funding for Corrections Health to continue to provide essential services previously provided by Integrated Clinical Services. The program offer focuses on areas such as credentialing, laboratory management, infection control, and coordination of language services and health records.

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated. That care is delivered to a population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve.

This offer represents the services to maintain those functions previously supplied by Integrated Clinical Services. Positions added would support infection control efforts in all three facilities, managing fit testing for respirator use and training CH personnel, laboratory support at both adult facilities to support Clinical Laboratory Improvement Amendments (CLIA) activities and administrative support for staff credentialing, organization of language services and coordination of health record transfers and requests. For the services remaining in ICS, ICS Electronic Health Record support provides day to day EPIC support for Corrections Health, supports program planning and implementation of programs and is the liaison to OCHIN. The team also performs monthly maintenance and provides updates. The Health Information Services (HIS) team provides support by responding to and processing information requests, referrals and HIPAA investigations. HIS along with the County Attorney provide privacy guidance and support, and HIS provides retention guidance as needed.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Infection control audits	N/A	N/A	3	3
Outcome	Staff Fit Testing	N/A	N/A	120	120

**Performance Measures Descriptions**

Measure 1: Number of facility infection control audits/year  
Measure 2: Number of staff fit tested/year

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$868,312	\$0	\$1,145,176	\$0
Contractual Services	\$78,137	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$946,449</b>	<b>\$0</b>	<b>\$1,145,176</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$946,449</b>		<b>\$1,145,176</b>	
<b>Program FTE</b>	6.67	0.00	8.08	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 2023: 40050D Corrections Health - In/Out of Scope Services

Increase in FTE for In/Out of Scope Services provided by ICS to support Corrections Health EHR and medical records needs.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care. That care is delivered to a population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the BIPOC groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

MCIJ health personnel care for all those detainees transferred from MDCDC to continue or begin treatment until disposition of their legal process is complete. 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. 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # Adults in Custody (AIC) nursing assessments monthly	1,200	1,200	1,200	1,400
Outcome	# of 14-Day Health Assessments completed monthly	110	100	110	120

**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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$3,774,714	\$0	\$4,129,233	\$0
Materials & Supplies	\$75,342	\$0	\$70,661	\$0
Internal Services	\$473,601	\$0	\$496,435	\$0
<b>Total GF/non-GF</b>	<b>\$4,323,657</b>	<b>\$0</b>	<b>\$4,696,329</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,323,657</b>		<b>\$4,696,329</b>	
<b>Program FTE</b>	20.65	0.00	24.65	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40051A Corrections Health Inverness Jail (MCIJ) Clinical Services

Add 6 new Community Health Nurse positions to reduce mandates, overtime, burnout and to increase staff retention and morale.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

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 allowing 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # Adults in Custody (AIC) nursing assessments monthly	1,200	1,200	1,200	1,400
Outcome	# of 14-Day Health Assessments completed monthly	110	100	110	120

**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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,250,055	\$0	\$1,416,671	\$0
Contractual Services	\$1,121,748	\$0	\$1,177,835	\$0
Materials & Supplies	\$391,905	\$0	\$411,500	\$0
Internal Services	\$133,558	\$0	\$141,062	\$0
<b>Total GF/non-GF</b>	<b>\$2,897,266</b>	<b>\$0</b>	<b>\$3,147,068</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,897,266</b>		<b>\$3,147,068</b>	
<b>Program FTE</b>	7.50	0.00	7.50	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40051B Corrections Health MCIJ General Housing Dorms 4 - 11

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the BIPOC groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

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. 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # Adults in Custody (AIC) nursing assessments monthly	1,200	1,200	1,200	1,400
Outcome	# of 14-Day Health Assessments completed monthly	110	100	110	120

**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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,105,620	\$0	\$2,183,642	\$0
Materials & Supplies	\$95,406	\$0	\$99,395	\$0
<b>Total GF/non-GF</b>	<b>\$2,201,026</b>	<b>\$0</b>	<b>\$2,283,037</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,201,026</b>		<b>\$2,283,037</b>	
<b>Program FTE</b>	8.50	0.00	8.50	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40051C Corrections Health MCIJ Dorms 12 - 18 and Infirmary

**Department:** Health Department      **Program Contact:** Jennifer Vines  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The County Medical Examiner's Office (MEO) investigates and determines the cause and manner of deaths which occur under specific circumstances in Multnomah County. Approximately 3,200 of the County's 6,500 yearly deaths fall into this category. MEO activities are highly visible to the public when a questionable death occurs in the community and they provide key components of foundational public health data. Operating 24/7/365 MEO staff interface directly with loved ones of the deceased and emergency responders (police, fire, mortuary services, accident investigators) on a daily basis.

**Program Description**

The Medical Examiner's Office (MEO) is involved in all deaths, with the exception of natural deaths occurring directly under physician care greater than 24 hours in a hospital or hospice setting. 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. Medical Examiner staff work directly with community/family members to investigate deaths that fall under our jurisdiction to provide support and crucial information regarding the cause and manner of death. The Medical Examiner's Office strives to provide in-person investigations, to minimize the number of scenes in which law enforcement is the sole agency present. This provides increased public service, often to those most underserved. The MEO works diligently with the community and external partners to provide equitable services to the LGBTQ community and those facing mental health crisis and addiction. Investigations conducted by our office provide critical information to inform and shape programs for those experiencing homelessness, addiction and mental health crisis.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of deaths requiring investigation	3,108	2750	2,700	3,700
Outcome	Deputy Medical Examiner arrives on-scene within one hour for 90% of calls	84%	75%	80%	85%
Outcome	Increase the number of in-person scene responses with a death investigator on scene	1,009	1,200	1,182	1,400

**Performance Measures Descriptions**

Output: Number of deaths in the County that require investigations. Outcome: A Deputy Medical Examiner arrives on-scene in 90% of calls requiring on-scene investigation within one hour of first notification to support public safety, law enforcement, and affected members of the public. Optional Outcome: A death investigator will respond in-person to scene calls to investigate deaths (versus investigation via phone). Provides support to community, ensures deaths are investigated, reduces involvement of law enforcement.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,862,431	\$0	\$2,065,588	\$0
Contractual Services	\$108,856	\$0	\$114,298	\$0
Materials & Supplies	\$27,627	\$0	\$24,947	\$0
Internal Services	\$279,859	\$0	\$345,943	\$0
<b>Total GF/non-GF</b>	<b>\$2,278,773</b>	<b>\$0</b>	<b>\$2,550,776</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,278,773</b>		<b>\$2,550,776</b>	
<b>Program FTE</b>	14.00	0.00	15.00	0.00

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

## Explanation of Revenues

All County General Funds no additional revenue

## Significant Program Changes

**Last Year this program was:** FY 2023: 40052A Medical Examiner

Addition of 1.00 FTE death investigator and administrative support approved last fiscal year, establishing minimum staffing levels for a jurisdiction of our size.

**Department:** Health Department      **Program Contact:** Kimberly DiLeo  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 40052  
**Program Characteristics:** Backfill State/Federal/Grant

**Executive Summary**

The State Medical Examiner announced February 13th, 2023 that they will turn over the majority of death certification to counties. County Medical Examiner Offices will now be responsible for employing a physician to act as the County Medical Examiner, signing death certificates on all cases corresponding to record reviews and death investigation results. The State Medical Examiner will continue to perform autopsies on homicides, child deaths and cases that are particularly complex on a case by case basis. This program offer is for the initial work of a on call physician to sign the approximate 1200 death certificates the State Medical Examiners office has traditionally done. This offer does not address external examinations, which will also be the responsibility of the county beginning July 1, 2023.

**Program Description**

The State currently provides Multnomah County with the following services, approximating:

Signing 1,200 death certificates per year, including 500 extensive medical record reviews  
 Performing 380 autopsies  
 Providing 600 external exams

With this change, effective July 1, 2023, autopsy services may be dramatically reduced. Multnomah County may be responsible for taking over any autopsies that the State cannot and will not perform, the majority of external examinations, and the signing of death certificates. This change will impact timely and accurate reporting of deaths in our County, as current Oregon statute states that in the absence of an appointed Medical Examiner, the Health Officer shall assume these duties. Health Officers across the state and country are already stretched, and most including our Multnomah County Health Officers are not trained to perform autopsies. This change will also affect families of the deceased, should death certifications be delayed.

This program offer contains budget for a on call physician to sign the death certificates the State Medical Examiner's Office has traditionally performed. The on call physician will be a County employee and this program offer includes \$125,000 that is estimated up to 14 hours of time per week to take on this new work of signing death certificates.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	County shall employ a physician for the purpose of signing death certificates	0	0	0	1200
Outcome	Hours to research, review and appropriately determine cause of death for signing of death certificates	0	0	0	757

**Performance Measures Descriptions**

## 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. ORS 146.065 states that in each county there shall be a Medical Examiner to certify the cause and manner of deaths for cases requiring investigation.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$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>	
<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

All County General Funds no additional revenue

## Significant Program Changes

### Last Year this program was:

The State Medical Examiners Office has announced a defunding and reduced support of several aspects of death investigation work. This will shift almost all of the unfunded and uncovered work from the State Office to the Local County.

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T, 40199U  
**Program Characteristics:**

**Executive Summary**

Racial and Ethnic Approaches to Community Health (REACH) aims to end chronic disease and related racial/ethnic health disparities within the Black/African American/African immigrant and refugee communities by ensuring opportunities to realize optimal health potential. REACH programming values a culture- and strength-based approach, relying on community wisdom to implement culturally tailored interventions that address root causes of health inequities and preventable risk behaviors through communications, policy, systems, and environmental change strategies in partnership with community.

**Program Description**

Racial and Ethnic Approaches to Community Health (REACH) uses culturally specific and cross-cultural approaches that combine the community-identified priorities and CDC-funded communication, policy, systems, and environmental change strategies focused on reducing chronic disease in local African American/Black communities, including African immigrants and refugees. REACH continues to be a foundational component to the Public Health Division'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. REACH has three current areas of focus: nutrition, physical activity, and community-clinical linkages. Nutrition programming increases the number of community settings offering healthy food, retail access to healthy food through innovative procurement practices, and community support for breastfeeding. Physical activity programming increases the number of safe, desirable locations for physical activity, including active transportation, and increases the number of people with access to them. Community-clinical linkage programming increases the use of health and community programs, including referrals to these resources; expands the use of health professionals, such as community health workers; and improves quality of service delivery and experience of care. Together, these program areas work to redress social determinants of health challenges and barriers and improve the overall health of neighborhoods throughout Multnomah County.

REACH uses social determinants, health behavior, disease prevalence, mortality, and a variety of other data to monitor the well-documented chronic disease health disparities experienced by Black/African American/African communities and plans responsive strategies. Community-voiced data on lived experience is especially valued and incorporated into planning, given the limitations of institutional data, such as not disaggregating data for Black immigrants/refugees. REACH is steered by its multi-sectoral community advisory committee, the ACHIEVE Coalition. REACH and its partners regularly hold focus groups, community webinars, and events to gather community concerns.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of policy, systems, and environment strategies implemented	25	25	25	25
Outcome	# of Black/African American/African Immigrants reached through policy, systems, and environment changes	5,214	4,000	14,054	5,000
Output	# of settings implementing policy, systems and environment strategies	11	20	67	50

**Performance Measures Descriptions**

Performance Measures 1 and 3 are for settings that are occupied by Black/African American/African Immigrant communities.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$41,256	\$921,222	\$394,167	\$427,712
Contractual Services	\$320,510	\$0	\$154,286	\$799,823
Materials & Supplies	\$18,744	\$0	\$28,524	\$57,408
Internal Services	\$129,262	\$123,247	\$137,453	\$59,752
<b>Total GF/non-GF</b>	<b>\$509,772</b>	<b>\$1,044,469</b>	<b>\$714,430</b>	<b>\$1,344,695</b>
<b>Program Total:</b>	<b>\$1,554,241</b>		<b>\$2,059,125</b>	
<b>Program FTE</b>	0.32	7.33	2.60	3.47

Program Revenues				
Intergovernmental	\$0	\$1,044,469	\$0	\$1,344,695
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,044,469</b>	<b>\$0</b>	<b>\$1,344,695</b>

Explanation of Revenues

This program generates \$59,752 in indirect revenues.  
 Federal: \$ 975,000 - REACH GY08  
 State: \$ 69,695 - Community Chronic Disease Prevention  
 \$300,000 - CareOregon African Immigrant Refugee grant

Significant Program Changes

**Last Year this program was:** FY 2023: 40053 Racial and Ethnic Approaches to Community Health

This current round of REACH funding is set to end September 2023 and the reapplication process has begun with a due date in Spring 2023. This round of funding covers 6 FTEs which includes a Program Supervisor, 4-Program Specialists who are staff leads for the 3 strategies areas (nutrition, Community Clinical Linkages, Built Environment) and Communications, a Community Health Specialist who supports the ACHIEVE Coalition.

**Department:** Health Department      **Program Contact:** Elizabeth Carroll  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40055, 40056, 40058, 40097  
**Program Characteristics:**

**Executive Summary**

Parent Child Family Health (PCFH) Nurse Family Partnership Program (NFP) is an evidence-based community healthcare program supported by more than 30 years of research. NFP supports a partnership between low-income, first-time pregnant people with a home visiting Community Health Nurse to support new parents experience a healthy pregnancy. This partnership and the education and support offered, enable families to build confidence and work towards family stability and achieve goals.

**Program Description**

NFP is a nurse home visiting program offered to first-time, low-income pregnant people through two Multnomah County teams serving the entire County. The goals of NFP are to improve pregnancy outcomes by promoting health-related behaviors; and improve child health, development, and safety by promoting competent care-giving. 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.

PCFH has developed infrastructure that ensures fidelity to the NFP model and includes extensive staff training, reflective supervision, a Community Advisory Board, and rigorous evaluation support through the NFP National Service Office and State Nurse Consultant. Long-term benefits to the county include healthy children ready to learn; decreased costs related to child welfare and juvenile justice; and over the long-term, families less affected by chronic disease. PCFH has connected the NFP model with the Healthy Birth Initiative (HBI). This partnership provides African American first-time pregnant people who are enrolled in NFP with all of the wraparound, culturally specific services and leadership development of the HBI program. African American families receiving NFP services through HBI are reflected in the HBI Program Offer (40058). NFP's Community Advisory Board enables clients to influence and guide how they engage in PCFH services and provide input assure services are reflective of families served, impacting program design and/or implementation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of families served	284	200	285	330
Outcome	Percent of mothers enrolled in NFP services who are breastfeeding at 6 months	49%	65%	60%	65%
Quality	Participants who remain in program until child is two years old	85%	80%	80%	80%
Quality	Percent of participants who express satisfaction with program's cultural responsiveness	N/A	95%	97%	95%

**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, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$90,352	\$1,580,995	\$183,578	\$1,876,725
Contractual Services	\$462,147	\$2,000	\$701,808	\$0
Materials & Supplies	\$37,906	\$23,976	\$21,875	\$23,834
Internal Services	\$147,257	\$254,842	\$75,194	\$386,627
<b>Total GF/non-GF</b>	<b>\$737,662</b>	<b>\$1,861,813</b>	<b>\$982,455</b>	<b>\$2,287,186</b>
<b>Program Total:</b>	<b>\$2,599,475</b>		<b>\$3,269,641</b>	
<b>Program FTE</b>	0.44	8.56	1.11	9.09

Program Revenues				
Intergovernmental	\$0	\$88,802	\$0	\$88,802
Other / Miscellaneous	\$0	\$46,556	\$0	\$46,556
Beginning Working Capital	\$0	\$566,348	\$0	\$0
Service Charges	\$0	\$1,160,107	\$0	\$2,151,828
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,861,813</b>	<b>\$0</b>	<b>\$2,287,186</b>

## Explanation of Revenues

This program generates \$262,178 in indirect revenues.

- \$ 46,556 - Miscellaneous Revenues
- \$ 2,151,828 - NFP Medicaid Babies First
- \$ 88,802 - State Babies First grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40054 Nurse Family Partnership

In FY23, NFP made a return to in-person services while continuing to make televising an option based on family preference and safety. NFP is scheduled, along with all of PCFH, to transition from paper charting to electronic health records (EHR) in late FY23, ultimately streamlining charting, billing and medical records workflows. This transition, and a new mix of in-home and telehealth visits, enables increased projected revenue for NFP to maximize their billing. 1.00 Community Health Nurse added in FY24. Challenges in hiring new nurses, especially into cultural KSA positions, has taken exceptionally long times in the past year. New HR streamlining of processes and staff stabilization measures such as retention bonuses are expected to be helpful in maintaining full staffing and meeting visit goals. The NFP program is expected to consolidate staff into one physical location in FY24, as a part of a larger PCFH space consolidation.

**Department:** Health Department      **Program Contact:** Elizabeth Carroll  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40054, 40056, 40057, 40097  
**Program Characteristics:**

### Executive Summary

Parent Child Family Health (PCFH) Community Health Nurses (CHNs) and Community Health Workers (CHWs) routinely provide consultation and support at the individual, organizational and system levels and in a variety of settings. This Program Offer describes PCFH consultation and services in the Healthy Homes Asthma Home Visiting program, and 3 Community-based Head Starts, along with David Douglas School District (DDSD) Multnomah Early Childhood Program (MECP) providing families from African American and Latino families with early childhood CHW supports. The families are parenting children with health and developmental conditions. Services include health assessments in the home or classroom; care coordination; and technical assistance for providers who serve children with special healthcare needs.

### Program Description

Health Homes (HH) identifies and supports remediation of environmental asthma triggers or refers families to resources for relocation. 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 Nurse Consulting in Head Starts (or subsidies for Nurse services) are subsidized to support families enrolled in the Mt. Hood Head Start program, Oregon Child Development Coalition (OCDC), and Multnomah Early Childhood Program (MECP).

In 2015 PCFH was asked to support David Douglas School District with their Multnomah Early Childhood Program, Early Intervention services. PCFH provides 4 staff with culturally specific early childhood KSA's for community health worker (CHW) services, (1 Nurse and 3 FTE CHWs serving African American, Latino and Vietnamese families). DDSD pays for the full cost of the staffing of this racial equity driven program enhancement.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of families receiving an environmental home inspection	14	30	12	0
Outcome	% completion of final Asthma Home assessments	80%	80%	100%	0
Output	# of technical assistance consults to service providers who work with children with special health care needs	300	300	300	0

### Performance Measures Descriptions

Output #1 Referrals and completed assessments have remained low in FY23. This program has been eliminated in order to meet PCFH County General Fund constraints.

Outcome #2 Again the low utilization of this service and plan to eliminate

Output #3 Consultations are not entered into PCFH data systems. This is an estimate as Head Starts also do not share actual reported consultations. Elimination of this service is planned for FY24.

## Legal / Contractual Obligation

Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$293,673	\$609,325	\$0	\$469,400
Contractual Services	\$59,899	\$2,000	\$0	\$0
Materials & Supplies	\$12,903	\$16,290	\$30,000	\$15,786
Internal Services	\$135,696	\$81,894	\$142,422	\$65,576
<b>Total GF/non-GF</b>	<b>\$502,171</b>	<b>\$709,509</b>	<b>\$172,422</b>	<b>\$550,762</b>
<b>Program Total:</b>	<b>\$1,211,680</b>		<b>\$723,184</b>	
<b>Program FTE</b>	1.90	5.10	0.00	3.80

Program Revenues				
Intergovernmental	\$0	\$34,000	\$0	\$550,762
Other / Miscellaneous	\$0	\$550,762	\$0	\$0
Service Charges	\$0	\$124,747	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$709,509</b>	<b>\$0</b>	<b>\$550,762</b>

## Explanation of Revenues

This program generates \$65,576 in indirect revenues.  
\$ 550,762 - DDSD CHN

## Significant Program Changes

**Last Year this program was:** FY 2023: 40055 Home and Community Based Consulting

Staff reductions include 2 FTE Community Health Nurses and 1 FTE Community Health Worker which also contributed to the decision to reduce a 1 FTE Office Assistant Sr. in the PCFH Administration budget. Despite targeted outreach, and attempts to operationalize referrals from ICS, referrals for Asthma Home Visiting have remained low. PCFH, faced with significant CGF reductions in FY 24, and despite the program offering a valuable service, has elected to eliminate the Healthy Homes program. Nurse Consultation is a well utilized service to Head Starts, but is sustained entirely through CGF,, and will also be eliminated. DDSD CHW services are fully funded by DDSD will continue in FY24 with no planned changes.

**Department:** Health Department

**Program Contact:** Elizabeth Carroll

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Healthy Families of Multnomah County (HFMC) is a nationally accredited, culturally adapted, evidence-based early childhood home visiting program, part of the state-wide HF Oregon network. HFMC serves children and families where screening has detected high parent stress, with the goal to improve infant bonding and early development. 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.

**Program Description**

The goal of HFMC is to promote child and family wellbeing and prevent the abuse and neglect of children through family-centered, culturally responsive, and strengths-based support. Families who qualify for services are offered voluntary home (and/or tele) 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. HFMC has 2 primary components: 1) Eligibility screening of pregnant and newly delivered parents 2) HFMC home visiting via four community-based organizations, including African American, Immigrant/Refugee, Latinx, teens, and parents with significant substance abuse or trauma histories. Supportive services, including mental health and housing/utility assistance, system advocacy, and navigation are also provided. Approximately 89% of HFMC families are Black, Indigenous, and people of color and 93% are low income. HFMC takes a data-driven approach. A regular continuous quality improvement (CQI) process examines rates of engagement and retention by contractor, age, race/ethnicity and language. HFMC also reviews community data to determine if there are service gaps or the need to add new culturally specific teams. HFMC has an advisory group with majority consumer members who reflective of the HFMC program. Members evaluate data and guide program practices.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of families served with home visiting	484	480	482	500
Outcome	% of participating parents who report reading to/with a child at least 3 times/week	95%	95%	95%	95%
Outcome	% of families remaining in intensive services for 12 months or longer	64%	70%	80%	75%
Outcome	% of families served are BIPOC and/or low income	95%	95%	93%	95%

**Performance Measures Descriptions**

# of families served is expected to increase with staff stabilization funding

% reading is a measure from the state evaluation that has not been made available due to an interruption in the OHA data contract. We will resume this next year.

% retention of families by 12 months is a measure from the state evaluation that has not been made available due to an interruption in the OHA data contract. We will resume this next year.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$88,093	\$689,800	\$52,123	\$722,314
Contractual Services	\$628,931	\$1,878,908	\$700,908	\$2,439,202
Materials & Supplies	\$0	\$30,606	\$192	\$29,600
Internal Services	\$114,068	\$92,709	\$119,904	\$100,907
<b>Total GF/non-GF</b>	<b>\$831,092</b>	<b>\$2,692,023</b>	<b>\$873,127</b>	<b>\$3,292,023</b>
<b>Program Total:</b>	<b>\$3,523,115</b>		<b>\$4,165,150</b>	
<b>Program FTE</b>	0.50	5.33	0.29	5.27

Program Revenues				
Intergovernmental	\$0	\$2,612,023	\$0	\$3,212,023
Other / Miscellaneous	\$0	\$80,000	\$0	\$80,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,692,023</b>	<b>\$0</b>	<b>\$3,292,023</b>

## Explanation of Revenues

This program generates \$100,907 in indirect 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 a 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.

State: \$ 2,866,003- State Healthy Start

Federal: \$ 346,020- OMAP Medicaid Admin

\$ 80,000- HSO Help Me Grow Program

## Significant Program Changes

**Last Year this program was:** FY 2023: 40056 Healthy Families

In FY23 HFMC resumed in-person screening in 2 maternity departments and tele-visit options. HFMC contractors will continue a mixed HV/tele-visit model in FY24. Mental Health supports will continue as funding allows. HFMC is expected to receive national reaccreditation in 10/23. A Latino team was formed in FY23 within an existing contractor org. Following reaccreditation, a full-program RFP in FY24 will identify a contractor to further develop this new culturally-adapted component. FY23 and FY24 revenue was increased by the State to raise salaries to contractor teams, to support staff and program stabilization; anticipating lower staff turn-over and fewer r gaps in hiring in FY24. In March 2023 the Help Me Grow component received new grant funds from HealthShare for FY24-about \$300,000 used to expand this culturally-specific early childhood work to the region.

**Department:** Health Department      **Program Contact:** Elizabeth Carroll  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40055, 40056, 40058, 40097  
**Program Characteristics:**

**Executive Summary**

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 25 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. HBI also focuses on the importance of father involvement in achieving better outcomes

**Program Description**

The Black/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. HBI's core goal is to eliminate these disparities. Long-term benefits of the program include healthy children who are ready to learn; a healthier workforce; increased parent advocacy skills; decreased costs across health and social service systems; and gains in equity for the county's Black/African American community. HBI uses a family-centered approach in supporting a child's development. HBI approaches are case management, health education, community engagement, service coordination, and collective impact. HBI nurses utilize the Nurse Family Partnership (NFP) program as a key component of home visiting services, as well as other evidence-based models. HBI promotes care coordination between internal Health Department programs, external health and social service providers, nursing schools, and larger health systems. HBI nurses also participate on committees to help NFP gain a better understanding of leading with race and implementing racial equity change throughout their system. HBI uses data along with targeted engagement with community and providers. Community Action Network (CAN) members include: parents, healthcare, social service, and culturally specific agencies working together to implement community-driven strategies, provide feedback, and support client leadership roles to influence program design and implementation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of families served	276	350	350	350
Outcome	Percent of mothers initiating breastfeeding after delivery	97%	95%	100%	100%
Quality	Percent of participants who remain in program until child is two years old	N/A	80%	70%	70%
Quality	Percent of participants who express satisfaction with cultural specificity of program	94%	95%	100%	100%

**Performance Measures Descriptions**

\*448 individuals served in 276 families

## Legal / Contractual Obligation

Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,125,912	\$1,188,333	\$993,999	\$1,758,680
Contractual Services	\$133,940	\$196,221	\$223,016	\$484,250
Materials & Supplies	\$73,184	\$0	\$63,743	\$36,922
Internal Services	\$288,554	\$159,712	\$305,416	\$245,689
<b>Total GF/non-GF</b>	<b>\$1,621,590</b>	<b>\$1,544,266</b>	<b>\$1,586,174</b>	<b>\$2,525,541</b>
<b>Program Total:</b>	<b>\$3,165,856</b>		<b>\$4,111,715</b>	
<b>Program FTE</b>	8.00	7.80	6.36	11.39

Program Revenues				
Intergovernmental	\$0	\$980,000	\$0	\$1,506,072
Other / Miscellaneous	\$0	\$25,092	\$0	\$25,092
Service Charges	\$0	\$539,174	\$0	\$994,377
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,544,266</b>	<b>\$0</b>	<b>\$2,525,541</b>

## Explanation of Revenues

This program generates \$245,689 in indirect revenues. Healthy Birth Initiative is funded by: Medicaid Targeted Case Management (TCM) Medicaid Maternity Case Management and a Health Resources and Services Administration grant.

Federal: \$ 1,506,072 - Health Resources Services Administration grant  
 \$ 994,377 - Targeted Case Management  
 \$ 25,092 - HBI recoveries

## Significant Program Changes

**Last Year this program was:** FY 2023: 40058 Healthy Birth Initiative

HBI has resumed all operations and activities with in-person home visiting, telehealth visits, classes and community engagement events. All HRSA grant commitments are being delivered. In FY24 HBI expects to transition from paper charting to Epic Electronic Health Records. This transition will streamline data collection and efficiency. With funding from HealthShare for staffing, HBI will support neighboring counties to explore new regional supports for African American and African parents, possibly to expand HBI services to families. HBI will add a Manager (with CareOregon funds) to supervise and support high level systems outreach, coordination, operations, and other opportunities. A Health Educator is also funded. In late FY23 HBI will reapply to HRSA for grant funding/supplemental funding as available. The success of this reapplication will shape the program design and fiscal needs going into FY25.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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 over 30% having mental health and behavioral issues. Over 2,500+ 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 Description**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a BIPOC population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY24 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This offer represents the mental health and transition 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. 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 40 youth daily in 7 individual housing units from three counties. In addition to the services provided by mental health professionals, transition service staff is available to provide a bridge for releasing adults in custody (AICs) and youths in custody (YICs) who are on SUD and need additional follow up in the community. The staff includes community health workers, CHN, MHCs and eligibility specialists.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Average # mental health evaluations for suicide watch per month	250	250	250	250
Outcome	Average of total number of active and constant suicide watches per month to prevent AIC injury or death	100	125	100	100
Output	Average # of evaluations performed by Mental Health Consultants for all CH sites per month	1,000	1,000	1,000	1,000
Outcome	Monthly average of AICs on SUD being tracked by the Transition Program that come back to custody	0	5	5	5

**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 medication 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$4,780,637	\$0	\$4,951,048	\$0
Contractual Services	\$80,000	\$0	\$84,000	\$0
Materials & Supplies	\$366,328	\$0	\$384,645	\$0
Internal Services	\$413,062	\$0	\$433,213	\$0
<b>Total GF/non-GF</b>	<b>\$5,640,027</b>	<b>\$0</b>	<b>\$5,852,906</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$5,640,027</b>		<b>\$5,852,906</b>	
<b>Program FTE</b>	31.45	0.00	30.65	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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 2023: 40059A Corrections Health Behavioral Health Services



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$189,552	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$189,552</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$189,552</b>	
<b>Program FTE</b>	0.00	0.00	0.80	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. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided 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:** Charlene McGee  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T  
**Program Characteristics:** Measure 5 Education

### Executive Summary

Community & Adolescent Health (CAH) programs aim to reduce the leading preventable causes of death, namely chronic disease (e.g., heart disease, stroke, diabetes) and injuries (e.g., drug overdose, traffic accidents, homicide, suicide). CAH employs place-based strategies that address the shared risk factors for chronic disease and injury and a focus on the particularly formative adolescent stage of the life course, including laying the groundwork for sexual and relationship health. CAH programs focus on the social determinants, neighborhood conditions, trauma, and toxic stress at the root of these adverse health outcomes. CAH leads with the goal of eliminating racial and ethnic health disparities by addressing systemic racism’s role in driving socioeconomic and other inequities.

### Program Description

Research shows zip code is a key determinant of health. Neighborhoods with socioeconomic disparities (higher poverty, lower educational attainment, disinvestment/gentrification) also have significant health disparities (chronic disease, exposure to violence and trauma, sexual/reproductive health). These geographic patterns also align with racial demographic distribution, highlighting the impact of systemic racism and de facto segregation. CAH works alongside community and school partners to prevent and improve these inequities through community-informed planning; training and technical assistance to build partner capacity; community health worker initiatives; communications; and policy, systems, and environmental improvements.

Programs include: Violence prevention – a public health approach including community-led projects to improve neighborhood livability, youth employment programs, and health education and teen dating violence prevention education in school and community settings. Sexual/relationship health - supporting schools to meet Oregon statutory requirements for comprehensive sexuality and healthy relationship education, child sexual abuse prevention programs, access to preventive reproductive health services, and technical support to culturally specific partners. Chronic diseases prevention - complementing other public health strategies by leveraging shared risk and protective factors for sexual health outcomes and violence that also increase access to healthy eating, active living, and smoke/nicotine-free environments.

CAH analyzes and maps local data on the leading causes of death, sexual health outcomes, incidents and exposure to violence, and other related indicators to identify the subpopulations and neighborhoods experiencing disparities. Analysis reveals stark racial disparities, informing CAH’s strategic prioritization of racism’s role in chronic disease, sexual health, and violence inequities. CAH centers community involvement and voice through cultivated partnerships, focus groups, needs assessments, and feedback loops to inform and guide program design.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of youth and community members engaged in health promotion and prevention activities	8,638	5,500	9,587	8,500
Outcome	# of policies, practices, health education, and technical assistance activities	161	85	180	100
Outcome	# of community and school sites involved in health promotion and prevention activities	101	55	96	75
Quality	% of trained adults who feel confident leading comprehensive sexuality/violence prevention education	96%	85%	95%	85%

### Performance Measures Descriptions

Measures 1 & 2 include school district and community-based settings. Measure 4 for is based on feedback from participants in school districts or community based settings who have participated in training(s).

## Legal / Contractual Obligation

OAR Rule 581-022-1440 State of Oregon's Human Sexuality Education Administrative Rule: support school districts who are legally obligated to meet this statute. Contractual obligation(s) include those outlined by our Grantor, Federal Office of Population Affairs (OPA) for our Teen Pregnancy Prevention (TPP) funding. Since CAH works to build capacity in community settings, the program follows COVID-19 precautions related to in-person gatherings, service closures/limitations, etc.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,600,281	\$1,011,004	\$1,589,529	\$1,331,072
Contractual Services	\$135,000	\$1,041,072	\$0	\$815,500
Materials & Supplies	\$91,333	\$85,016	\$59,168	\$35,560
Internal Services	\$287,946	\$207,419	\$322,005	\$238,172
<b>Total GF/non-GF</b>	<b>\$2,114,560</b>	<b>\$2,344,511</b>	<b>\$1,970,702</b>	<b>\$2,420,304</b>
<b>Program Total:</b>	<b>\$4,459,071</b>		<b>\$4,391,006</b>	
<b>Program FTE</b>	11.45	6.80	11.26	8.87

Program Revenues				
Intergovernmental	\$0	\$2,344,511	\$0	\$2,420,304
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,344,511</b>	<b>\$0</b>	<b>\$2,420,304</b>

## Explanation of Revenues

This program generates \$185,950 in indirect revenues.

- \$ 250,000 - 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
- \$ 400,739 - Public Health Modernization Local (HPCDP)
- \$ 269,565 - Federal STOP Preventing School Violence
- \$ 1,500,000 - Adolescents and Communities

## Significant Program Changes

**Last Year this program was:** FY 2023: 40060 Community & Adolescent Health

Significant Changes: In FY24, CAH will experience a reduction in grant funding from the Office of Population Affairs Teen Pregnancy Prevention (TPP) at \$1,455,000 per year. Funding supports 3.11 FTE and multiple community partner contracts that help us ensure over 8,000 youth each year receive comprehensive sexual health education in line with state standards. In FY23 this funding will end (as of June 30th 2023). Some service level will continue through a no cost extension and CAH's ongoing County General Funds. CAH plans to apply for a new round of TPP Funding in the Winter/ Spring of 2023.

**Department:** Health Department      **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40061B  
**Program Characteristics:**

**Executive Summary**

Harm Reduction provides access to sterile injection supplies to reduce transmission of HIV, HCV, and bacterial infections and provides naloxone to reverse opioid overdose. The opioid epidemic, rising methamphetamine use, increased fentanyl in the drug markets, and COVID-19 have led to increased drug use and the continued need for harm reduction services. The program also links individuals to substance use treatment when ready, health education, and other resources. It also provides technical assistance to counties throughout Oregon to improve service availability outside of the Portland metro area.

**Program Description**

Harm Reduction serves people who may not be ready to stop substance use, offering strategies to mitigate negative outcomes from drug use for individuals and the larger community. Services use trauma-informed risk reduction counseling and culturally appropriate referrals based on client readiness. Strategies include education, engagement, and promoting one-time use of injection supplies, which is critical to reducing HCV, HIV, and bacterial transmission. The program offers services at field-based and clinical sites in targeted locations. The Harm Reduction Clinic provides low barrier wound/abscess care and sexual health services for people not typically engaged in health care. The program optimizes ability to engage clients in HCV and HIV testing, including field-based testing, and linkage to treatment. Opioid overdose (OD) prevention education, naloxone and fentanyl test strip distribution help reduce fatal OD occurrence. The program continues to expand naloxone distribution at sites and trains community partners to carry and distribute naloxone. Staff provide statewide technical assistance and capacity building, allowing local organizations to access free or discounted purchase of naloxone through the program.

Health Equity: Across services, staff build trusting relationships with clients to overcome barriers to care associated with multiple intersecting experiences of marginalization. Most clients face the stigma of drug use. 60% of clients report homelessness/unstable housing and rely on low barrier services and supplies offered through this program. Harm Reduction Program is expanding technical assistance and distribution of supplies to community based organizations, with a priority on culturally specific organizations. The program collects race/ethnicity data and conducts comprehensive bi-annual surveys on demographics and drug use behaviors to inform policy and service delivery. The program provides technical assistance to organizations who deliver culturally specific services to support integration of harm reduction activities, including syringe distribution and overdose prevention. The program adds a position in FY24 to support increased overdose prevention and response coordination across health department divisions, with other county departments, and external partners.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unique clients served	5,297	7,500	6,000	6,300
Outcome	Number of overdose rescues reported	899	950	800	850
Outcome	Percentage of clients served that identify as BIPOC	24%	23%	23%	27%
Output	Number of syringes distributed	8,233,821	11,000,000	5,000,000	5,000,000

**Performance Measures Descriptions**

All measures represent Multnomah County and subcontractor Outside In sites. 1 and 2) FY23 estimate and FY24 offer are lower than FY23 budgeted, as a significant portion of people have decreased injecting opioids, smoking fentanyl instead as fentanyl has increased in availability (individuals are still at risk of overdose).

## Legal / Contractual Obligation

Federal funds cannot be used to purchase syringes. Overdose prevention technical assistance is required by SAMHSA SOR grant. HIV outreach, education and testing is required under HIV Prevention Block Grant funding. The program is responsible for sub-contracting and monitoring HIV Prevention Block grant funds to community partners in Multnomah County. CareOregon grant requires distribution of naloxone and harm reduction supply kits to public service agencies and community based organizations across Tri-County region.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$126,718	\$1,052,511	\$709,179	\$694,450
Contractual Services	\$71,534	\$352,371	\$246,827	\$101,152
Materials & Supplies	\$1,550,018	\$104,409	\$631,448	\$2,620,955
Internal Services	\$313,556	\$124,118	\$286,404	\$94,080
<b>Total GF/non-GF</b>	<b>\$2,061,826</b>	<b>\$1,633,409</b>	<b>\$1,873,858</b>	<b>\$3,510,637</b>
<b>Program Total:</b>	<b>\$3,695,235</b>		<b>\$5,384,495</b>	
<b>Program FTE</b>	0.98	8.12	4.60	5.10

Program Revenues				
Intergovernmental	\$0	\$1,257,986	\$0	\$757,504
Other / Miscellaneous	\$0	\$375,423	\$0	\$2,753,133
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,633,409</b>	<b>\$0</b>	<b>\$3,510,637</b>

## Explanation of Revenues

This program generates \$92,080 in indirect revenues.

Federal: \$ 283,328 -HIV Prevention Block - Prevention Services

State: \$ 91,249 - HIV Prevention Block - NEX

State: \$ 55,166 - HIV Harm Reduction GY06

Federal: \$ 81,994 - Naloxone Project (SOR)

State: \$ 211,767 - Public Health Modernization Local - Harm Reduction

\$ 34,000 - Harm Reduction Needle Exchange

\$ 2,553,133 - Overdose Prevention and Naloxone Distribution - Naloxone and Harm Reduction Supplies

\$ 200,000 - Harm Reduction Charges/Recoveries

## Significant Program Changes

Last Year this program was: FY 2023: 40061 Harm Reduction

A significant number of clients are transitioning from injection of other drugs to inhalation "smoking" of fentanyl. This has decreased the number of unique clients presenting at service sites, meaning naloxone overdose reversals may be underreported (people who have administered naloxone may not present in person to report the usage). Harm Reduction methods of outreach and engagement will need to evolve to meet changing need. The Harm Reduction Center (HRC) will reduce clinical services in response to decrease in external funding.

In FY23, a \$3.95M CareOregon grant was awarded that requires distribution of naloxone and harm reduction supply kits to public service agencies and community based organizations across Tri-County region.





Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$230,140	\$0
Materials & Supplies	\$0	\$0	\$49,860	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$280,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$280,000</b>	
<b>Program FTE</b>	0.00	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

Funding from Opioid Settlement

Significant Program Changes

Last Year this program was: FY 2023: 40061 Harm Reduction

Overdose prevention was previously supported by SAMHSA SOR grant, represented in PO #40061.

**Department:** Health Department      **Program Contact:** Thomas Bialozor  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40067, 40068  
**Program Characteristics:**

**Executive Summary**

Multnomah County's Behavioral Health Division (BHD) Administration manages a recovery-focused, comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in children and adults. The Division is grounded in values of racial and social equity, consumer driven services and trauma informed principles. Through culturally responsive and evidence-based practices, BHD serves low-income, uninsured, and individuals who are homeless, as well as any of the over 800,000 county residents experiencing a behavioral health crisis. BHD provides a continuum of services directly and through a provider network. These programs serve approximately 56,000 individuals annually.

**Program Description**

The Board of County Commissioners is the Local Mental Health Authority. Through that authority, BHD Administration oversees and manages all publicly-funded behavioral health programs in the system of care, whether provided directly or through contracted agencies. BHD is organized into 6 units: 1) The Community Mental Health Program (CMHP) which provides safety net and basic services to the adult population of the entire county. 2) Direct Clinical Services (DCS), which encompasses programs for children, youth, and families delivered directly by DCS staff. These services may be reimbursed by the local Coordinated Care Organization (CCO), by the state, or by another funding source. 3) Care Coordination for adults and children who are Medicaid members - funded by federal dollars through the local CCO as well as Choice, funded by the state. 4) Addictions, which includes the Providing Access to Hope (PATH) team, prevention, and contract management funded through the CCO, grants, and the state. 5) Quality Management which includes compliance, quality improvement, reporting, billing and Evolv, the Electronic Health Record for direct services by the BHD. 6) Office of Consumer Engagement (OCE).

BHD 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. The Division ensures the system and services provided are consumer-driven by prioritizing consumer voice through the Office of Consumer Engagement, frequent provider feedback, adult system and child system advisory meetings, focus groups and ad hoc meetings. BHD Administration is also responsible for ensuring contracted providers deliver evidence-based and culturally responsive services to consumers. BHD monitors contracts with providers for regulatory and clinical compliance. To ensure good stewardship, BHD business and clinical decisions ensure that finite resources are targeted to serve the most vulnerable populations. BHD management participates in planning at the state level to influence the policy decisions that affect the community we serve. BHD values our community partners, with whom we work collaboratively to create a system of care responsive to the needs of our community. BHD has focused its energies throughout the pandemic to stabilize or expand services for persons experiencing significant Covid impacts, prioritizing BIPOC communities, and key behavioral health concerns including increased acuity of mental health concerns, substance use increase, and violence.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total Behavioral Health Advisory Meetings	23	23	23	23
Outcome	Advisors agree with the statement, "Overall, BHD does its job well"	93.7%	80%	90%	85%

**Performance Measures Descriptions**

## 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,147,526	\$1,069,243	\$1,342,413	\$1,362,210
Contractual Services	\$770,000	\$103,317	\$524,571	\$450,000
Materials & Supplies	\$35,929	\$3,159	\$37,726	\$3,317
Internal Services	\$81,904	\$381,446	\$229,259	\$206,939
<b>Total GF/non-GF</b>	<b>\$2,035,359</b>	<b>\$1,557,165</b>	<b>\$2,133,969</b>	<b>\$2,022,466</b>
<b>Program Total:</b>	<b>\$3,592,524</b>		<b>\$4,156,435</b>	
<b>Program FTE</b>	7.49	5.49	7.77	5.31

Program Revenues				
Intergovernmental	\$0	\$734,627	\$0	\$1,268,888
Beginning Working Capital	\$0	\$822,538	\$0	\$753,578
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,557,165</b>	<b>\$0</b>	<b>\$2,022,466</b>

## Explanation of Revenues

This program generates \$144,611 in indirect revenues.

State: \$ 343,442 - MHS-01: Division Administration CY23

\$ 358,265 - CFAA Settlement 15-17 BWC

\$ 355,229 - CareOregon - Administrative Support

State: \$ 570,217 - OHA Behavioral Health Community Mental Health Programs & Capital - MH Admin

\$ 395,313 - MA Division Admin BWC

## Significant Program Changes

**Last Year this program was:** FY 2023: 40065 Behavioral Health Division Administration

This program offer now includes 1.5 FTE within the Office of Consumer Engagement for Peer expansion which fosters more effective communication and connection across the peer service community, invests in BIPOC and other population specific peer recovery support services, and develops integrated peer support services for persons with mental health and substance use concerns. In FY2024 this includes new State OHA Behavioral Health Community Mental Health Programs & Capital funds in the amount of \$570,217.

**Department:** Health Department      **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40065, 40068  
**Program Characteristics:**

**Executive Summary**

The Medical Records Program is responsible for the internal management of all of the Behavioral Health Division's (BHD) clinical records required by Oregon Revised Statutes, Oregon Administrative Rules and Coordinated Care Organizations. BHD staff provides services to over 20,000 enrolled clients annually, all with a clinical medical/mental health record in the Evolv system. Additionally, the Call Center serves over 22,000 people, all with crisis response notes in the Evolv system, that are managed and maintained by the Records and Evolv teams.

**Program Description**

The Behavioral Health Division's Medical Records Unit ensures that mental health, care coordination, protective services and alcohol and drug medical 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; archiving and retrieval; forms design and management; authorization/release of information; legal requests for records; notary services; and health information management expertise.

As the Local Mental Health Authority, BHD is also responsible for programs such as involuntary commitment, commitment monitoring, trial visit and residential services which require maintenance of an individual's medical records. BHD direct service programs are expected to serve more than 27,000 individuals, each requiring a medical record.

On October 6, 2022, the scope of the 21st Century Cures Act Information Blocking Rule expanded to prohibit health care providers from blocking or interfering with client access to any electronic information in a "designated record set," as the term is defined under HIPAA. To ensure compliance with this expanded rule, the Records Supervisor began tracking client access to records and an outcome has been added to this program offer to monitor compliance.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Count of record items processed annually plus scanned document count <sup>2</sup>	35,814	41,000	32,314	35,000
Outcome	Percent of representative sample audited for compliance with Medicaid billing rules <sup>1</sup>	100	100	100	N/A
Outcome	Percent of client records requests that are provided to requestor within allowable timelines	NEW	NEW	100	100

**Performance Measures Descriptions**

<sup>1</sup> This outcome is being deactivated. It has been 100% consistently since it started being measured.

<sup>2</sup>The Records team had vacancies that impacted work completion. These numbers reflect that, not a reduction in workload. We expect an increase in workload as new programs are initiated in BHD.

## Legal / Contractual Obligation

The following guidelines are utilized in monitoring the BHDs 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 OARs, Oregon Revised Statutes related to medical records & client confidentiality, State Archiving rules, CFR 42 Public Health, Ch. 1 Pt. 2, Public Laws 94-142 & 99-57, State of Oregon Mandatory Child Abuse Reporting Laws. Oregon Health Plan. Mental Health Organization Contract.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$133,147	\$343,814	\$193,925	\$322,967
Contractual Services	\$0	\$19,541	\$0	\$0
Materials & Supplies	\$4,774	\$5,000	\$0	\$3,119
Internal Services	\$36,614	\$106,273	\$49,505	\$88,641
<b>Total GF/non-GF</b>	<b>\$174,535</b>	<b>\$474,628</b>	<b>\$243,430</b>	<b>\$414,727</b>
<b>Program Total:</b>	<b>\$649,163</b>		<b>\$658,157</b>	
<b>Program FTE</b>	1.25	3.50	1.75	3.00

Program Revenues				
Intergovernmental	\$0	\$408,632	\$0	\$414,727
Beginning Working Capital	\$0	\$65,996	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$474,628</b>	<b>\$0</b>	<b>\$414,727</b>

## Explanation of Revenues

This program generates \$30,585 in indirect revenues.  
 State: \$ 108,853 - MHS-01: Medical Records CY23  
 Federal: \$ 305,874 - CareOregon - Medical Records

## Significant Program Changes

Last Year this program was: FY 2023: 40067 Medical Records for Behavioral Health Division

**Department:** Health Department      **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40065, 40067  
**Program Characteristics:**

**Executive Summary**

Quality Management (QM) includes the Compliance, Quality Improvement (QI), Records, Reporting, Evolv and Billing teams. The teams work collaboratively to assure the Division is able to rapidly identify, prevent, and mitigate risk; provide timely and meaningful data and outcomes to demonstrate appropriate stewardship of public funds and inform program development; maintain secure electronic health records and billing; and assure compliance with regulatory and policy requirements. These teams support workforce retention by attending to onboarding and training needs of employees. . These teams advance racial equity by providing real time information and data on systems, programs and policies that perpetuate systemic barriers to opportunities and benefits for BIPOC and other underserved populations.

**Program Description**

The QM, QI and Compliance teams conduct: internal and external agency audits, internal investigations and Root Cause Analysis, coordinate onboarding, policy and procedure development and review, contract reviews, timely responses to complaints and assure compliance with grievance procedures; 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.

The Reporting team uses SSRS and Tableau software to produce visuals and reports for measuring outcomes and fulfilling Reporting duties. They work closely with the Data Governance program, Information Technology (IT) and other Health Department Reporting teams to allocate and share county resources. They continue to lead in the implementation of industry best practices for the software development lifecycle, version control, user documentation, and process standardization.

The Evolv team provides oversight/administration of the Evolv EHR. They build custom forms and fields in the system for teams to collect data and work in conjunction with the Reporting team for the data entering and exiting the system. They perform ongoing upgrades and system maintenance to ensure system efficiencies. The team has representation at the National level, helping to support big improvements in Netsmart’s approach to our experience as an Evolv customer.

The Billing team implements and tracks communication procedures for provider billing set-up to prevent claim denials and reprocessing. They monitor access and use of Community Integration Manager (CIM) and Maintenance Management Information System (MMIS) data platforms, ensuring access controls. This year they reviewed rate changes for mental health and addiction services and updated fee schedules for internal and external providers to ensure payments for services are correct and optimized. They also developed and delivered training materials to BHD staff on Fraud, Waste and Abuse.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of clinical reviews and incident reports reviewed	12,384	13,500	13,362	13,500
Outcome	Percent of incidents residential programs mitigated through immediate safety implementations	96	98	97	96
Output	Number of requests managed by Decision Support Unit	3,455	3,800	3,549	3,800
Outcome	100% of policies and procedures will be transitioned into Health Department platform Compliance 360 in FY23 <sup>1</sup>	N/A	100	N/A	N/A

**Performance Measures Descriptions**

<sup>1</sup> This outcome is being deactivated. Health Department QM teams are reviewing department policy management software. Moving BHD policies in now would be counterproductive and inefficient.

## Legal / Contractual Obligation

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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,060,528	\$2,021,151	\$1,201,348	\$2,173,957
Contractual Services	\$0	\$216,854	\$10,752	\$185,521
Materials & Supplies	\$16,261	\$82,228	\$18,030	\$87,619
Internal Services	\$102,499	\$436,366	\$217,646	\$342,731
<b>Total GF/non-GF</b>	<b>\$1,179,288</b>	<b>\$2,756,599</b>	<b>\$1,447,776</b>	<b>\$2,789,828</b>
<b>Program Total:</b>	<b>\$3,935,887</b>		<b>\$4,237,604</b>	
<b>Program FTE</b>	6.51	13.31	7.17	13.65

Program Revenues				
Intergovernmental	\$0	\$1,501,208	\$0	\$1,687,177
Beginning Working Capital	\$0	\$1,255,391	\$0	\$1,102,651
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,756,599</b>	<b>\$0</b>	<b>\$2,789,828</b>

## Explanation of Revenues

This program generates \$199,056 in indirect revenues.

\$ 1,175,263 - Health Share of Oregon (Medicaid) Beginning Working Capital

State: \$ 744,779 - State Mental Health Grant: LA 01 System Management and Coordination

\$ 484,751 - Unrestricted Medicaid fund through CareOregon

State: \$ 80,000 - State Mental Health Grant: A&D 66 Decision Support

\$ 305,035 - Health Share Unrestricted Medicaid (Off the top) funding

## Significant Program Changes

Last Year this program was: FY 2023: 40068A Behavioral Health Quality Management

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30407B  
**Program Characteristics:**

### Executive Summary

The Behavioral Health Division is responsible for providing oversight and coordination for behavioral health crisis services to the entire population of Multnomah County. Crisis services are particularly important to ensure care to the most vulnerable and marginalized communities. Care is taken to support equitable services that prioritize addressing disparities related to access and outcomes. Additionally, there is an emphasis on further diversifying the workforce and providers of these services. Focus is given to increasing access to behavioral health support during times of crisis and decreasing use and/or reliance on law enforcement. Crisis services include immediate 24/7/365 access to phone crisis support, 24/7/365 mobile crisis outreach, and 24/365 urgent walk in care as well as access to Peer Supports and postvention care.

### Program Description

The behavioral health crisis system consists of multiple services that interconnect to support the acute behavioral health needs of the entire community regardless of age, insurance status, or other identity and there is no charge to the individual. Multnomah County Behavioral Health Call Center: Serves as the hub for crisis services and response. Phone support is available 24/7/365 from masters level clinicians. Services include, and are not limited to, crisis counseling, de-escalation, referral support, resource recommendations, and triage and dispatch of mobile crisis outreach. Dedicated warm transfer lines with 911 and 988 to improve coordination of care and reduce law enforcement dispatch to behavioral health emergencies. Dedicated referral and coordination lines to streamline and improve care coordination as well as access to sub-acute and respite services for uninsured individuals. During FY22 and FY23 we added 3 KSA Latino positions to cover 7 days a week and regularly offer services in Spanish. Mobile Crisis Response Teams: 24/7/365 mobile response teams of clinicians and peer support specialists available to respond anywhere within the county to meet with individuals in crisis, perform risk assessment, and develop safety plans. Services designed to provide follow up and wrap around support to reduce potential need for higher level of support. Teams prioritize response without law enforcement and when law enforcement is needed work in tandem to ensure behavioral health is addressed as primary. Services also include specific support and outreach to local Emergency Departments to connect individuals to ongoing care and reduce likelihood of crisis. Services available for all ages and in FY24 will increase culturally specific providers as well as enhance services including stabilization support for youth and families. Shelter Behavioral Health Team: 7 days per week, teams of QMHA counselors and Peer Support Specialists provide onsite support to county located homeless shelters. Services included outreach, engagement, crisis counseling, de-escalation, and follow up services to those at risk of escalation. Urgent Walk-In Clinic: 7/365 behavioral health clinic available to provide immediate Peer Support, crisis evaluation and triage, medication management, linkage and referral. Reduces utilization of Emergency Departments (ED) for those in need and provides immediate drop off support for law enforcement.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total Crisis System Contacts <sup>1</sup>	100,188	80,000	95,000	95,000
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ED	90%	90%	92%	90%
Outcome	% of language services provided directly by Call Center staff when need is identified at time of call.	52%	50%	50%	50%
Outcome	% of mobile crisis contacts that did not result in individuals going to jail.	99.7%	98%	98%	98%

### Performance Measures Descriptions

<sup>1</sup>The BHCC continued to exceed expectations with call volume this past FY. This is partially related to the BHCC serving as the referral hub for the Voluntary Isolation Motel (VIMo) from August 2021 through May 2022. We continue to add KSA Latino staff to support cultural responsiveness and increase in house language services. UWIC saw an increase of acuity in participants leading to a slight increase in those referred to ED.



## Legal / Contractual Obligation

The Multnomah County Community Mental Health Program contracts 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$501,616	\$3,828,724	\$192,800	\$5,125,501
Contractual Services	\$1,172,981	\$8,354,542	\$961,084	\$8,568,933
Materials & Supplies	\$30,279	\$27,523	\$22,095	\$48,262
Internal Services	\$36,322	\$917,215	\$32,187	\$1,040,915
<b>Total GF/non-GF</b>	<b>\$1,741,198</b>	<b>\$13,128,004</b>	<b>\$1,208,166</b>	<b>\$14,783,611</b>
<b>Program Total:</b>	<b>\$14,869,202</b>		<b>\$15,991,777</b>	
<b>Program FTE</b>	3.30	19.65	1.02	29.56

Program Revenues				
Intergovernmental	\$0	\$12,924,891	\$0	\$14,783,611
Beginning Working Capital	\$0	\$203,113	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$13,128,004</b>	<b>\$0</b>	<b>\$14,783,611</b>

## Explanation of Revenues

This program generates \$428,469 in indirect revenues.

Local \$ 619,216 - Washington County Crisis

Federal \$ 8,191,514 - Behavioral Health Medicaid

Federal \$ 237,097 - HSO Medicaid

State \$ 178,182 - State OHA Behavioral Health Community Mental Health Programs & Capital

State \$ 308,519 - CFAA MHS 05

State \$ 3,506,865 - SMHG MHS 25

Federal \$ 172,656 - SMHG MHS 25

State \$ 1,569,562 - SMHD MHS 37

## Significant Program Changes

**Last Year this program was:** FY 2023: 40069A Behavioral Health Crisis Services

1) During FY23 Project Respond was able to fully realize the increased use and integration of Peer Support Specialists on the mobile crisis team. State enhancement funds have been allocated to increase cultural representation by 7 staff and expand office space in East County. Staffing struggles have been an ongoing concern, impacting capacity and response time at PR and UWIC. 2) Funds are being utilized to increase coordination with 911/BOEC (Bureau of Emergency Communications). During FY24 BHCC will pilot stationing a call center staff at BOEC to increase coordination and support warm transfer of calls from 911 to BHCC. 3) OHA is in the process of transitioning previous CATS (Crisis) funding to MHS 25 and renaming the service as MRSS (Mobile Response and Stabilization Services). Multnomah County will be looking to enhance and expand youth, family crisis services over the next year.

**Department:** Health Department      **Program Contact:** Christa Jones

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

**Executive Summary**

In response to reports of increased behavioral health issues and disruptions of services at local non-shelter based homeless resource providers, Multnomah County initiated a pilot project to provide a combination of Peer and Clinical support services to these vital resource locations. It is imperative that additional support is available, as these incidents interfere with individuals' access to basic needs, impact staff providing these services, and impact the general community. Teams of two peers provide outreach and engagement at five agencies, each during their busiest hours of operation with the goal of decreasing critical incidents, reducing calls for emergency response, and connecting individuals to behavioral health resources.

**Program Description**

Over the past two years we have witnessed an increase in behavioral health symptoms and acuity as well as an increase in illicit substance use and violence in the downtown core. This is particularly true among our most vulnerable and marginalized population of homeless individuals. This has resulted in increased occurrences of escalated behaviors, violence, and behavioral health crises at local homeless social service providers.

This program is a direct action to intervene and support the providers of these services with additional resources and supports to reduce the impact on their staff and programming as well as support those individuals in dire need of additional support and connection. The Old Town Inreach Project (OTIP) is a truly collaborative program that partners teams of Peer Support Specialists (PSS) providers through Mental Health and Addictions Association of Oregon (MHA AO) with staff at four local homeless service providers as well as access to clinical support through Cascadia Health. The partner agencies include Blanchet House, Rose Haven, Maybelle Center, and William Temple House.

The utilization of PSS's allows the program to focus on working with individuals with a lens of recovery, hope, personal responsibility, self-determination and positive social connection. While the addition of a clinical staff enhances the teams ability to respond to behavioral health crisis situations, complete risk assessments, and access case management services as well as referral and linkage to additional providers.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of enrolled or intentionally engaged persons	28	400	86	95
Outcome	% reduction in service disruptions from baseline (1)	NEW	60%	53%	60%

**Performance Measures Descriptions**

As a pilot project, data collection has focused on developing baseline numbers of incidents and engagement opportunities. (1) Blanchet House data from FY 22 shows 12.8 service disruptions per month.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,100,000	\$1,131,429	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,100,000</b>	<b>\$1,131,429</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,100,000</b>		<b>\$1,131,429</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,100,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,100,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

**Last Year this program was:** FY 2023: 40199W ARP - Old Town Inreach

This is a pilot project that was funded starting part way through FY22. Work focused on development of program staffing and hiring primarily through the spring of 2022 with PSS supports in place starting the summer of 2022. Staffing has continued to improve over past months.

Unfortunately, Cascadia Health has struggled to hire the Qualified Mental Health Professional (QMHP) portion of this project. Conversations are ongoing regarding this challenge and the team continues to explore options and opportunities to enhance this portion of the program.

In FY 2023, this program was funded with American Rescue Plan funding (ARP). It is now being funded with General Fund

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 40069A  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Behavioral Health Division is responsible for providing oversight and coordination for behavioral health crisis services to the entire population of Multnomah County. Crisis services are particularly important to ensure care to the most vulnerable and marginalized communities. Care is taken to support equitable services that prioritize addressing disparities related to access and outcomes. Focus is given to increasing access to behavioral health support during times of crisis and decreasing use and/or reliance on law enforcement. Crisis services include immediate 24/7/365 access to phone crisis support, 24/7/365 mobile crisis outreach, and 24/365 urgent walk in care as well as access to Peer Supports and postvention care. This particular program offer funds family and youth specific intervention services.

**Program Description**

This program offer supports Family Crisis Stabilization Services. Funding will ensure support to families coming out of crisis with the goal of stabilization to reduce the likelihood of higher level of care being necessary and connection to ongoing services.

This program provides a peer approach to care and operates in coordination with clinical providers to ensure that families are provided holistic wrap around care, before they enter treatment. Engagement with an FSS will help integrate behavioral health services and provide continuity of care by ensuring that service connections and supports are available as youth participants await the early stages of treatment following a crisis.

This offer specifically supports a blend of client assistance and client incentives for the use of these funds for families who are involved with the Family Crisis Stabilization Services program through Cascadia. Client assistance funds are used across the behavioral health system to help clients address barriers that, without intervention, can contribute to crisis or destabilization. For example, by providing a client a phone, they gain access to the call center, their therapist or peer support specialist to connect with when they need support. Through client assistance funds, clients can obtain child care, housing, food, and open avenues for social connection, which also support stabilization and recovery.

In addition to supporting clients' access to basic needs and supports, Behavioral Health will use these funds to draw on evidenced-based motivational incentive models to support client engagement. This plan is based on similar models using operant conditioning principles (e.g. employee wellness programs) These models are well researched and demonstrate that financial incentives motivate individuals to adhere to treatment, achieve established goals and improve outcomes.

These funds will help support creative engagement and a positive introduction to a counseling relationship for clients and families and reduce emotional distress caused by material hardship.

These services are part of the Mobile Crisis Response Teams: 24/7/365 mobile response teams of clinicians and peer support specialists available to respond anywhere within the county to meet with individuals in crisis, perform risk assessment, and develop safety plans. This addition is in line with State and County goals to increase access to stabilization services to youth and families impacted by behavioral health crisis.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percent of youth/families will receive client assistance or incentives	N/A	N/A	N/A	50%
Outcome	Percent receiving funds will connect to ongoing services at discharge	N/A	N/A	N/A	80%
Outcome	Percent remaining engaged in services at the 6 and 12 month reporting periods	N/A	N/A	N/A	70%

**Performance Measures Descriptions**

The second performance measure speaks to engagement, keeping appointments, and positive outcome.

The third performance measure is for those who are recommended for ongoing services and who are enrolled with the FCSS provider.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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:** Health Department      **Program Contact:** Christa Jones

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

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

### Executive Summary

Multnomah County strives to provide comprehensive crisis services to the whole community. Therefore, It is imperative that we support and offer varying levels of care and services to individuals. This includes ensuring that uninsured individuals, who are likely the most marginalized and at risk, have access to sub-acute services to address behavioral health crises. Multnomah County contracts with local sub-acute provider, Telecare Corp, to ensure that the Crisis Assessment and Treatment Center (CATC) provides services to the entire community. The county funds three beds (of their sixteen total) to support uninsured or underinsured individuals. CATC provides short term (under 30 days per OAR) wrap-around services including access to Peers, medication management, and physical and mental health supports in a secure environment.

### Program Description

CATC Subacute is a 24 hour, 7 day a week, short-term stabilization program for those individuals who require a secure alternative to incarceration or hospitalization due to a mental health crisis. It is a critical component in a full continuum of mental health services with the mission of providing a non-hospital based secure environment for those at risk of harm to themselves or others due to mental illness. The program services adults, 18 years of age and older, who have been diagnosed with a serious mental illness who are residents of Multnomah County. Although length of stay may vary, individuals not under civil commitment statutes can not exceed 30 days without a variance. Throughout their stays individuals are connected to programmatic support internally and externally in order to support discharge and decrease the likelihood of requiring a higher level of care or experiencing a negative consequence of hospitalization (loss of housing, services, financial stability, etc). Peer Support Specialists are an integral part of the CATC model and provide comprehensive support to individuals in care.

Multnomah County funds two beds at CATC in order to ensure that the uninsured and/or underinsured have access to this valuable resource. Individuals are referred by a behavioral health provider in order to access the services and these referrals are processed through the Multnomah County Behavioral Health Call Center (BHCC) By processing these referrals the BHCC can assist with prioritization and advocacy of the most vulnerable and at risk members of the community. The BHCC also works closely with other service providers including crisis services, Respite, and local Emergency Departments to assist individuals in crisis in accessing the correct level of support and potential stepping down or up through services as needed.

A third bed is funded by the Criminal Justice Commission (CJC) IMPACTS grant and through Oregon Health Authority to support the Aid and Assist population. This bed is specifically set aside for individuals that are having increased contact with the criminal justice system. Referrals to these Aid and Assist treatment beds come from the Coordinated Diversion program and are managed through the Call Center.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of admissions that are Non-HSO Members (Non Medicaid members) <sup>1</sup>	15	25	21	25
Outcome	Percentage of individuals discharged from CATC to a lower level of care	New	New	New	95%
Outcome	Percentage of BIPOC community member access to Non Medicaid "CMHP" admissions. <sup>2</sup>	6%	52%	10%	10%

### Performance Measures Descriptions

<sup>1</sup>The number of admissions for CATC over FY22 were not as predicted due to the ongoing impact of COVID 19. Admissions were halted due to outbreaks and less referrals were submitted in the wake of a closure.

<sup>2</sup>The percentage of BIPOC community members served was lower than predicted, and this is related to insurance, medical issues/needs, and/or out of county residential status. Measure will be adjusted to reflect percentage of BIPOC community member access to non Medicaid CMHP admissions where admission criteria is met.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$741,017	\$0	\$661,340	\$0
<b>Total GF/non-GF</b>	<b>\$741,017</b>	<b>\$0</b>	<b>\$661,340</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$741,017</b>		<b>\$661,340</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:** FY 2023: 40070 Mental Health Crisis Assessment & Treatment Center (CATC)

During FY24 we will be transitioning one of the three beds currently funded to fully support the work of the Forensic Diversion Team

**Department:** Health Department      **Program Contact:** Christa Jones

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

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

Behavioral Health Division's (BHD) Adult Protective Services (APS) investigates abuse and neglect. Criteria that gives APS authority to open investigations include all of the following; individuals over age 18 who are receiving mental health services and/or that reside in a residential facility, and with a serious and persistent (SPMI) mental health diagnosis. In addition, APS offers community education/training to internal and external partners using a cultural lens to open dialogue regarding culture, race and protective services. Protective services are provided to individuals engaged in services and outreach/coordination and risk case management services to individuals not engaged in services or whose allegations do not meet authority to open a case for investigation.

**Program Description**

BHD's Adult Protective Services is a mandated program, guided by state law, to protect adults with SPMI mental health disabilities from abuse and victimization. The program receives and screens abuse reports from mandatory reporters, community members and victims of abuse. BDH APS is considered a safety net service, whether or not the incident qualifies for investigation, time is taken to assess risk, develop and coordinate protective services and safety planning, all to mitigate the risk for these vulnerable individuals. The Division's APS staff coordinate multidisciplinary teams to develop plans to reduce risk of harm, reduce vulnerability and connect victims and potential victims to services.

The program includes risk case management (RCM), which is unique to the State of Oregon Behavioral Health APS. Our risk case manager serves as an additional layer of support and connection for those who are most vulnerable due to mental health disability, substance use disorder, homelessness, and abuse. The APS program also has two African American culturally specific, KSA abuse investigator positions to provide screening, investigation and training services in a culturally and trauma-informed manner by outreach to those Black, Indigenous, Latino and other Communities of Color who historically under report to APS. Our Community Educator, KSA position is also unique across the State of Oregon and is instrumental in addressing the historical under-reporting of abuse in the African American community and tailoring interventions, supports and recommendations to be culturally specific. Finally, the Division's APS is responsible for providing mandatory abuse reporting training to our community partners and community members to increase their understanding of the rules, criteria, process and outcome of abuse reporting. The state now requires documentation through the Centralized Abuse Reporting database in addition to BHD's requirement for documentation in the official electronic health record, Evolv.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of screenings/investigations <sup>1</sup>	1,062	1,000	1,017	1,000
Outcome	# protective services screening referred to Risk Case Management <sup>2</sup>	78	80	80	80
Output	Number of community education presentations <sup>3</sup>	21	25	25	25

**Performance Measures Descriptions**

<sup>1</sup>Adult protective services are offered to every alleged victim either directly or through safety planning with the provider, which happens at the screening level. Not all screenings result in investigations.

<sup>2</sup>Cases referred to risk case management increased in acuity, therefore fewer cases were able to be assigned to this role (1FTE).



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$908,023	\$238,592	\$1,052,220	\$237,043
Materials & Supplies	\$5,550	\$23	\$5,827	\$24
Internal Services	\$140,008	\$18,727	\$148,944	\$20,275
<b>Total GF/non-GF</b>	<b>\$1,053,581</b>	<b>\$257,342</b>	<b>\$1,206,991</b>	<b>\$257,342</b>
<b>Program Total:</b>	<b>\$1,310,923</b>		<b>\$1,464,333</b>	
<b>Program FTE</b>	6.21	1.59	6.49	1.51

Program Revenues				
Intergovernmental	\$0	\$257,342	\$0	\$257,342
<b>Total Revenue</b>	<b>\$0</b>	<b>\$257,342</b>	<b>\$0</b>	<b>\$257,342</b>

## Explanation of Revenues

State \$ 257,342 - State Mental Health Grant: LA 01 System Management and Coordination

## Significant Program Changes

**Last Year this program was:** FY 2023: 40071 Behavioral Health Division Adult Protective Services

Since the onset of the pandemic, APS screening calls have increased and the demand for Risk Case Management (RCM) services has increased proportionately. The RCM team provides in-home and/or community-based services. Due to increased community violence (on transit or downtown streets), including direct threats against staff, the team is now providing these services in pairs. While this promotes staff safety when in the community, it results in more time spent providing fewer client contacts for the RCM service.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

As a function of the Local Mental Health Authority (LMHA), the County is obligated to perform various duties related to involuntary mental health treatment. The Involuntary Commitment Program investigates person's being involuntarily detained for mental health treatment to make reports to the court about whether or not a person should have a civil commitment hearing. Evaluation of persons in a civil commitment hearing is conducted by mental health examiners. Post commitment monitoring and trial visit monitoring are provided. This program includes payment of involuntary hospital stays for individuals without insurance or financial means. Reduction of inpatient treatment needs are addressed by funding of an Assertive Community Treatment program and Intensive Case Management services provided through contracted services.

**Program Description**

Commitment Services consists of interconnected pre and post commitment services: Under pre-commitment services the Involuntary Commitment Program (ICP) employs certified commitment investigators to evaluate individuals who are involuntarily detained in hospitals and are alleged to be a danger to self/others or unable to provide for their basic personal needs due to a mental disorder. ICP investigators make recommendations to the court about whether or not a person alleged to be mentally ill should be civilly committed. If a person is recommended for civil commitment, the law requires that a certified examiner conduct further evaluation of the individual during a civil commitment hearing. When a person is civilly committed they are transferred to post-commitment services so their care and treatment may be monitored by the CMHP. The commitment monitors make care recommendations, facilitate referrals to long term care, and liaise with other County programs. When a civilly committed person is discharged to the community while remaining under committed status this is called a trial visit. Trial visit staff monitor a committed person's adherence to community based care to enhance individual and community safety while reducing the need for further inpatient mental health treatment. Commitment Services programs employ staff who are able to provide culturally specific services to address and respond to the needs of Black/African American and Vietnamese and Japanese individuals.

Services apply an equity lens, utilizing culturally specific positions and culturally responsive ideals to protect the civil rights of vulnerable individuals. Staff also serve as advocates, highlighting the adverse impact of dominant culture treatment design, laws and systems on the lives of Black, Indigenous and People of Color communities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total number of notices of mental illness (NMIs) (1)	2,386	2,700	2,361	2,400
Outcome	% of investigated NMIs that did not go to Court hearing (2)	89%	80%	86%	80%
Outcome	% of investigated NMIs taken to court hearing that resulted in commitment (3)	80%	90%	82%	90%
Output	# of commitments monitored annually (4)	258	350	260	260

**Performance Measures Descriptions**

(1) This includes NMIs for residents without insurance and residents with insurance. (2) Measure staff effectiveness in applying ORS 426 and reducing burden on the system. (3) The decrease in FY23 is a result of new arguments for dismissal and changed rulings by the court, these are actively being managed to increase %. (4) # reflects new & existing commitments of residents in acute care settings & secure placements.

## Legal / Contractual Obligation

ORS 426 requires that all persons placed on a notice of mental illness be investigated within one judicial day, 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,178,312	\$2,497,990	\$1,250,417	\$2,629,995
Contractual Services	\$234,285	\$255,343	\$257,894	\$192,343
Materials & Supplies	\$9,444	\$43,992	\$9,916	\$46,191
Internal Services	\$361,668	\$170,628	\$467,705	\$99,424
<b>Total GF/non-GF</b>	<b>\$1,783,709</b>	<b>\$2,967,953</b>	<b>\$1,985,932</b>	<b>\$2,967,953</b>
<b>Program Total:</b>	<b>\$4,751,662</b>		<b>\$4,953,885</b>	
<b>Program FTE</b>	8.00	16.10	8.00	16.10

Program Revenues				
Intergovernmental	\$0	\$2,967,953	\$0	\$2,967,953
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,967,953</b>	<b>\$0</b>	<b>\$2,967,953</b>

## Explanation of Revenues

State \$ 2,967,953 - State Mental Health Grant: MHS 24: Acute & Intermdt Psych - Commit

## Significant Program Changes

**Last Year this program was:** FY 2023: 40072 Mental Health Commitment Services

The ongoing impact of the pandemic and other community challenges have resulted in continued increase in clinical acuity of individuals in the involuntary treatment services. Higher acuity, continued isolation, increased substance abuse, increased community and interpersonal violence, limitations in the availability of mental health services has strained the behavioral health care system. Providers have had to prioritize essential services and responding to crises with limited staffing. These circumstances have had some impact on service providers being able to collect and report data in a timely manner.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Northstar Clubhouse, a peer-run supported employment program offering employment, wellness and administrative support to adults with mental illness who are seeking employment is supported by this program which utilizes County, federal, state, other local and federal Substance Use and Mental Health Services Administration (SAMHSA) funding. Additional funding comes from the CCO, private foundations and in-kind donations.

**Program Description**

This program offer funds the operating costs and positions for the peer-run supported employment center, which is a nationally certified clubhouse model center, a fidelity based model. Continued funding through this offer ensures that the staff and program can continue to meet the fidelity standards required for Certification and continue to engage in diversity and equity initiatives, including data collection and reporting (ie new referral demographic data is captured). Of the persons served by this program, 13% were from Black, Indigenous and People of Color ( BIPOC) communities. Certification requires that the peer-run entity meet a defined standard of service delivery. Peer-run supported employment provides encouragement and assistance for individuals who live with a mental illness in securing continuing education, employment, volunteer opportunities and advocating for reasonable accommodations. Northstar partners with a range of culturally specific programs and communities to develop inclusive, trauma informed and equitable practices that encourage people of many backgrounds to engage in the Clubhouse community.

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 who live with mental illness to pursue both educational and employment opportunities

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of active members	226	155	246	155
Outcome	Percent of members in paid employment positions	23.2%	30%	20.4%	25%
Output	Average daily attendance	20	16	21	20

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$109,368	\$0	\$120,389	\$0
<b>Total GF/non-GF</b>	<b>\$109,368</b>	<b>\$0</b>	<b>\$120,389</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$109,368</b>		<b>\$120,389</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: FY 2023: 40073 Peer-run Supported Employment Center

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Mental Health Residential Services (RS) provides health and safety oversight to residential programs that house 652 individuals in Multnomah County. RS programs include: Secure Residential Treatment Facilities (SRTF), Residential Treatment Homes (RTH), Adult Care Homes, and a range of supportive/supported housing. These units provide stability, thereby decreasing the likelihood that participants will need acute care services or become houseless. In addition, RS hosts monthly trainings for residential providers, cultivating a learning environment on topics such as mental healthcare, ancillary supports, system navigation, and changes to/interpretation of Oregon Administrative Rule. Daily, RS engages providers regarding resident admissions/evictions to address bias, racism, and culturally responsive treatment needs.

**Program Description**

The Residential Services (RS) program provides regulatory, health and safety oversight, and technical assistance to designated residential mental health programs. Services are provided through the use of clinical consultations, problem-solving, participation in client interdisciplinary team meetings, review of appropriateness of unplanned discharges, and monitoring and enforcement of client rights. RS staff also participate in audits and licensing reviews. The RS team participates in monthly diversity, equity and inclusion discussions to better understand and take action against systemic racism, and how to support equitable outcomes for Black, Indigenous and People of Color (BIPOC) and other marginalized groups.

RS oversees approximately 85 residential programs, with approximately 652 clients, that include Secure Residential Treatment Programs, Residential Treatment Homes/Facilities, Adult Care Homes (ACH), Crisis/Respite Programs, and Supportive Housing Programs. RS provides health and safety oversight through the review and response to incident reports completed by residential programs. RS partners with Quality Management (QM) who hold Critical Incident Reviews with residential providers and provide a Root Cause Analysis as needed. -QM has processed approximately 12,384 incident reports.

RS supports the development of new mental health ACHs and the creation of new placement opportunities. Despite developing placements in seven new ACHs in 2022, six ACHs were lost from the provider network due to retirements, billing issues and lack of work/life balance.

The primary population served in RS programs are Choice Model eligible (diagnosis of severe persistent mental illness, under civil commitment and/or admitted to the Oregon State Hospital, OSH). RS also serves those who are under the jurisdiction of the Psychiatric Security Review Board and those receiving community restoration services under Aid and Assist orders. The Aid and Assist population served within residential programs is small, but it is expected to grow in 2023 to support increased individual liberties in the community and outside of institutional care at the OSH. Individuals who meet admission criteria for residential placement, but are not served by either Choice Model or the PSRB are referred to licensed residential programs through the RS program, referred to as CMHP placements.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of placements that receive health and safety oversight by Residential Services	651	641	653	650
Outcome	% of Non-Multnomah County Residents Placed in RTH/F and SRTF Housing	22%	22%	22%	22%
Output	# of CMHP referrals managed by Residential Services	32	42	31	32

**Performance Measures Descriptions**

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,216,902	\$506,654	\$1,356,247	\$515,664
Contractual Services	\$0	\$8,054,214	\$0	\$8,079,247
Materials & Supplies	\$4,258	\$6,620	\$4,492	\$6,930
Internal Services	\$149,731	\$120,044	\$163,222	\$101,847
<b>Total GF/non-GF</b>	<b>\$1,370,891</b>	<b>\$8,687,532</b>	<b>\$1,523,961</b>	<b>\$8,703,688</b>
<b>Program Total:</b>	<b>\$10,058,423</b>		<b>\$10,227,649</b>	
<b>Program FTE</b>	8.15	3.65	8.35	3.45

Program Revenues				
Intergovernmental	\$0	\$8,652,716	\$0	\$8,703,688
Beginning Working Capital	\$0	\$34,816	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,687,532</b>	<b>\$0</b>	<b>\$8,703,688</b>

## Explanation of Revenues

Federal \$ 182,779 - State Mental Health Grant based on 2019-2021 IGA with State of Oregon

State \$ 8,520,909 - State Mental Health Grant based on 2019-2021 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2023: 40074 Mental Health Residential Services

**Department:** Health Department      **Program Contact:** Jessica Jacobsen  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Choice Model Program consists of Care Coordination services and contracted services to work with individuals with Severe and Persistent Mental Illness (SPMI). Choice diverts individuals from Oregon State Hospital (OSH); coordinates successful discharge from OSH and acute psychiatric hospitals 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; 703 individuals were served in fiscal year 2022, of whom 27% identified as Black, Indigenous or other People of Color (BIPOC).

**Program Description**

The Behavioral Health Division's Choice Model Program works with other Division units, Acute Care Hospitals, OSH, Oregon Health Authority (OHA)/Health Systems Division, Coordinated Care Organizations (CCO), and counties to coordinate the placement and transition of individuals primarily within a statewide network of licensed housing providers. The overarching goal of Choice is to assist individuals to achieve the maximum level of independent functioning possible. This goal is achieved by diverting individuals from admission to hospital level of care to community-based resources; supporting timely, safe and appropriate discharges from hospitals into the community; and providing access to appropriate supports (skills training, case management, etc.) to help individuals achieve independent living and self-sufficiency in the least restrictive housing environment. Program includes Exceptional Needs Care Coordination, access to peer services, funding for uninsured/underinsured clients for outpatient services, housing supports, rental assistance, etc.

Services offered by Choice 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 identify the least restrictive setting where the individual will maintain stability. Care Coordination provides referrals to community mental health programs; supported employment to help move clients towards greater self-sufficiency; and transition planning to assure the most efficient utilization of the licensed residential housing capacity within the community.

The program has increased financial support to community placements and works primarily with Acute Care Hospitals as OSH capacity has become minimal for the civil population for the last three years, partly due to COVID. Choice also participated in significant work on workflows, policies and procedures to clarify access and promote more equitable service delivery.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of Clients Served in Choice	703	700	697	700
Outcome	% of clients receiving direct client assistance to meet basic needs <sup>1</sup>	14.55%	15%	14%	15%

**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.

CCO Delegation Agreements with CareOregon and Trillium.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,914,425	\$0	\$2,336,440
Contractual Services	\$0	\$1,971,628	\$0	\$2,444,698
Materials & Supplies	\$0	\$11,747	\$0	\$12,334
Internal Services	\$0	\$397,060	\$0	\$404,342
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,294,860</b>	<b>\$0</b>	<b>\$5,197,814</b>
<b>Program Total:</b>	<b>\$4,294,860</b>		<b>\$5,197,814</b>	
<b>Program FTE</b>	0.00	13.34	0.00	13.32

Program Revenues				
Intergovernmental	\$0	\$4,294,860	\$0	\$5,197,814
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,294,860</b>	<b>\$0</b>	<b>\$5,197,814</b>

## Explanation of Revenues

This program generates \$168,539 in indirect revenues.

Federal \$ 1,571,870 - Unrestricted Medicaid fund through CareOregon

State \$ 3,625,944 - State Mental Health Grant: CHOICE Model based on 2021 IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2023: 40075 Choice Model

It is anticipated that in FY24, 2.0 Limited Duration FTE will be funded, one housed in Diversion Courts Team and one housed in Choice team to improve support available to individuals involved in Forensic programs and coordination between program areas to meet client needs.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Multnomah Treatment Fund (MTF) prioritizes community-based services to individuals who experience challenges associated with severe mental illness. MTF services for uninsured individuals without financial resources that are ineligible for Medicaid through Oregon Health Plan (OHP). These individuals may have been released from jail or psychiatric hospitals and/or are at risk of hospitalization or decompensation of mental health stability. In some cases, the program creates access to critical behavioral health services for individuals who do not qualify for many public entitlements and resources because of their immigration status. Contracted providers are responsible to ensure diversity training for staff, a diverse workforce, and incorporating social equity innovation into their policy development and service delivery.

**Program Description**

The Behavioral Health Division provides funds to the network of providers to treat consumers who are uninsured during periods of exacerbated psychiatric symptoms in acute stages of mental illness.

The goal is to stabilize and prevent more drastic consequences including hospitalization, incarceration, loss of housing, impacts of substance use disorder and loss of custody of children. If these services are effective, the client's stability is supported so that trauma, increased vulnerability and suffering is prevented or reduced and the county preserves funds that would otherwise be lost to costly deep-end institutional responses such as hospitalization, corrections, or homelessness response/emergency services. Providers do a review during their intake process to ensure that MTF services are provided as clinically necessary and that clients' insurance status and financial eligibility meet program criteria. Services can include individual and group therapy, case management, community outreach, housing assistance, medication management, co-occurring disorder treatment, care coordination, and crisis intervention. While the person is receiving services, they can be linked to other supports and acquire assistance in securing OHP benefits. The demand for services in this program have continued to decrease due to Medicaid Expansion, however this service is critical to provide due to limitations on Medicaid eligibility requirements and on Medicare approved services. There are individuals who require this safety net program to receive on-going mental health case management and treatment services. Additionally, some services, such as intensive case management and general case management are not covered by Medicare. 20% of the persons served in this program were from Black, Indigenous, and People of Color ( BIPOC ) Communities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total # of adults who received county-funded outpatient services or medication (1)	210	400	205	200
Outcome	Percentage of MTF clients that are hospitalized	3.2%	6.2%	3.0%	3.0%

**Performance Measures Descriptions**

(1) We have seen a decrease in utilization since FY 22, resulting in fewer clients being served through this program. Providers report that more individuals are insured who are seeking their behavioral health services.

## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$1,259,920	\$0	\$705,591	\$0
<b>Total GF/non-GF</b>	<b>\$1,259,920</b>	<b>\$0</b>	<b>\$705,591</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,259,920</b>		<b>\$705,591</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:** FY 2023: 40077 Mental Health Treatment & Medication for the Uninsured

The budget was decreased to match actual spending.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40199Y  
**Program Characteristics:**

### Executive Summary

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young people aged 12 to 25 who demonstrate initial symptoms of psychosis or are found to be at high risk for developing psychosis. The goal of the program is to develop a long-term recovery and support plan. EASA is a two-year program that offers formal mental health treatment services, educational support, employment support, and involves the young person's family and their other supports in treatment. The program receives and screens approximately 200 referrals per year and provides services to over 100 enrolled individuals each year. In FY22, 47% of the enrolled EASA clients identified as people of color, 52% as white and 2% as unknown or not provided.

### Program Description

EASA is an evidence-based and fidelity-based model resulting from 14 years of research that demonstrates early intervention and immediate access to treatment can directly reduce psychiatric hospitalization rates and the long term debilitating consequences of psychosis. The EASA fidelity-based model helps young people impacted by psychosis develop long-term recovery plans.

The multidisciplinary team approach and program activities and services are designed to meet the fidelity standards of the model as required by the state. The team includes both a child/adolescent and an adult psychiatrist, mental health consultants, a peer support specialist, employment specialists, an occupational therapist, and a nurse. The team has been formed to include linguistically and culturally specific consultants to reflect the population served.

Treatment is community-based and consists of services tailored to meet the unique needs of each client. Clients are matched with a psychiatrist and a mental health consultant based on age, 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, support for employment, psychiatric nursing services, peer support, occupational therapy assessment and intervention, multi-family group, individual and/or family psychotherapy, psychoeducation, and social skills building groups.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total individuals enrolled in the EASA program receiving ongoing services	126	130	123	130
Outcome	% reduction in hospitalization rate three months pre and 6 months post enrollment <sup>1</sup>	85%	85%	85%	85%
Output	Number of unduplicated individuals referred to the EASA program	213	200	215	200

### 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$350,308	\$1,546,702	\$384,222	\$1,722,629
Contractual Services	\$24,498	\$175,460	\$97,489	\$82,980
Materials & Supplies	\$51	\$12,221	\$54	\$12,832
Internal Services	\$9,525	\$269,149	\$5,892	\$275,940
<b>Total GF/non-GF</b>	<b>\$384,382</b>	<b>\$2,003,532</b>	<b>\$487,657</b>	<b>\$2,094,381</b>
<b>Program Total:</b>	<b>\$2,387,914</b>		<b>\$2,582,038</b>	
<b>Program FTE</b>	2.10	10.75	2.17	10.93

Program Revenues				
Intergovernmental	\$0	\$1,560,812	\$0	\$1,560,812
Service Charges	\$0	\$442,720	\$0	\$533,569
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,003,532</b>	<b>\$0</b>	<b>\$2,094,381</b>

## Explanation of Revenues

This program generates \$28,912 in indirect revenues.

\$ 523,569 - Fee For Service Insurance Receipts

\$ 10,000 - State Vocational Rehabilitation Award

State \$ 1,324,668 - State Mental Health Grant based on 2021 IGA with State of Oregon

State \$ 226,020 - SMHG MHS 38

Federal \$ 10,124 - State Community Mental Block Grant

## Significant Program Changes

Last Year this program was: FY 2023: 40078 Early Assessment & Support Alliance

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Community Based Mental Health for Children, Youth and Families provide critical safety net services from an equity lens to children and youth who are in need of culturally responsive mental health services. Evidence based, trauma-informed practices are used to deliver: family support, individual/group therapy, skill building and violence prevention services. Multnomah County is dedicated to providing behavioral health services to those impacted by gun violence and developed the Gun Violence Behavioral Health Response Team. This program provides resources to support a Mental Health Consultant to provide culturally specific mental health services to African American identified youth (age 10-18) and their families who are impacted by gun violence as well as provide outreach and education in the community.

### Program Description

Multnomah County Community Based Mental Health offers a range of services for at risk youth includes: child abuse mental health services at CARES NW (Child Abuse Response and Evaluation Services North West) Multnomah Treatment Fund mental health services for under or uninsured children and violence prevention and mental health support for those impacted by gun violence.

Multnomah Treatment Fund contracts with mental health providers in the community to provide treatment to underserved children who need treatment services but have no insurance or are under insured. CARES NW is a child abuse evaluation center, mental health consultants provide trauma informed support and resources to children and their families. CARES mental health consultants work with children and their families, using culturally responsive practices, to mitigate and reduce the negative impact of trauma on long-term health, including mental health. Our CARES consultants have Knowledge Skills and Abilities focused on Spanish Language and African American Culture. County CARES consultants along with Legacy CARES consultants served over 300 families in FY22.

The Mental Health Consultant (MHC) for the Gun Violence Behavioral Health Response team provides a range of culturally relevant, evidence based mental health services for the African American community. The MHC utilizes lived experience and community informed practices to provide culturally specific mental health prevention support, mental health services, consultation, outreach and engagement. The MHC collaborates with community providers and internal county programs to provide consultation, education, outreach, and engagement and connection to mental health services. They assist with outreach to schools, colleges, emergency rooms, community services, health and social services providers and community meetings to share referral information and general education as it relates to community gun violence and behavioral health services. They will participate in specific outreach and engagement to African American clients and families who may have barriers to accessing responsive and culturally-informed behavioral health services. This role gathers community input around community needs and is responsive to those needs through advocacy and service.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total children who receive Mental Health or Family Support Services at CARES NW from Mult Co staff	172	100	85	100
Outcome	ACORN Distribution of Patient Change reported by client/student as their perception of improvement <sup>2</sup>	N/A	65%	65%	65%
Output	Total Multnomah County Children who received Behavioral Health service through African American KSA	N/A	20	15	20
Output	Total # of outreach/engagement activities attended/provided	N/A	15	36	15

### Performance Measures Descriptions

<sup>1</sup>The program model changed in FY22 where staff at the county and CARES NW now offer services to Multnomah County Clients. These #s include Multnomah county youth served by Multnomah County staff at CARES NW. There is an MHC vacancy at CARES NW which is being recruited for. <sup>2</sup> African American consultants were hired after fiscal year FY22 so there is no data for FY22. <sup>3</sup> African American consultants were hired after fiscal year FY22 so there is no data for FY22.

## Legal / Contractual Obligation

MTF Contracts with Lifeworks and Morrison.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$412,843	\$184,982	\$687,900	\$250,438
Contractual Services	\$0	\$301,319	\$0	\$0
Materials & Supplies	\$17,450	\$1,556	\$21,860	\$801
Internal Services	\$29,699	\$68,254	\$44,461	\$63,156
<b>Total GF/non-GF</b>	<b>\$459,992</b>	<b>\$556,111</b>	<b>\$754,221</b>	<b>\$314,395</b>
<b>Program Total:</b>	<b>\$1,016,103</b>		<b>\$1,068,616</b>	
<b>Program FTE</b>	2.56	1.21	4.15	1.62

Program Revenues				
Intergovernmental	\$0	\$556,111	\$0	\$314,395
<b>Total Revenue</b>	<b>\$0</b>	<b>\$556,111</b>	<b>\$0</b>	<b>\$314,395</b>

## Explanation of Revenues

Local \$314,395 - Head Start Contracts

## Significant Program Changes

Last Year this program was: FY 2023: 40080A Community Based MH Services for Children & Families

**Department:** Health Department      **Program Contact:** Jessica Jacobsen

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

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

The Care Coordination Unit was formed in 2020 in the Behavioral Health Division as a result of CCO 2.0 and provides care coordination for all ages f, including: Wraparound, Youth & Adult Intensive Care Coordination (ICC), & the Multnomah Intensive Care Coordination Team (M-ITT). Wraparound and Youth ICC provide a broad range of care coordination services and work within the multi-tiered Children System of Care Governance Structure to address cross system barriers for youth and families. Adult ICC provides integrated care coordination to adults with complex behavioral health needs to improve health outcomes and experience. M-ITT provides short term care coordination and case management to support adults during and after a psychiatric hospitalization to connect to community-based services.

**Program Description**

Wraparound, Youth & Adult ICC are funded by Oregon Health Plan via a delegation agreement with Coordinated Care Organization(s). M-ITT is funded by HealthShare as part of the Crisis Services continuum of care. Care Coordinators partner with Primary Care Providers, Community Behavioral Health Providers, Department of Community Justice, Housing Providers, Intellectual Developmental Disabilities (IDD), Oregon Department of Human Services (ODHS), Child Welfare, School Districts, Peer Service Providers, and other stakeholders to improve care and outcomes for clients.

ICC and Wraparound Care Coordinators engage in a team planning process with adults, youth, family and community partners and providers to develop a unified, strengths-based plan to address individualized needs. For youth participating in Wraparound services, their plan of care is youth-driven, family-guided, culturally responsive, multidisciplinary and includes both formal and natural support. The goal is to help youth address mental health needs in order to be healthy, successful in school, and to remain in their communities. Youth and Adult ICC support individuals (and their families) with complex behavioral health needs with developing individualized care plans to: meet physical, oral, behavioral health, substance use, and psychosocial goals. ICC facilitates transitions between mental health services; ensures team communication; and connects with community services and supports. M-ITT provides rapid engagement to adults exiting psychiatric hospitals who are not connected to an outpatient behavioral health provider to provide short term intensive support and connect them to ongoing behavioral health services and other community support services including Primary Care, shelter, and other services to address client needs.

Programs ensure policies, procedures and services are individualized and culturally and linguistically responsive. Staff are recruited and retained to reflect the communities served with several bicultural and bilingual staff available to work with LGBTQIA+, Native American, African-American, Latinx and Spanish speaking clients. Peer Services are contracted out to qualified providers.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unique children served in Youth Care Coordination.	350	380	342	350
Outcome	% score measuring family's satisfaction and progress in Wraparound. <sup>1</sup>	79.02%	85%	78.94%	85%
Output	Referrals processed in Youth Care Coordination.	287	300	294	300
Output	Total number of clients served in M-ITT.	598	575	583	575

**Performance Measures Descriptions**

<sup>1</sup>WFI-EZ data is not representative of program outcomes. WFI-EZ completion rates across nearly all of Oregon are below best practice standard rates. Barriers to completion of this voluntary survey included participant pandemic-related burdens and challenges with the WFI-EZ database. Statewide training/support was provided in 2022 in addition to increased Multco administrative support, to try and improve 2023 data.



## Legal / Contractual Obligation

Delegation Agreement with Coordinated Care Organization(s) to provide Wraparound and Intensive Care Coordination.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$148,401	\$7,014,367	\$0	\$7,821,578
Contractual Services	\$0	\$874,878	\$0	\$1,390,858
Materials & Supplies	\$511	\$77,679	\$0	\$81,564
Internal Services	\$9,200	\$1,958,797	\$0	\$2,190,484
<b>Total GF/non-GF</b>	<b>\$158,112</b>	<b>\$9,925,721</b>	<b>\$0</b>	<b>\$11,484,484</b>
<b>Program Total:</b>	<b>\$10,083,833</b>		<b>\$11,484,484</b>	
<b>Program FTE</b>	1.00	48.41	0.00	50.68

Program Revenues				
Intergovernmental	\$0	\$9,925,721	\$0	\$11,484,484
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,925,721</b>	<b>\$0</b>	<b>\$11,484,484</b>

## Explanation of Revenues

This program generates \$1,092,674 in indirect revenues.

Federal \$ 3,451,118 - Health Share Unrestricted Medicaid (Off the top) funding

Federal \$ 7,853,685 - Unrestricted Medicaid fund through CareOregon

State \$ 12,918 - State Mental Health Grant IGA with State of Oregon

\$ 166,763 - CareOregon funding to support care coordination services

## Significant Program Changes

**Last Year this program was:** FY 2023: 40081 Multnomah County Care Coordination

M-ITT length of enrollment continues to be longer than ideal due to limited outpatient system capacity due to workforce which results in fewer total clients being served by the MITT program than in earlier years.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

School Based Mental Health (SBMH) and K12 case management are essential components of the system of care for children and families. Our 26 SBMH clinicians serve over 800 children and teens with mental health needs in 36 schools across six school districts: Centennial, David Douglas, Gresham Barlow, Reynolds, Parkrose, and Portland Public Schools. Mental health professionals provide evidence-based treatment, utilizing an anti-racist equity lens, in school and Student Health Center settings and via telehealth. K-12 Case Managers help students and their families meet unmet needs by connecting them to mental health services, housing, clothing, and food access. These additional case management services will also seek to reduce racial and health inequities and support increased attendance and educational success.

**Program Description**

Since 1969, Multnomah County has been a leader in the nation in providing access to mental health services in schools, which is considered a best practice. Mental health assessment and treatment services provided in schools decrease barriers such as stigma, cost, and transportation. This program reaches youth who are traditionally underserved and have barriers to accessing mental health services. Providing culturally specific mental health outreach and treatment continues to be a priority. Over 50% of the youth served are youth of color served by a diverse staff with seven African American Knowledge Skills and Abilities (KSA), eight Latinx KSA, one Asian/Immigrant KSA and 10 non KSA. Cultural alignment with students increases therapeutic alliance which can assist with addressing mental health concerns, building trust, and improving school attendance.

This culturally specific approach contributes to youth completing school, which is a strong indicator for lifelong economic wellbeing and improved overall health. School Based Mental Health Consultants provide screening, crisis intervention, mental health assessment, clinical case management and individual, group, and family treatment. Mental Health Consultants also provide training and consultation to school staff to optimize educational planning for youth with mental health concerns. Mental Health Consultants are co-located in ten Student Health Centers to provide integrated physical and mental health services.

Multnomah County and School Districts collaborate to address the continuum of needs for students and their families. School Based Mental Health Consultants provide over 3,800 hours of treatment, prevention, education, consultation, and outreach to students, school staff, and families every school year. Additionally, K-12 Case Managers provide comprehensive case management services to students and families in kindergarten through twelfth grade with a focus on connecting families to resources to increase attendance and improve educational success. This program will help mitigate risk of students having to access higher levels of mental health care, academic failure, abuse, neglect, homelessness, and placement outside the home.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total unduplicated youth referred to SBMH for assessment and/or treatment services	679	1000	700	700
Outcome	ACORN Distribution of Patient Change Rate reported by client/student as their perception of improvement <sup>1</sup>	51%	65%	48%	65%
Output	Total unduplicated K-12 youth/families who received case management services	91	150	94	250

**Performance Measures Descriptions**

<sup>1</sup>A Collaborative Outcomes Resource Network (ACORN): 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 Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,819,490	\$1,474,550	\$2,296,470	\$2,432,451
Contractual Services	\$107,637	\$8,000	\$0	\$8,000
Materials & Supplies	\$60,910	\$48	\$55,654	\$8,328
Internal Services	\$21,144	\$390,369	\$45,068	\$499,554
<b>Total GF/non-GF</b>	<b>\$3,009,181</b>	<b>\$1,872,967</b>	<b>\$2,397,192</b>	<b>\$2,948,333</b>
<b>Program Total:</b>	<b>\$4,882,148</b>		<b>\$5,345,525</b>	
<b>Program FTE</b>	21.01	9.52	15.93	15.46

Program Revenues				
Intergovernmental	\$0	\$1,457,720	\$0	\$1,448,333
Service Charges	\$0	\$415,247	\$0	\$1,500,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,872,967</b>	<b>\$0</b>	<b>\$2,948,333</b>

## Explanation of Revenues

This program generates \$175,563 in indirect revenues.

- \$ 22,500 - Parkrose School District
- \$ 75,000 - Centennial School District
- \$ 37,500 - Reynolds School District
- \$ 177,000 - Portland Public Schools
- \$ 14,700 - Local Clackamas County Care Coordination

State: \$ 1,018,713 - State MH Grant: MHS 20 Non-Residential MH Services based on 2019-2021 IGA with the State of Oregon

- \$ 102,920 - School Based Clinics - Mental Health Expansion - Behavioral Health - Capacity
- \$ 1,500,000 - SBMH CareOregon

## Significant Program Changes

**Last Year this program was:** FY 2023: 40082A School Based Mental Health Services

The ACORN outcome measure has not reached 65% as expected, we are currently working on a quality improvement project and considering moving away from the ACORN. SBMH referrals did not reach the anticipated 1,000 because our referral process has become more efficient and we are able to turn off the referral form when MHCs are full and we have asked the SHC to not send higher acuity to the program. The K12 case management services have expanded to cover Kindergarten through 12th grade. There will be six Case Managers hired, which accounts for the FY24 Output increase. The K12 output was lower than expected due to the fact that we had multiple staff vacancies. CareOregon revenue will increase in FY2024 due to a change in revenue payment methodology for School Based Mental Health Services.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

School Based Mental Health and K-12 case management are essential components of the system of care for children and families. Our 26 clinicians serve over 800 children and teens with mental health needs in 36 schools across six school districts: Centennial, David Douglas, Gresham Barlow, Reynolds, Parkrose, and Portland Public Schools. Mental health professionals provide evidence-based treatment, utilizing an anti-racist equity lens, in school and Student Health Center settings and via telehealth. Additionally, children, parents, and school staff receive consultation from Mental Health Consultants to assist with mental health needs during education planning in order to retain students in school and reduce the risk of needing higher levels of care.

**Program Description**

This program offer is to fund positions for the School-Based Mental Health Program. While volume of clients has reduced due to COVID there has been an increased need/acuity per client which necessitates this FTE. Clinicians are spending more intensive time with each youth due to higher levels of acuity. Schools are also requesting more mental health services for students due to the increased need.

Since 1969, Multnomah County has been a leader in the nation in providing access to mental health services in schools, which is considered a best practice. Mental health assessment and treatment services provided in schools decrease barriers such as stigma, cost, and transportation. This program reaches youth who are traditionally underserved and have barriers to accessing mental health services. Providing culturally specific mental health outreach and treatment continues to be a priority. Over 50% of the youth served are youth of color served by a diverse staff with seven African American Knowledge Skills and Abilities (KSA), eight Latinx KSA, one Asian/Immigrant KSA and 10 non KSA. Cultural alignment with students increases therapeutic alliance which can assist with addressing mental health concerns, building trust, and improving school attendance. This culturally specific approach contributes to youth completing school, which is a strong indicator for lifelong economic wellbeing and improved overall health. School Based Mental Health Consultants provide screening, crisis intervention, mental health assessment, clinical case management, as well as individual, group, and family treatment. Mental Health Consultants also provide training and consultation to school staff to optimize educational planning for youth with mental health concerns. Mental Health Consultants are co-located in ten Student Health Centers to provide integrated physical and mental health services.

Multnomah County and School Districts collaborate to address the continuum of needs for students and their families. School Based Mental Health Consultants provide over 3,800 hours of treatment, prevention, education, consultation, and outreach to students, school staff, and families every school year. K-12 Case Managers provide comprehensive case management services to students and families in kindergarten through 12th grade with a focus on connecting families to resources to increase attendance and improve educational success.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total unduplicated youth referred to SBMH for assessment and/or treatment services	679	1,000	700	700
Outcome	ACORN Distribution of Patient Change Rate reported by client/student as their perception of improvement	51%	65%	48%	65%

**Performance Measures Descriptions**

<sup>1</sup>A Collaborative Outcomes Resource Network (ACORN): 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. Some staff were not consistently obtaining ACORN and we are completing a quality improvement project and investigating a more culturally responsive outcome measure.

## Legal / Contractual Obligation

Revenue contracts with school districts. Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$370,310	\$0	\$400,150	\$0
Materials & Supplies	\$4,068	\$0	\$2,968	\$0
Internal Services	\$186,040	\$0	\$190,877	\$0
<b>Total GF/non-GF</b>	<b>\$560,418</b>	<b>\$0</b>	<b>\$593,995</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$560,418</b>		<b>\$593,995</b>	
<b>Program FTE</b>	2.31	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

## Significant Program Changes

**Last Year this program was:** FY 2023: 40082B School Based Mental Health Services - In/Out of Scope Services

The ACORN outcome measure has not reached 65% as expected, we are currently working on a quality improvement project and considering moving away from the ACORN.

SBMH referrals did not reach the anticipated 1,000 because our referral process has become more efficient and we are able to turn off the referral form when MHCs are full and we have asked the SHC to not send higher acuity to the program. The K12 case management services have expanded to cover Kindergarten through 12th grade. There will be six Case Managers hired, which accounts for the FY24 Output increase. The K12 output was lower than expected due to the fact that we had multiple staff vacancies.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Behavioral Health Prevention Services program is designed to educate the community about mental health and suicide prevention. This program addresses equity through training on access and culturally relevant training topics. The program works with our community to reduce suicide, to build a stronger community safety net, to increase mental health literacy especially around challenges and interventions as well as to increase community involvement and resilience.

**Program Description**

The behavioral health prevention element of the program provides the following trainings to County staff and community members: Mental Health First Aid (MHFA), Applied Suicide Intervention Skills Training (ASIST), Counseling on Access to Lethal Means (CALM), SafeTALK and Question, Persuade and Refer (QPR).

Mental Health First Aid (including Youth Mental Health First Aid) is a 1-day evidence-based training offered to community members through the Tri-County “Get Trained to Help” website. The BHD Prevention program staff, in addition to subcontractors, facilitate training throughout the year. ASIST is a 2-day evidence-based practice to provide suicide first aid and is shown to significantly reduce suicidality. SafeTALK is a 4-hour suicide prevention model that teaches lay people how to look for signs that someone is thinking about suicide, have a conversation and link them to professional help. CALM 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. The program facilitates this training several times a year. QPR is a suicide awareness and prevention training, provided to churches, organizations and businesses, colleges and schools, social groups and general community members. QPR is the most widely utilized training offered through the BHD program due to its accessibility for a broad audience.

The suicide prevention element of this program focuses on understanding the scope and depth of completed suicides in the County by tracking and understanding trends that inform prevention, intervention, and postvention efforts. Psychological autopsies are performed to better understand the stressors/factors that contribute to a completed suicide. The program has developed a tool to perform Psychological Autopsy Investigation based on the American Association Of Suicidology tool, and modified to be more trauma informed and culturally responsive to our community needs. The program works in partnership with the Trauma Intervention Program and the Medical Examiner’s office to connect with families and significant friends to perform the autopsies, provide support and service linkage. Feedback will be provided to give insight into where systems have not met the needs for individuals who have completed suicide, and help identify and address some of these issues.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of individuals trained in Mental Health First Aid, ASIST, QPR and/or CALM and safeTalk.	399	450	450	450
Outcome	% of individuals who report greater understanding of mental illness and/or suicide prevention.	92%	85%	85%	85%
Output	Perform 25-30 psychological autopsies (if full time, 50-60 psychological autopsies).	35	45	35	35
Outcome	Improve MC understanding of completed suicide trends for FY20 through a deep analysis and report.	100%	100%	100%	100%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

OAR 309-019-0150 Community Mental Health Programs  
2022-2023 Intergovernmental Agreement for the Financing of Community Mental Health,  
Addiction Treatment, Recovery & Prevention, and Problem Gambling Services

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$226,703	\$172,252	\$122,426	\$356,364
Contractual Services	\$43,400	\$0	\$36,000	\$12,673
Materials & Supplies	\$3,028	\$2,076	\$14,206	\$9,522
Internal Services	\$31,713	\$41,438	\$34,798	\$43,319
<b>Total GF/non-GF</b>	<b>\$304,844</b>	<b>\$215,766</b>	<b>\$207,430</b>	<b>\$421,878</b>
<b>Program Total:</b>	<b>\$520,610</b>		<b>\$629,308</b>	
<b>Program FTE</b>	1.58	1.22	0.80	2.50

Program Revenues				
Intergovernmental	\$0	\$215,766	\$0	\$421,878
<b>Total Revenue</b>	<b>\$0</b>	<b>\$215,766</b>	<b>\$0</b>	<b>\$421,878</b>

## Explanation of Revenues

This program generates \$38,506 in indirect revenues.  
State \$ 160,000 - OHA Suicide Prevention  
Federal \$ 124,205 - Federal PE 60 Suicide Prevention  
State \$ 12,673 - Family & Youth Local 2145 Beer and Wine Tax  
Federal \$ 125,000 - SAMSHA MH Aware. Training TBD

## Significant Program Changes

**Last Year this program was:** FY 2023: 40083 Behavioral Health Prevention Services

\*Due to COVID-19 and the impact on in-person training, our training model adapted to offer hybrid, virtual, and in person training with frequently smaller class sizes to manage health and safety. We partnered with MESD to create a grief readiness and response suicide and violent death postvention series, which launched in a cohort model in June. We are now able to teach Connect postvention training along with a new version of Oregon Calm which we began offering at the end of FY 22. .

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Multnomah County affirms a strong commitment to embracing a multicultural approach to behavioral health in mobilizing the talents, cultures, and assets of the County’s diverse populations to improve the quality of our behavioral health system at the community level. The County identified African American/ Black; Asian/ Pacific Islander; Latino/ Hispanic; Native American/ Alaska Native; and Slavic/ Eastern European/ Russian-Speaking as cultural communities with significant disparities in access to both treatment services and education/prevention opportunities. This was reaffirmed in Spring 2021, when the County declared racism a public health crisis. Behavioral health is fundamental to the overall health and well-being of an individual and is the basis for positive impacts to family, community, and society.

**Program Description**

Behavioral health services have historically not been designed to reflect the specific culture, values, and shared identities of Black, Indigenous and other People of Color (BIPOC). To address this gap, Multnomah County funds culturally specific services for BIPOC persons that are better able to address and decrease identified disparities, and develop culturally specific models to build and sustain healthy families and communities. The County recognizes that expanding access to and improving the quality of behavioral health treatment and prevention/education opportunities for the specific communities is imperative.

The county contracts for mental health services for individuals from communities with significant disparities in access to both treatment services and education/prevention opportunities.to ensure that all members of our community have treatment options that incorporate specific cultural needs Multnomah County mental health prevalence data suggest 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. Additionally, African Americans are overrepresented in correctional facilities and the criminal justice system. Culturally-specific services address mental health concerns and the intersectionality with the criminal legal system through access to culturally and linguistically appropriate treatment including culturally appropriate outreach, engagement, and treatment services. Culturally responsive interventions can mitigate the need for expensive hospitals, residential levels of care, or crisis services. Contractors provide comprehensive psychiatric, mental health, and substance use disorder assessments/evaluations that are culturally and linguistically appropriate focused on early identification/crisis-prevention, and are part of a comprehensive health care system. They also provide case management, medication evaluation and management, and/ or monitoring, treatment services and support, individual, group, and/ or family therapy, benefits assistance, basic needs assessment, wraparound support, and comprehensive referral services, individual and group psychosocial skill development, crisis intervention services, services designed to improve family relationships and community support systems, and education and awareness-building opportunities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total culturally diverse individuals receiving services <sup>1</sup>	622	900	747	900
Outcome	Culturally specific persons served per 1,000 culturally diverse in population <sup>2</sup>	2.5	3.6	3.0	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 MH or in other programs.

<sup>2</sup>Service Rate Per 1,000 Calculation-Numerator: Total unduplicated culturally-diverse individuals served.



**Legal / Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$1,897,008	\$0	\$2,085,647	\$0
<b>Total GF/non-GF</b>	<b>\$1,897,008</b>	<b>\$0</b>	<b>\$2,085,647</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,897,008</b>		<b>\$2,085,647</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:** FY 2023: 40084A Culturally Specific Mental Health Services

The program has expanded the provider base and the specific populations that are being served by the current providers.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** 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). The Black/African American community has encountered difficulty finding behavioral health treatment that incorporates their culture, tradition, and values. It is well documented and known that Black/African Americans are over-represented in the criminal justice system and have very limited culturally specific support to address their needs. This offer is an enhancement to create African American culturally-specific capacity for the community.

**Program Description**

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. Black/African Americans are overrepresented in correctional facilities and the criminal justice system. Black/African Americans continue to face stigma and discrimination. These negative experiences, combined with a lack of access to culturally-affirming and informed care, result in multiple health disparities for the population. Thus, there is an urgent need to provide inclusive, high-quality behavioral health services so that they can achieve the highest possible level of health. Culturally-specific services address mental health concerns through early access to culturally appropriate treatment including promising practices, culturally appropriate outreach, engagement, and treatment services.

This funding will create capacity for a Black/African American Mobile Behavioral Health team to serve justice involved individuals re-entering the community from incarceration. The team will consist of a master's level mental health provider, a certified addictions counselor and a peer support specialist. The scope of services will include outreach and engagement, home visits, mental health or substance use screening/assessments, individual therapy/counseling, care coordination, and peer support. Permitting for the new site and a variety of site issues have delayed the full opening. During this time a temporary site was selected and was ready for a limited number of clients and referrals as of the end of November.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total number of individuals served	N/A	50	22	50
Outcome	% of referrals accepted into the program (1)	N/A	90%	N/A	90%
Outcome	Individuals placed in or retained in residential services, transitional and/or permanent housing or higher care.	N/A	90%	N/A	90%

**Performance Measures Descriptions**

The program is still in the pilot phase and is not fully operational. Available values are based on limited portions of the current program that have already started.

(1) Percentage of referrals that are accepted into the program which demonstrates that the referral process is effective and well-communicated.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$738,800	\$0	\$786,797	\$0
<b>Total GF/non-GF</b>	<b>\$738,800</b>	<b>\$0</b>	<b>\$786,797</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$738,800</b>		<b>\$786,797</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: FY 2023: 40084B Culturally Specific Mobile Outreach and STP

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Adult Addiction Treatment Continuum serves over 3,000 individuals per year and includes adult Substance Use Disorder (SUD) treatment and recovery support services for adult Multnomah County residents living at or below 200% poverty who are uninsured or underinsured (high copays or deductibles that create a fiscal burden to access) for the services. Services include: residential treatment, intensive outpatient treatment with supported housing, outpatient treatment, outreach/engagement, recovery mentoring, and recovery support (including linkages to housing support, prosocial/drug-free activities, basic needs support, etc).

**Program Description**

The overarching goal of Substance Use Disorder treatment and recovery support services is to establish a path to recovery and well-being for those experiencing SUD. SUD treatment and recovery supports also have broader impact across our county systems and services, including in criminal justice, child welfare, and healthcare. Positive impacts are experienced at the interpersonal, family, and community levels, such as: reduced jail recidivism rates, reduced infectious disease transmission rates, reduced crisis system utilization, and strengthening of family bonds and reunification.

Our adult continuum supports treatment engagement, recovery, and a return to a healthy lifestyle. Treatment and recovery services address the negative consequences of problematic alcohol and other drug use; target specific barriers to recovery; and teach prosocial/drug-free alternatives to addictive behaviors through clinical therapy (individual and group), skill building, and peer-delivered services. Treatment and recovery 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 the County by a network of state-licensed community providers and peer-run agencies. The continuum of treatment and recovery support includes culturally responsive programming for specific populations, including: communities of color, people living with HIV, LGBTQIA2S+ individuals, women, and parents whose children live with them while they are in residential treatment. As part of the Behavioral Health Department’s commitment to equity, the Addiction Unit strives to identify, develop, and increase funding to providers who work to provide culturally responsive or culturally specific treatment and recovery services facilitated by individuals with lived experience, who speak the same language, and reflect the diverse populations being served. The Addictions Unit remains committed to supporting peer run and culturally specific organizations.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number served in treatment and recovery support services	2,087	3,500	2,289	3,500
Outcome	Percentage of clients who successfully complete outpatient treatment (1)	46%	42%	48%	42%

**Performance Measures Descriptions**

1) "Successful completion of treatment" is defined as the successful completion of at least two thirds of an individual’s treatment plan goals and demonstrating 30 days of abstinence.

## Legal / Contractual Obligation

Funding is a combination of Federal substance abuse prevention/treatment, Ryan White federal grant funds, state general funds and state-federal pass through funds through the State Oregon Health Authority, and Local 2145 Beer and Wine tax and Marijuana tax revenue. Program planning is based on State Mental Health Grant Award requirements and submitted in the "Biennial Implementation Plan." Multnomah County accepts the State Mental Health Grant and spends these funds in accordance with State Service Elements. Local 2145 Beer and Wine tax and Marijuana tax revenues are provided to counties on a formula basis and are restricted to alcohol and drug treatment/ recovery support services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$545,745	\$326,464	\$554,743	\$312,145
Contractual Services	\$1,579,331	\$9,811,845	\$1,748,632	\$10,550,702
Materials & Supplies	\$23,323	\$2,719	\$14,246	\$537
Internal Services	\$133,078	\$36,408	\$136,474	\$26,218
<b>Total GF/non-GF</b>	<b>\$2,281,477</b>	<b>\$10,177,436</b>	<b>\$2,454,095</b>	<b>\$10,889,602</b>
<b>Program Total:</b>	<b>\$12,458,913</b>		<b>\$13,343,697</b>	
<b>Program FTE</b>	3.35	2.20	3.35	2.05

Program Revenues				
Intergovernmental	\$0	\$10,177,436	\$0	\$10,889,602
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,177,436</b>	<b>\$0</b>	<b>\$10,889,602</b>

## Explanation of Revenues

This program generates \$2,248 in indirect revenues.  
 State \$ 645,292 - Local 2145 Beer and Wine Tax  
 Federal \$ 4,361,770 - SAPT Block Grant  
 Federal \$ 1,265,400 - TANF A&D 67 Award  
 State \$ 321,499 - OHA Peer Delivered Services  
 State \$ 4,095,641 - State Mental Health Grant based on 2021 IGA with State of Oregon  
 Federal \$ 200,000 - OHA Ryan White Mental Health;

## Significant Program Changes

**Last Year this program was:** FY 2023: 40085 Adult Addictions Treatment Continuum

Pandemic impacts across SUD providers: staff shortages; service/program disruption & staffing gaps; operating at reduced censuses ; pauses of client intakes due to COVID cases among staff/clients; transitions between in-person/telehealth/hybrid services as the pandemic shifts; changes to operational workflows, policies, and protocols; etc. Hence, providers need to prioritize essential services and respond to evolving crises and challenges, impacting their ability to collect and report data in a timely manner. Data availability for this offer's performance measures was impacted by OHA's pause on many reporting requirements and encountering in the MOTS system. MOTS provides the outcomes data for this offer. Due to these factors, the output measures for FY22/FY23 may represent an undercount.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** 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. Problem gambling prevention programming applies evidence based strategies to increase awareness among County residents that gambling is an activity that carries risk and that treatment and prevention resources are available.

**Program Description**

Multnomah County's Problem Gambling Services (PGS) are guided by a public health approach that considers biological, behavioral, and economic issues. Current Oregon prevalence rates show approximately 2.6% of adult Oregonians could have a gambling disorder - over 100,000 Oregonians and 20,000 Multnomah County residents. Problem Gambling Services includes both prevention and treatment resources, placing emphasis on quality of life issues for the person who gambles, their family members, and communities. Problem Gambling (PG) prevention programming focuses on increasing awareness of PG as an issue and develops strategies for the prevention of PG disorders. PG treatment services focus 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. Treatment assists the gambler and their family with managing money/finances, rebuilding trust within the family, and maintaining recovery. The Multnomah County provider network includes Lewis & Clark College, Volunteers of America, and Voices of Problem Gambling Recovery. In FY23, we expanded PGS to include new staff in both prevention and treatment. The PGS will now have one FTE dedicated to care coordination for individuals seeking or referred into treatment for problematic gambling. Our PGCC will dedicate their time to expanding our provider network, including focused attention on culturally specific providers. In addition, our prevention programming will increase capacity by hiring interns to focus on developing problem gambling prevention messaging that are culturally and linguistically appropriate.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	1. Number of gamblers and family members accessing treatment annually	73	200	100	200
Outcome	2. Gambler successful treatment completion rate	39.8%	30%	30%	30%
Outcome	3. % of clients receiving Care Coordination, successfully placed in gambling treatment or recovery support	N/A	60%	60%	60%
Output	4. Number of problem gambling prevention activities delivered*	N/A	20	20	22

**Performance Measures Descriptions**

1. The number of persons completing the enrollment process and entering treatment. 2. The number of gamblers and family members who successfully completed treatment during the year. 3. The number of referred clients who enrolled in Gambling Care Coordination services and were successfully placed in Gambling Treatment and/or Recovery Support services. 4. Tracked via Problem Gambling quarterly prevention reports.

## Legal / Contractual Obligation

Multnomah County accepts the State Mental Health Grant, and spends 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$203,409	\$0	\$482,359
Contractual Services	\$0	\$707,672	\$0	\$949,920
Materials & Supplies	\$0	\$7,751	\$0	\$17,964
Internal Services	\$0	\$16,698	\$0	\$47,664
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$935,530</b>	<b>\$0</b>	<b>\$1,497,907</b>
<b>Program Total:</b>	<b>\$935,530</b>		<b>\$1,497,907</b>	
<b>Program FTE</b>	0.00	1.50	0.00	3.20

Program Revenues				
Intergovernmental	\$0	\$935,530	\$0	\$1,497,907
<b>Total Revenue</b>	<b>\$0</b>	<b>\$935,530</b>	<b>\$0</b>	<b>\$1,497,907</b>

## Explanation of Revenues

State \$ 1,203,097 - State Mental Health Grant: Problem Gambling Treatment Services based on IGA with State of Oregon  
 State \$ 294,810 - State Mental Health Grant: Problem Gambling Prevention Services based on IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2023: 40086 Addiction Services Gambling Treatment & Prevention

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Alcohol and Drug Prevention Education Program (ADPEP) addresses risk and protective factors for youth substance use that can lead to alcohol, tobacco, and other drug addiction. These State funded efforts include media campaigns, prevention education, youth leadership activities, and support for schools and parents. In recent years, an emphasis on tobacco prevention and environmental strategies, such as media campaigns and policy development has been introduced.

**Program Description**

Multnomah County's substance abuse prevention program offers services to schools, community organizations, parents, youth, and other community groups. Programming is developed using evidence-based prevention models that are driven by community assessments. This program continuously strengthens its commitment to advancing diversity, equity and inclusion by using strategies that center on racially, culturally, and linguistically specific practices when developing and selecting prevention activities and strategies. The key focus of this program is to address alcohol and marijuana use among youth and young adults. Priorities include increasing capacity for prevention in schools, convening stakeholders to assess community needs, and offering prevention activities at school sites and organizations serving youth and parents. Core activities include a current focus on partnering with local community coalitions and culturally-specific organizations to develop and implement awareness building campaigns and offering prevention activities and classes that will promote health equity for our African American/Black, Latinx and LGBTQI+ populations.

The Multnomah County 2021-2023 Biennial ADPEP Local plan prioritizes: decreasing access of alcohol and marijuana to youth, supporting and educating our parents and community members over the age of 21 on the harmful effects of youth substance use, and increasing the number of youth in our community that meet the Positive Youth Development benchmark (as measured by the Oregon Student Health Survey). In FY24, the ADPEP program will also be focusing on improving evaluation measures across the county and for subcontractor programming. This goal includes identifying barriers and assisting schools in participating in the Oregon Student Health Survey, as well as providing technical assistance and support for prevention subcontractors.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	1. Adults and youth served by prevention services and programming	3,656	1,000	1,000	1,000
Outcome	2. Prevention activity participants with improved awareness and/or educational outcomes	70%	80%	75%	70%

**Performance Measures Descriptions**

- 1) Number of adults and youth directly served by all county SUD prevention programs (both internal and subcontracted programming). This is an unduplicated number, and doesn't include reach data from any media campaigns conducted.
- 2) Performance measures are determined by data collection including, but not limited to; pre-and post-tests, surveys, and interviews in collaboration with participating schools, community organizations and other partners. Also, the Community Readiness Assessment will provide us with baseline data we can utilize for future evaluation measures.



## Legal / 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$151,644	\$0	\$183,317
Contractual Services	\$0	\$270,597	\$0	\$491,172
Materials & Supplies	\$0	\$37,863	\$0	\$50,075
Internal Services	\$0	\$18,217	\$0	\$21,419
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$478,321</b>	<b>\$0</b>	<b>\$745,983</b>
<b>Program Total:</b>	<b>\$478,321</b>		<b>\$745,983</b>	
<b>Program FTE</b>	0.00	1.30	0.00	1.30

Program Revenues				
Intergovernmental	\$0	\$478,321	\$0	\$745,983
<b>Total Revenue</b>	<b>\$0</b>	<b>\$478,321</b>	<b>\$0</b>	<b>\$745,983</b>

## Explanation of Revenues

This program generates \$16,441 in indirect revenues.

State \$ 41,667 - Oregon Alcohol and Drug Prevention Education Program (ADPEP)

Federal \$ 230,785 - SNAP Drug Free Community Grant

Federal \$ 423,531 - Oregon Alcohol and Drug Prevention Education Program (ADPEP) SAPT block grant and State general funds.

Federal \$ 50,000 - STOP Act Grant SAMHSA

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 2023: 40087 Addiction Services Alcohol & Drug Prevention

The FY24 program anticipates serving a similar number of individuals as FY23. Pandemic-related policies in schools and community based programs continue to impact our subcontractors ability to serve individual schools.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Coordinated diversion includes three forensic diversion programs for criminal, legal system-exposed individuals who experience serious mental illness. Programs provide assessments and care coordination to divert people from lengthy jail and state hospital stays and promote stability in the community. Black, Indigenous and People of Color (BIPOC) communities are overrepresented in the forensic population. Programs' equity practices include: participation in system improvement at the state and local level, creating workforce diversity, assuring that assessment tools, curriculum and forms are provided in a person's native language, and connecting clients to culturally specific resources and services.

**Program Description**

Aid and assist services assess, consult, and provide care coordination for individuals who have been deemed unable to aid and assist in the defense of criminal charges filed against them. In accordance with Oregon Revised Statute (ORS), Oregon Administrative Rule (OAR), and Court orders, aid and assist staff evaluate individuals for community based treatment options, maintain contact with all persons ordered to Oregon State Hospital (OSH), participate in care meeting and facilitate discharge planning for hospitalized individuals, provide community based care coordination and service linkage, make regular reports to the Court regarding the status of individuals who are unable to aid and assist.

Mental Health Court is a specialty court for individuals who have been found guilty of a crime and agree to participate in mental health treatment and probation in order to divert from prison sentences. The court team is comprised of BHD staff, probation officers, treatment providers, legal counsel, and peer support services. BHD staff assess persons referred to Mental Health Court and make recommendations regarding treatment needs and treatment availability; provide care coordination and case management services to court participants to support participants' treatment needs, housing needs, applications for benefits, and accessing other needed services. Staff provide regular reports and consultation to the court about the intersection of one's mental health needs and Court requirements. Jail Diversion services are time limited support provided to individuals with a history of judicial involvement who are at risk of further legal exposure due to psychiatric instability. Care Coordination and case management services are provided to refer and connect individuals to crisis services, mental health services, housing supports, and benefit programs to promote psychiatric stability and reduce risk of legal exposure.

In FY23, BHD received funding from the Criminal Justice Council (CJC) IMPACTS grant and the Oregon Health Authority to develop a program to address the gap in treatment services available in our community. The Bridge Treatment Team will identify individuals who are already legally and criminally exposed through the Aid and Assist program and those who are at risk of legal/criminal exposure.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of participants served by Forensic Diversion	341	300	354	350
Outcome	% of participants served in the Community by Forensic Diversion	25%	30%	23%	25%
Output	# of individuals served by Bridge Treatment Team (1)	NEW	NEW	NEW	75
Outcome	% of active clients who achieve intake +1 appointment with community treatment and/or community supports (2)	NEW	NEW	NEW	45%

**Performance Measures Descriptions**

(1) New output for the Bridge Treatment team will identify the individuals being supported by this program. (2) New outcome for the Bridge Treatment team during the first year of programming will identify percentage of clients being connected to longer term supports at conclusion of brief treatment program, excluding those who are determined to have benefited from brief treatment alone, those who disengage from services and those who are referred to a higher level of care.

## Legal / Contractual Obligation

Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Addictions 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$530,183	\$1,630,152	\$863,470	\$2,739,996
Contractual Services	\$611,538	\$885,300	\$703,751	\$1,562,056
Materials & Supplies	\$2,611	\$1,726	\$2,741	\$237,118
Internal Services	\$204,046	\$151,301	\$210,698	\$291,811
<b>Total GF/non-GF</b>	<b>\$1,348,378</b>	<b>\$2,668,479</b>	<b>\$1,780,660</b>	<b>\$4,830,981</b>
<b>Program Total:</b>	<b>\$4,016,857</b>		<b>\$6,611,641</b>	
<b>Program FTE</b>	3.80	10.70	4.80	17.70

Program Revenues				
Intergovernmental	\$0	\$2,668,479	\$0	\$4,830,981
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,668,479</b>	<b>\$0</b>	<b>\$4,830,981</b>

## Explanation of Revenues

This program generates \$161,767 in indirect revenues.

State \$ 1,227,501 - Oregon Health Authority: Aid & Assist Grant

State \$ 1,588,479 - State Mental Health Grant: MHS Special Projects based on 2019-2021 IGA with State of Oregon

State \$ 1,200,000 - Assist Population - Jail Diversion

State \$ 815,001 - State Improving People's Access to Community-based Treatment (IMPACT)

## Significant Program Changes

**Last Year this program was:** FY 2023: 40088 Coordinated Diversion for Justice Involved Individuals

The Bridge Treatment Team is in development and will identify individuals who are already legally and criminally exposed through the Aid and Assist program and those who are at risk of legal/criminal exposure. The time-limited program will clinically support individuals until longer term treatment options are available and will be staffed by FY24.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Withdrawal management is a critical level of treatment care in the Substance Use Disorder (SUD) continuum of services, as it medically stabilizes a highly vulnerable and diverse client population preparing individuals for residential, outpatient, and recovery support services. There are about 2,400 admissions into withdrawal management services annually. Funding for these SUD treatment services prioritizes individuals at/below 200% poverty who are uninsured or under-insured (high deductibles or copays that create a burden to accessing care). Supportive Housing and Care Coordination services target individuals who are houseless or without safe housing conducive to recovery and provide additional engagement and stability throughout the transition from this level of care to continued treatment and recovery support.

**Program Description**

This program provides clinical and medical care to individuals in withdrawal from substance use.. Withdrawal management services are provided 24 hours/day, 7 days/week with medical oversight. Clients may receive prescribed medication to safely manage withdrawal symptoms and other supportive services based on individualized needs. Services are provided by medical professionals and clinical staff that address: SUD, physical health, and co-occurring disorders. Withdrawal management also includes: counseling, case management, referrals to supportive housing units, food, transportation, job training, employment opportunities, benefits eligibility screening, and discharge linkage to continuing treatment and recovery support services.

Withdrawal Management services are enhanced by two specific types of recovery support services to better serve this population: Supportive Housing and Care Coordination. Supportive Housing greatly increases treatment engagement rates post discharge from withdrawal management treatment. For people who are houseless, chemically dependent, and early in recovery it can be a vital resource in the work towards long-term recovery. Without housing, clients lack the stability necessary to address their substance use disorder. Supportive Housing Specialists work with individuals to ensure they do not return to houselessness or unstable/unsafe living conditions that are often barriers to recovery. Care Coordinators ensure clients exiting withdrawal management treatment are successfully transitioned to another level of care and connect them to recovery support services to continue their individual recovery paths. Additionally, Care Coordinators assist clients in accessing a myriad of supportive services that promote health, recovery, stability, and self-sufficiency.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unique indigent individuals receiving Withdrawal Management services annually	72	80	80	80
Outcome	% of individuals served in Care Coord., exiting withdrawal mgmt & transitioning to another level of care	91%	94%	80%	80%
Output	Number of clients served in Care Coordination transition services	2,192	2,260	2,000	2,260
Output	Number of individuals receiving supportive housing	217	370	370	370

**Performance Measures Descriptions**

Measure changed in FY23 and for FY22 Estimate: We are no longer counting admissions, but unique indigent clients who may receive multiple admissions in a year. Of the 80 clients served in FY21, there were a total of 430 days of services provided. Care Coord: Includes both indigent clients and clients with OHP or other health insurance. The metric corresponds to the estimated annual number of individuals housed in these dedicated supportive housing beds.

## 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) 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$84,568	\$0	\$92,895
Contractual Services	\$1,552,807	\$695,026	\$1,654,024	\$732,205
Internal Services	\$0	\$4,097	\$0	\$3,979
<b>Total GF/non-GF</b>	<b>\$1,552,807</b>	<b>\$783,691</b>	<b>\$1,654,024</b>	<b>\$829,079</b>
<b>Program Total:</b>	<b>\$2,336,498</b>		<b>\$2,483,103</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$783,691	\$0	\$829,079
<b>Total Revenue</b>	<b>\$0</b>	<b>\$783,691</b>	<b>\$0</b>	<b>\$829,079</b>

## Explanation of Revenues

Federal \$ 274,292 - State Mental Health Grant: A&D Detoxification Housing Block Grant based on IGA with State of Oregon.  
 State \$ 554,787 - State Mental Health Grant SE 66: A&D Detoxification Treatment based on IGA with State of Oregon.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40089 Addictions Detoxification & Post Detoxification Housing

Through the pandemic SUD providers have grappled with staff shortages;; operating at reduced capacity; This impacted providers' ability to collect/report data on time. OHA paused many reporting requirements for FY22. Hence, the performance measures for FY22 & FY23 are likely not true indicators of need/ utilization. In FY21, the output related to the number of individuals served in withdrawal management services changed to only indigent client admissions, not those with Medicaid or insurance. Medicaid enrollment has increased and indigent clients served has decreased, allowing for reinvestment in Care Coordination & Supported Housing which are key to continued recovery and remain open to all persons exiting withdrawal management.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$114,396	\$153,456	\$121,853	\$157,528
Materials & Supplies	\$0	\$2,151	\$0	\$2,259
<b>Total GF/non-GF</b>	<b>\$114,396</b>	<b>\$155,607</b>	<b>\$121,853</b>	<b>\$159,787</b>
<b>Program Total:</b>	<b>\$270,003</b>		<b>\$281,640</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$155,607	\$0	\$159,787
<b>Total Revenue</b>	<b>\$0</b>	<b>\$155,607</b>	<b>\$0</b>	<b>\$159,787</b>

## Explanation of Revenues

State \$ 66,700 - Local 2145 Beer & Wine Tax  
 State \$ 93,087 - State Mental Health Grant SE66 Family and Youth Services IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2023: 40090 Family & Youth Addictions Treatment Continuum

Effective 1/1/22, OHA contracts directly with the provider of FAN services. FAN was included in this program offer through FY22 and will not continue in FY23. Performance measure #1 has been updated to better reflect the data that SUD providers have to collect. Reporting requirements to collect data needed for program measure #2 will be added to FY 24 contract renewals.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** Backfill State/Federal/Grant

**Executive Summary**

The Family Involvement Team (FIT) for Recovery program is a collaboration with the Oregon Department of Human Services (DHS) Child Welfare, Substance Use Disorder (SUD) treatment and recovery support providers, social service agencies, and the Multnomah County Family Dependency Court. Each year, the FIT for Recovery program connects over 500 unique parents who have had their parental rights taken away due to substance use issues with treatment and recovery support services, specialized case management services, and peer supports by individuals with lived experience with the Child Welfare system.

**Program Description**

The FIT for Recovery Core Team, housed at the Family Dependency Court, works with parents involved with DHS Child Welfare who have a substance use disorder and are in need of treatment and recovery support services. Culturally specific peer support and outreach workers with lived experience meet parents directly at court hearings where parental rights are terminated to provide immediate support at a critical time. These staff work to establish a connection with parents, screen for SUD and other needs, and make referrals to treatment and support services. Warm handoffs ensure individuals have support navigating any access barriers to getting into treatment.

Once in treatment, FIT case managers with lived experience and specialized knowledge of navigating the Child Welfare and family court systems at partnering SUD 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 Case Managers and provide 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. Parenting Support groups are also provided by peers with lived experience. FIT partners include: DHS Child Welfare, Family Dependency Court, Multnomah County Health Department, Cascadia Behavioral Healthcare, CODA, Lifeworks NW, Central City Concern, Volunteers of America (VOA), NARA, Bridges to Change, Raphael House, Morrison Child and Family Services, Iron Tribe, and Holistic Healing.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	1) Number of FIT referrals per year	793	770	770	770
Outcome	2) % of FIT clients referred who enter treatment	38%	27%	27%	27%

**Performance Measures Descriptions**

1) Measure changed in FY 2022, see significant program changes for details. 2) FY 2021: 75% of clients had an unknown Treatment status therefore only 12% that were documented as having entered treatment are reported. FY 2022: 47% of clients had an unknown Treatment status. It is likely an undercount that reflects issues with the outdated database previously used for tracking this data point.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$32,380	\$328,062	\$35,648	\$356,139
<b>Total GF/non-GF</b>	<b>\$32,380</b>	<b>\$328,062</b>	<b>\$35,648</b>	<b>\$356,139</b>
<b>Program Total:</b>	<b>\$360,442</b>		<b>\$391,787</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$328,062	\$0	\$356,139
<b>Total Revenue</b>	<b>\$0</b>	<b>\$328,062</b>	<b>\$0</b>	<b>\$356,139</b>

## Explanation of Revenues

State \$ 356,139 - State Mental Health Grant SE 66Family Involvement Team (FIT) based on IGA with the State.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40091 Family Involvement Team

Pandemic impacts across SUD providers: staff shortages (especially compounding the historic need for BIPOC staff with BH certification); service/program disruption & staffing gaps; operating at reduced censuses; pauses of client intakes due to COVID cases among staff/clients; transitions between in-person/telehealth/hybrid services as the pandemic shifts; changes to operational workflows, policies, and protocols; etc. These impacts have decreased the availability and capacity of critical SUD treatment and recovery support services, further exacerbating the access issues that previously existed before the pandemic.

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T, 40048  
**Program Characteristics:**

**Executive Summary**

The Public Health Office of the Director provides leadership for the local public health authority. Public Health, in partnership with the Multnomah County Board of Health (BOH), plays a unique, mandated governmental role. This program is responsible for guiding policies, systems, and programs that promote and protect the health of, and prevent disease for, all residents and diverse communities within Multnomah County. Equity-focused strategies within the Office of the Director include policy interventions; public education and communications; community partnerships; planning; capacity building; and research, evaluation, and assessment.

**Program Description**

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

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

Community Partnerships and Capacity Building (CPCB) - coordination/implementation of division-level, culturally specific and cross-cultural community engagement and partnership strategies to address community and public health priorities. Culturally specific staff engage and build capacity with community leaders, Community Health Workers, and organizations/groups; support collaboration in serving diverse communities; develop networks with internal staff and culturally specific serving programs; and support/advise various Public Health programs and priorities. Activities also include implementation of the Community Health Improvement Plan (CHIP) and supporting the Future Generations Collaborative, a collective impact partnership between Native and Native-serving organizations, institutions, systems, governments, and people.

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

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of Multnomah County Public Health Advisory Board meetings	11	12	12	12
Outcome	# of presentations to BOH about strategies that address disparities within BIPOC communities	17	7	7	7
Output	# of cultural specific and multicultural community partners and events that promote health equity	96	85	138	150

**Performance Measures Descriptions**

Performance Measure 2: strategies are defined as policy and/or systems improvements and disparities are focused on leading causes of preventable death and disease. FY21 Actual and FY22 Budgeted do not include COVID-19-related briefings. FY22 Estimate and FY23 Offer do include COVID-19-related briefings.

## Legal / Contractual Obligation

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

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,029,448	\$2,717,336	\$2,318,625	\$3,907,609
Contractual Services	\$807,970	\$947,129	\$636,303	\$2,001,402
Materials & Supplies	\$241,936	\$201,299	\$170,542	\$153,993
Internal Services	\$455,332	\$382,115	\$470,229	\$614,185
<b>Total GF/non-GF</b>	<b>\$3,534,686</b>	<b>\$4,247,879</b>	<b>\$3,595,699</b>	<b>\$6,677,189</b>
<b>Program Total:</b>	<b>\$7,782,565</b>		<b>\$10,272,888</b>	
<b>Program FTE</b>	12.15	18.09	13.06	24.42

Program Revenues				
Intergovernmental	\$0	\$4,247,879	\$0	\$6,677,189
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,247,879</b>	<b>\$0</b>	<b>\$6,677,189</b>

## Explanation of Revenues

This program generates \$545,893 in indirect revenues.

Other: \$ 600,000 - CareOregon State: \$100,000 - Alaska Marijuana Program Evaluation

Federal: \$ 550,000 - NIH Marijuana Legalization Other: \$121,500 - Alaska Obesity EAP - GY08

State: \$85,000 - Behavioral Risk Factor Survey System Federal: \$500,000 - PDES Morbidity Monitoring Project

State: \$17,500 - HIV Program Planning & Evaluation State: \$190,500 - PDES Public Health Modernization Support

Other: \$45,000 -Chronic Disease - Cancer Programs - GY02 Other: \$343,520 - Tobacco Prevention - GY12

Federal: \$150,000 - MCH Title V: Child and Adolescent Health - FGC

State: \$1,100,953 - Local Public Health Modernization Community Capacitation Center

Other: \$200,000 - Community Health Needs Assessment/Community Health Improvement Plan Implementation

Federal: \$2,367,216 - Federal Strengthening Public Health Infrastructure & Workforce 93.967

Federal: \$32,000 - PE19-34 Core State Injury Prevention Program

State: \$274,000 - PE19-35 Evaluation of Aid & Assist Population

## Significant Program Changes

**Last Year this program was:** FY 2023: 40096A Public Health Office of the Director

The Office of the Director has continued supporting key COVID-19 response activities through leadership as the local public health authority. In FY23, the Office will start moving to support COVID-19 Community Recovery work. New positions will support key public health capabilities and infrastructure to stabilize the Division after the COVID response including project management support for infrastructure needs Division-wide. This work includes strategic building towards Public Health Accreditation; this work will be funded in part with the new Public Health Infrastructure grant. New funding from CareOregon will fund key community collaborations including Future Generations Collaborative (FGC) and the Latinx Health Coalition work.

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

In FY 2021, ICS received technical assistance from the Health Resources and Services Administration (HRSA) regarding financial and governance requirements related to Federally Qualified Health Centers (FQHCs). This included clarification of how FQHC funds could be applied to services of the health center and staff roles that also supported non-health center services. After review, HRSA clarified that funds from the FQHC cannot be spent on these out-of-scope programs or for staff who support out-of-scope activities. In response, in FY22, Multnomah County removed County General Fund allocations from the ICS Budget and re-allocated them to Corrections Health and Public Health services. Multnomah County will continue using the County General Fund to support these services.

**Program Description**

Public Health's Parent Child Family Health (PCFH), Communicable Disease (CD) Clinical and Community Services, and Harm Reduction programs provide home visiting and clinical services. These services require infrastructure support for Epic electronic health record (EHR), laboratory tests, pharmacy, managing medical records, and managing protected health information.

Clinical Systems Information supports PCFH and the CD and Harm Reduction clinics with all Epic operations. Main functions include: day-to-day requests, staff passwords, label printing, face sheets, and system problem-solving; monthly maintenance and other updates as needed; program planning and implementation, including building programs and form development; and acting as the liaison to OCHIN, the Department's EHR vendor.

Central Lab supports the CD and Harm Reduction clinics. Main functions include performing a variety of lab tests for TB, STDs, and HIV; assisting with blood draws; and acting as a liaison between the lab and the clinics.

Pharmacy supports the CD and Harm Reduction clinics. The main function is filling prescriptions for clients.

Health Information Management supports PCFH and the CD and Harm Reduction clinics. Main functions include: responding to court system records requests; creating copies containing appropriate information and sending them to the courts; providing protected health information (PHI) consultation; acting as a liaison between programs and the County Attorney related to PHI; and providing record retention guidance.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of lab tests per year	7,436	6,000	8,034	6,000
Outcome	# of prescriptions filled	N/A	2,368	2,368	2,368

**Performance Measures Descriptions**

All performance measures are only for Parent Child Family Health, Communicable Disease (CD) Clinical and Community Services, and Harm Reduction programs and clients. Pharmacy added to scope of work in FY23.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$576,700	\$0	\$548,291	\$0
Materials & Supplies	\$79,617	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$656,317</b>	<b>\$0</b>	<b>\$548,291</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$656,317</b>		<b>\$548,291</b>	
<b>Program FTE</b>	4.27	0.00	3.87	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 2023: 40096B Public Health In/Out of Scope Services

**Department:** Health Department      **Program Contact:** Elizabeth Carroll  
**Program Offer Type:** Support      **Program Offer Stage:** Adopted  
**Related Programs:** 40199T  
**Program Characteristics:**

**Executive Summary**

Parent, Child, and Family Health (PCFH) Administration provides leadership, compliance, quality, and program data oversight and support to PCFH programs within the Public Health Division. PCFH Administration is committed to addressing health equity, and providing culturally responsive home visiting and other perinatal, parental, and family programming. Administration assures compliance to program and fiscal standards.

**Program Description**

PCFH Administration supports the following programs: Healthy Birth Initiatives; Nurse Family Partnership; Healthy Families, Healthy Homes Asthma Home Visiting, and Community Based Health Consulting. It ensures that service delivery effectively improves health outcomes and reduces racial/ethnic disparities in perinatal and birth outcomes, with the ultimate goal of eliminating inequitable perinatal disparities and creating foundations that improve the health and wellbeing of generations to come.

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 data systems, 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 and enhance program staff, program leadership, clients, community-based service-delivery partners, and other County programs to set the strategic direction for PCFH programs. Examples include working to shift the PCFH workforce culture toward the elimination of racial/ethnic disparities by implementing culturally reflective and responsive programs and meaningful community partnership engagement.

PCFH monitors local and national maternal and infant health data, as well as program-level data, including maternal mortality and morbidity, preterm birth, low birth weight, breastfeeding, income, and safe sleep indicators. PCFH programs reach populations most impacted by perinatal disparities through targeted marketing and outreach to BIPOC and low-income communities and providers serving these communities, culturally reflective staff and practices, and client engagement and feedback through advisory boards. Clients influence and guide how they engage in PCFH services, hold leadership roles in the advisory boards, and provide input to influence program design and/or implementation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of billable visits that meet targeted case management (TCM) requirements	5,288	3,624	5,268	3,955
Outcome	Percent of contracts granted to BIPOC vendors	56%	60%	56%	56%
Quality	Number of monthly chart audits completed	257	432	468	432

**Performance Measures Descriptions**

## Legal / Contractual Obligation

PCFH Administration ensures that all PCFH programs comply with a number of legal/contractual guidelines related to model fidelity, Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,119,759	\$22,021	\$1,094,714	\$70,170
Contractual Services	\$61,000	\$100,000	\$13,400	\$100,000
Materials & Supplies	\$36,599	\$53,984	\$44,787	\$53,992
Internal Services	\$156,365	\$2,960	\$162,700	\$9,803
<b>Total GF/non-GF</b>	<b>\$1,373,723</b>	<b>\$178,965</b>	<b>\$1,315,601</b>	<b>\$233,965</b>
<b>Program Total:</b>	<b>\$1,552,688</b>		<b>\$1,549,566</b>	
<b>Program FTE</b>	9.00	0.17	8.00	0.44

Program Revenues				
Intergovernmental	\$0	\$178,965	\$0	\$233,965
<b>Total Revenue</b>	<b>\$0</b>	<b>\$178,965</b>	<b>\$0</b>	<b>\$233,965</b>

## Explanation of Revenues

This program generates \$9,803 in indirect revenues.  
 Federal \$ 153,965 - State: MCH Child and Adoles Grant  
 Federal \$ 80,000 - Early Home Visit Grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40097 Parent, Child, and Family Health Management

Staff reductions include 1 FTE Office Assistant Sr. Program enhancements include the Epic EHR build and roll-out. Quality assurance via real time data will improve work flows and alter some staff roles. Space consolidation, and changing productivity expectations, reflective of the “new normal” of an integrated telework/ hybrid workforce, will be underway in FY24. Several RFPs, including the Healthy Families RFP, are planned for FY24, and will require Administrative staff supports.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program focuses on the healthy emotional development of children from birth to age six, through prevention and culturally specific treatment services. The Early Childhood program works collaboratively with partners, using an anti-racist equity lens, to ensure the success of children and to decrease school suspension and expulsion rates. The program provides evidence-based services which include: child mental health consultation, child and family mental health treatment services, parent groups, and care coordination services with culturally specific community supports. These services have proven vital in contributing to retention of children in pre-school educational settings.

**Program Description**

Early Childhood Mental Health Consultants provide a comprehensive continuum of culturally relevant mental health services to over 5,000 children County-wide and their families in all Head Start Programs to promote social/emotional development and school readiness. The consultant's use the Pyramid Model framework, which includes evidence-based practices for promoting young children's healthy social and emotional development. Services include early childhood classroom consultation with educators, child mental health assessment, family centered treatment, case management services, crisis triage, referral to community supports, and parent support and education. This program works in close collaboration with Early Childhood Community Partners and Early Learning Multnomah to ensure coordinated services occur for Multnomah County's at-risk children and families. A hallmark of this program is Spanish-speaking staff and availability of African American culturally specific counseling and parent support services provided to families at Albina Head Start, Portland Public Schools Head Start, Migrant Seasonal Head Start, Neighborhood House and Mt. Hood Community College Head Start.

Community-based culturally specific treatment services are provided for Latinx and African American children to increase success at home and reduce the likelihood of suspension or expulsion from Head Start. The prevention, treatment and early intervention services provided to these young children and their families address mental health and developmental needs before they become acute and require more intensive and costly care and have a greater impact on families. A critical goal of this program is to ensure children are ready to learn once they enter Kindergarten.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total children receiving prevention services.	5,214	4,700	5,214	5,000
Outcome	Overall social/emotional supports in place in Head Start classrooms based on TPOT data <sup>2</sup>	N/A	75%	N/A	75%
Output	Total children receiving culturally specific treatment services <sup>3</sup>	25	30	24	30

**Performance Measures Descriptions**

<sup>1</sup> See Specific Program Changes for a full explanation of increase <sup>2</sup> Teaching Pyramid Observation Tool (TPOT): an evidence-based tool to measure teacher implementation of the 3-tiered Pyramid Model. This is an in person tool and since positions were hybrid this year it was not able to be utilized. A tool that better captures outcomes from a racial justice lens is being investigated. <sup>3</sup> Treatment=Clients provided services



## Legal / Contractual Obligation

Head Start Revenue Contracts

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$1,415,132	\$353,229	\$1,550,128	\$375,372
Contractual Services	\$40,560	\$166,465	\$181,384	\$613
Materials & Supplies	\$7,807	\$456	\$8,197	\$478
Internal Services	\$49,453	\$174,336	\$70,090	\$167,927
<b>Total GF/non-GF</b>	<b>\$1,512,952</b>	<b>\$694,486</b>	<b>\$1,809,799</b>	<b>\$544,390</b>
<b>Program Total:</b>	<b>\$2,207,438</b>		<b>\$2,354,189</b>	
<b>Program FTE</b>	9.43	2.46	9.43	2.46

<b>Program Revenues</b>				
Intergovernmental	\$0	\$401,528	\$0	\$401,528
Beginning Working Capital	\$0	\$165,852	\$0	\$0
Service Charges	\$0	\$127,106	\$0	\$142,862
<b>Total Revenue</b>	<b>\$0</b>	<b>\$694,486</b>	<b>\$0</b>	<b>\$544,390</b>

## Explanation of Revenues

\$ 142,862 - Fee For Services Insurance Receipt  
State: \$ 401,528 - State Mental Health Grant: MHS 20 Non-Residential Mental Health Services based on IGA with State of Oregon

## Significant Program Changes

**Last Year this program was:** FY 2023: 40099A Early Childhood Mental Health Program

FY 2022 Output for prevention services increased because the program site size increased.

The TPOT was not administered this year because a new/replacement tool, the Teacher Wellbeing Survey is currently being piloted.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25200-25206, 72052, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Passed by voters in November 2020, Preschool for All has a goal to provide access to high-quality, inclusive, culturally responsive preschool for all three and four-year olds in Multnomah County. Children who currently have the least access to high quality preschool will be prioritized, including Black, Indigenous and children of color, children who speak languages other than English at home, children with disabilities and developmental delays, and other intersecting identities.

In partnership with the Behavioral Health Division, the Department of County Human Services is investing in our Early Childhood Prevention and Treatment team by adding members to our team to support Preschool for All implementation.

**Program Description**

Early Childhood Mental Health Consultants provide a comprehensive continuum of culturally relevant mental health services to children and their families in preschool programs to promote social/emotional development and school readiness. Preschool for All services expand and draw from on our highly effective existing early childhood programming based on the Pyramid Model framework, which includes evidence-based practices for promoting young children’s healthy social and emotional development. Services include early childhood classroom consultation with educators, child mental health assessment and family-centered treatment, case management services, crisis triage, referral to community supports, and parent support and education. A hallmark of this program is Spanish-speaking staff and African American culturally specific counseling and parent support services provided to families throughout Multnomah County.

Community-based treatment services are provided for children to increase success at home and reduce the likelihood of suspension or expulsion from preschool, including culturally specific services for Latinx and African American families. Multnomah County population estimates completed by Portland State University as part of the planning for Preschool for All suggest that there are over 7,000 children aged 3-4 living at or below 200% of the federal poverty level, and of these, approximately 46% are Black, Indigenous and other children of color.

The Preschool for All investments will dramatically increase the size of the Early Childhood Mental Health team and create the need for additional supervision and program administrative support. This program offer includes funding for a supervisor, policy and program planning position, and administrative support. In total, this program offer provides funding for 1 Supervisor, 1 Program Specialist Senior, 1 Office Assistant, and 7 Mental Health Clinicians. The COVID-19 pandemic has dramatically impacted our entire community, including young children, making this investment incredibly urgent. The prevention, treatment and early intervention services provided to young children and their families address mental health and developmental needs before they become acute, requiring more intensive and costly care and increasing the negative impact on marginalized families and children.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total children receiving prevention services.	N/A	675	N/A	675
Outcome	% of Preschool for All coaches who report that they had a positive and supportive consultation experience. <sup>1</sup>	N/A	85%	85%	85%
Output	Total children receiving culturally specific treatment services. <sup>2</sup>	N/A	30	30	30

**Performance Measures Descriptions**

<sup>1</sup>This outcome measure will not be implemented until Spring of 2023 since coaches/students did not begin services until Fall of FY22.

<sup>2</sup> We are currently hiring for these positions and they should be in place in early 2023.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,497,465	\$0	\$1,624,372
Contractual Services	\$0	\$20,000	\$0	\$0
Materials & Supplies	\$0	\$4,299	\$0	\$160
Internal Services	\$0	\$99,984	\$0	\$107,183
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,621,748</b>	<b>\$0</b>	<b>\$1,731,715</b>
<b>Program Total:</b>	<b>\$1,621,748</b>		<b>\$1,731,715</b>	
<b>Program FTE</b>	0.00	10.98	0.00	10.98

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

Explanation of Revenues

This program generates \$58,158 in indirect revenues.  
 \$ 1,731,715 - Preschool For All Program Fund. Although this program is funded by the Preschool for All Program Fund, the associated revenue is budgeted in the Department of County Human Services (program 25200).

Significant Program Changes

Last Year this program was: FY 2023: 40099B Preschool For All Early Childhood

The Outcome measure is not available and the Output measure is an estimate because staff have not yet been hired and currently hiring in 2023. The Program Supervisor was hired in December 2022 and will begin recruitment in 2023.

**Department:** Health Department **Program Contact:** Yolanda Gonzalez

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

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

### Executive Summary

This program focuses on the healthy emotional development of children from birth to age six, through prevention and culturally specific treatment services. The Early Childhood program works collaboratively with partners, using an anti-racist equity lens, to ensure the educational success of children and to decrease school suspension and expulsion rates. The program provides evidence-based services which include: child mental health consultation, child and family mental health treatment services, parent groups, and care coordination services with culturally specific community supports. These services have proven vital in contributing to retention of children in pre-school educational settings.

### Program Description

This culturally specific contract includes an extension of this service array and team. Early Childhood Mental Health Consultants provide a comprehensive continuum of culturally relevant mental health services to over 5,000 children Countywide and their families in Head Start Programs to promote social/emotional development and school readiness. The consultant's use the Pyramid Model framework, which includes evidence-based practices for promoting young children's healthy social and emotional development. Services include early childhood classroom consultation with educators, child mental health assessment, family centered treatment, case management services, crisis triage, referral to community supports, and parent support and education. This program works in close collaboration with Early Childhood Community Partners and Early Learning Multnomah to ensure coordinated services occur for Multnomah County's at-risk children and families.

A hallmark of this program is Spanish-speaking staff and availability of African American culturally specific counseling and parent support services provided to families at Albina Head Start, Portland Public Schools Head Start, Migrant Seasonal Head Start, Neighborhood House and Mt. Hood Community College Head Start. Community-based culturally specific treatment services are provided for Latinx and African American children to increase success at home and reduce the likelihood of suspension or expulsion from Head Start.

The prevention, treatment and early intervention services provided to these young children and their families address mental health and developmental needs before they become acute and require more intensive and costly care and have a greater impact on families. A critical goal of this program is to ensure children are ready to learn once they enter Kindergarten.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total children receiving prevention services.	5,214	4,700	5,214	5,000
Outcome	Overall social/emotional supports in place in Head Start classrooms based on TPOT data <sup>2</sup>	N/A	75%	N/A	75%

### Performance Measures Descriptions

<sup>1</sup> See Specific Program Changes for a full explanation of increase

<sup>2</sup> Teaching Pyramid Observation Tool (TPOT): an evidence-based tool to measure teacher implementation of the 3-tiered Pyramid Model. This is an in-person tool and since positions were hybrid this year it was not able to be utilized. A tool that better captures outcomes from a racial justice lens is being investigated.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$49,786	\$0	\$54,572	\$0
Materials & Supplies	\$14,551	\$0	\$1,807	\$0
Internal Services	\$33,605	\$0	\$44,682	\$0
<b>Total GF/non-GF</b>	<b>\$97,942</b>	<b>\$0</b>	<b>\$101,061</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$97,942</b>		<b>\$101,061</b>	
<b>Program FTE</b>	0.50	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 2023: 40099C Early Childhood Mental Health Program - In/Out of Scope Services

FY22 Output for prevention services increased because the program site size increased.

The TPOT was not administered this year because a new/replacement tool, the Teacher Wellbeing Survey by Daniela Falecki is currently being piloted.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Multnomah County is invested in providing crisis response support to the community which includes providing on-scene emotional and practical support to victims, families and friends of victims, and communities impacted by traumatic events as a part of the BHD’s Disaster Behavioral Health and Crisis Services programs. Over the last two years, our community has seen the impact of a pandemic, increased gun violence and increased natural disasters (severe weather, wildfire, etc). Trauma Intervention Program (TIP) services support individuals and communities impacted by these events and more. This service is provided to individuals, families, and communities in the immediate aftermath of the event and can be initiated by law enforcement or BHD to provide on scene emotional and practical support, referrals, and follow up care.

**Program Description**

The Trauma Intervention Program maintains a contract with both the Multnomah County Sheriff’s Office as well as Multnomah County Behavioral Health Division (BHD) to support those impacted by violence, natural disasters, and other traumatic events. By maintaining this contract, the BHD is able to ensure that access to immediate on-scene support is available to the community regardless of law enforcement involvement.

TIP has a rigorous training program that regularly trains community members to provide this resource and support to the community 24 hours a day, seven days per week, every day of the year. In 2021, TIP had 203 active volunteers including 21 TIPTeens that work alongside adult volunteers to provide additional support to youth impacted by trauma. During FY22 TIP responded to over 1426 requests from Multnomah County to provide support with 4,710 individuals supported.

Additionally, during FY22 BHD has further supported County disaster response by utilizing TIP to provide after action phone calls and support to individuals staffing disaster response centers and shelters. Working in these settings can be very challenging and triggering for many of the volunteers and we have received an overwhelming positive response for providing this after action support for them.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total number of community members served	4,710	4,800	4,500	4,800
Outcome	Percentage of community members who receive follow up contacts within 45 days	100%	90%	100%	95%

**Performance Measures Descriptions**

TIP continues to provide follow up to every participant that they have a phone number for. Additionally, they collect feedback on this through an email system that is dependent on respondent return. They do not currently collect data on the percentage of individuals without a phone number to follow up.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$52,680	\$0	\$57,989	\$0
<b>Total GF/non-GF</b>	<b>\$52,680</b>	<b>\$0</b>	<b>\$57,989</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$52,680</b>		<b>\$57,989</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: FY 2023: 40100 Trauma Intervention Services

TIP continues to be a vital resource in our community. The addition of providing post-activation follow up support to severe weather shelters was well received an important addition to this contract over the past year.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40085, 30407B  
**Program Characteristics:**

### Executive Summary

Promoting Access To Hope (PATH) was developed as a joint effort by the Health Department’s Behavioral Health Division (BHD), the Joint Office of Homeless Services, Department of Community Justice, and the Multnomah County Chair’s Office. PATH conducts outreach to engage and connect eligible adults in Multnomah County who are struggling with substance use disorder (SUD), houselessness, at risk of criminal justice involvement, with priority given to BIPOC persons. Individuals may also struggle with poverty, mental health acuity, physical health challenges, etc. PATH connects to a broad network of treatment providers that offer service and support at all levels of care. PATH offers culturally-specific services by staff that reflect those served and connects them to treatment and recovery support services responsive to individual cultural needs.

### Program Description

PATH conducts outreach to persons with problematic substance use who are also houseless and at risk of criminal justice system exposure. PATH receives referrals through a variety of sources: community treatment and support providers, justice partners, Behavioral Health Crisis Line, other county programs, family members, community members, self referrals, etc. Services begin with the completion of an individual needs assessment to develop a service plan specific to each unique individuals’ needs/goals. PATH staff work with individuals to identify appropriate levels of SUD treatment and recovery support services. Services include housing, physical health, mental health, employment, etc. PATH services are voluntary, person directed, and low barrier. PATH staff use approaches like motivational interviewing and harm reduction to meet people where they are so they can initiate their recovery journey. Staff collaborate with each individual, and other internal/external stakeholders to establish recovery goals, eliminate/navigate barriers to basic needs, and assist clients in building a recovery foundation.

PATH team members assist individuals with placement to appropriate levels of SUD treatment and recovery support services and provide ongoing support to address deficits in social determinants of health. Harm reduction approaches are utilized based on individualized needs given individuals are often at various stages of readiness for treatment or change. Abstinence from substances or other high risk behaviors are not a requirement of these services, instead PATH staff take a person-centered approach and utilize motivational interviewing skills to encourage and identify readiness for change. Services are culturally competent, focused on individual needs/readiness, and trauma informed.

The PATH program focuses on equity and underserved communities through several key approaches: 1) involvement in internal county equity initiatives; 2) employing Knowledge, Skills and, Abilities (KSA) and dual language positions within the PATH team; 3) working with community providers to develop and enhance culturally specific and responsive SUD services; 4) participating in community initiatives that amplify community voices and perspectives to improve service quality and to address systemic racism in the service system overall; 5) working with existing culturally specific providers to ensure that individuals are placed in services that recognize and support their cultural identity as an integral part of their lifelong recovery.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unique individuals served annually in PATH outreach and care coordination services*	330	350	346	350
Outcome	Percentage of clients served annually in PATH Care Coordination that were successfully placed**	70.54%	60%	72.57%	60%

### Performance Measures Descriptions

- 1) The total number of unique individuals referred through successful outreach (individuals are provided basic resources and services at this referral point), as well as those enrolled.
- 2) Placed means clients are successfully referred and enrolled in community based SUD treatment and recovery support.



## Legal / Contractual Obligation

Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$515,136	\$180,148	\$544,122	\$181,733
Contractual Services	\$25,002	\$0	\$2,100	\$0
Materials & Supplies	\$39,306	\$29,001	\$29,708	\$29,953
Internal Services	\$33,093	\$26,315	\$37,765	\$25,781
<b>Total GF/non-GF</b>	<b>\$612,537</b>	<b>\$235,464</b>	<b>\$613,695</b>	<b>\$237,467</b>
<b>Program Total:</b>	<b>\$848,001</b>		<b>\$851,162</b>	
<b>Program FTE</b>	4.00	4.90	4.08	4.82

Program Revenues				
Intergovernmental	\$0	\$235,464	\$0	\$237,467
<b>Total Revenue</b>	<b>\$0</b>	<b>\$235,464</b>	<b>\$0</b>	<b>\$237,467</b>

## Explanation of Revenues

This program generates \$13,193 in indirect revenues.

Federal \$ 150,398 - Federal Ryan White Non Med Case Management

State \$ 25,336 - Local 2145 Beer and Wine Tax

State \$ 61,733 - State Mental Health Grant: A&D Peer Delivered Services based on IGA with State of Oregon.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40101 Promoting Access To Hope (PATH) Care Coordination Continuum

3.70 FTE will be funded by JOHS including 3.00 FTE Clinical Services Specialist and 0.70 FTE Program Supervisor.

**Department:** Health Department

**Program Contact:** Kevin Minor

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. ICS's Allied Health (AH) programs include Integrated Behavioral Health (AH-IBH) and Community Health Workers (AH-CHW) teams across our health center, and offers culturally responsive, goal-oriented, trauma-informed behavioral health and community outreach services, centered on race and equity. AH serves low-income, uninsured, underinsured populations, and people experiencing houselessness, mental illness and other barriers that may impact their overall health and wellness and is a critical part of our safety net services for the community.

### Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare. The majority of our Health Centers clients represent historically underserved BIPOC (Black, Indigenous, People of Color) communities and vulnerable populations. In order to serve clients where they're at, AH teams reflect these populations, including a majority of staff who are bilingual and bicultural, and lived experience similar to our clients. Integration between AH-IBH and AH-CHW is core to our program. AH-IBH offers mental health assessment, diagnosis and brief evidence-based psychotherapy, long term mental health support and peer support for patients experiencing complex medical, mental health, and/or substance use disorders. As part of the primary care medical team, AH-IBH provides consultation and education regarding psychosocial treatments and specific behavioral issues or barriers that arise related to a patient's health issues. Services are provided via telehealth, telemedicine, Peer support specialist, care coordination case management for individuals transitioning out of inpatient psychiatric facilities and in-person visits in coordination with field services provided by our AH-CHW team. AH-CHW serves clients who experience barriers to care that would keep them from achieving their health goals and optimal health outcomes, and are able to give clients the time needed to open up, providing more personal information and expressing their needs. Our CHWs work with clients on the Social Determinants of Health (SDoH) and Health Education/Promotion. In addition to direct client services, SDoH work includes establishing partnerships in the community. CHWs serve as bridge-builders and liaisons with case managers and other client advocates and facilitate Health Education/Promotion.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	AH-IBH Individual Patients Served	5,494	7,324	7,324	8,024
Outcome	AH-IBH Number of encounters completed	18,199	19,548	19,548	21,948
Output	AH-CHW Individual Patients Served	3,825	4,190	4,190	6,000
Outcome	AH-CHW Number of encounters completed	8,925	9,000	9,000	12,800

### Performance Measures Descriptions

**Output:** Individual Patients Served. This measure describes the number of unique clients who received IBH and CHW services within the last 12 months.

**Outcome:** This is the total number of in person, telemed and phone encounters completed with one of our Allied Health Providers. This includes offsite or home visits specific to the CHW providers.

## Legal / Contractual Obligation

Our Community Health Centers comply with CLIA (Laboratory accreditation) requirements, CCO contractual requirements, compliance with the Bureau of Primary Health 330 Grant (HRSA), and the Patient-Centered Primary Care Home (PCPCH) program. The Health Center is accredited under the Joint Commission (TJC) and follows accreditation guidelines. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,448,916	\$0	\$5,187,306
Contractual Services	\$0	\$140,500	\$0	\$156,500
Materials & Supplies	\$0	\$60,060	\$0	\$57,678
Internal Services	\$0	\$1,020,138	\$0	\$1,160,886
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,669,614</b>	<b>\$0</b>	<b>\$6,562,370</b>
<b>Program Total:</b>	<b>\$5,669,614</b>		<b>\$6,562,370</b>	
<b>Program FTE</b>	0.00	34.47	0.00	38.84

Program Revenues				
Intergovernmental	\$0	\$299,862	\$0	\$167,000
Other / Miscellaneous	\$0	\$1,437,960	\$0	\$1,492,000
Service Charges	\$0	\$3,931,792	\$0	\$4,903,370
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,669,614</b>	<b>\$0</b>	<b>\$6,562,370</b>

## Explanation of Revenues

This program generates \$724,668 in indirect revenues.

\$ 1,163,967 - Fee for Services (FFS) - FQHC Medicaid Wraparound

\$ 1,492,000 - Other - Medicaid Quality and Incentives

Federal \$ 167,000 - Federal - Primary Care (PC) 330 - 93.224

\$ 1,857,073 - Fee for Services (FFS) - Medicaid - Care Oregon

\$ 1,223,753 - Fee for Services (FFS) - Medicaid

\$ 447,085 - Fee for Services (FFS) - Medicare

\$ 127,492 - Fee for Services (FFS) - Patient Fees 3rd Party

\$ 84,000 - Fee for Services (FFS) - Patient Fees

This program is support by medical fee and related Medicaid incentive and quality based incentive funds.

## Significant Program Changes

**Last Year this program was:** FY 2023: 40102 FQHC Allied Health

Additional behavioral health roles have been incorporated into allied health. These roles are distributed across multiple health center locations.

**Department:** Health Department

**Program Contact:** Brieshon D'Agostini

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. The Quality Assurance Program provides pivotal support and oversight critical to Health Center services, such as quality assurance and improvement, accreditation and compliance, management of our clinical systems, business intelligence reporting and analysis, and activities to improve health equity and population health.

**Program Description**

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over sixty percent of our patients identify as people of color, and more than 40% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 95% of our clients live below 200% of the Federal Poverty Guideline. All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

This program supports services within the project scope of the Bureau of Primary Health Care (BPHC) grant. BPHC funding requires strict adherence to federal laws mandating which services must be provided by FQHCs, which results in additional Medicaid revenue. This funding requires quality services, performance audits, and responsiveness to new methods of delivering safe and quality care. Maintaining FQHC accreditation assures that the County's primary care, dental, pharmacy, and all in-scope programs are eligible to continue receiving reimbursement for services. 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, The Joint Commission (TJC), and Oregon's Patient Centered Primary Care Home (PCPCH) program are our primary external benchmarking organizations relative to performance indicators. The program works with the Community Health Center Board (consumer majority governing Board) and integrates client feedback results and collaborations with other health care delivery systems. These programs, implemented to meet goals in the 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. The program also assures that robust infection prevention, HIPAA, and patient safety processes are designed and implemented to meet accreditation standards.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Maintain accreditation with The Joint Commission, including the Patient Centered Medical Home standard	100%	100%	100%	100%
Outcome	Maintain compliance with BPHC HRSA Community Health Center Program	100%	100%	100%	100%
Outcome	HRSA Community Health Center Program Grant renewed annually	100%	100%	100%	100%

**Performance Measures Descriptions**

Maintain accreditation with The Joint Commission (TJC), in support of quality and safety and to bill Medicaid. Maintain compliance with the Bureau of Primary Health Care (BPHC) HRSA Community Health Center Program. Required to continue specific service level agreements and financial benefits for patients. HRSA Community Health Center Program Grant renewed annually, including reporting of services provided, staffing, and patient demographics.

## Legal / Contractual Obligation

Quality services are a requirement of the Bureau of Primary Health Care's 330 Grant. Services in the scope of the grant and health center program must follow the HRSA Community Health Center Program's operational, fiscal, and governance requirements. The program is also accredited under The Joint Commission and follows TJC accreditation guidelines. All costs and revenues generated by this program must also comply with the HRSA FQHC requirements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,732,359	\$0	\$4,786,968
Contractual Services	\$0	\$203,762	\$0	\$559,079
Materials & Supplies	\$0	\$92,505	\$0	\$107,283
Internal Services	\$0	\$1,285,392	\$0	\$1,727,122
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,314,018</b>	<b>\$0</b>	<b>\$7,180,452</b>
<b>Program Total:</b>	<b>\$6,314,018</b>		<b>\$7,180,452</b>	
<b>Program FTE</b>	0.00	23.26	0.00	29.00

Program Revenues				
Intergovernmental	\$0	\$269,900	\$0	\$150,000
Other / Miscellaneous	\$0	\$2,547,768	\$0	\$2,737,500
Beginning Working Capital	\$0	\$1,045,000	\$0	\$1,445,000
Service Charges	\$0	\$2,451,350	\$0	\$2,847,952
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,314,018</b>	<b>\$0</b>	<b>\$7,180,452</b>

## Explanation of Revenues

This program generates \$668,739 in indirect revenues.

\$ 2,847,952 - Fee for Services (FFS) - FQHC Medicaid Wraparound

\$ 3,782,500 - Other - Medicaid Quality and Incentives

\$ 400,000 - HD FQHC PCPM - Business Intelligence Beginning Working Capital

Federal \$ 150,000 - Federal - Primary Care (PC) 330 - 93.224

## Significant Program Changes

**Last Year this program was:** FY 2023: 40034 FQHC-Administration and Operations

The program contains staffing in support of the Racial Equity Diversity and Inclusion Initiative. In FY24, the equity positions are updated to be permanent, reflecting the need for ongoing investment into program support and development in equity programming. Specific limited duration ARPA roles from FY23 will be removed for FY24.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted

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

The Behavioral Health Resource Center (BHRC) is peer-led and is designed to support adults (18+) who are experiencing serious behavioral health challenges, trauma and homelessness. The BHRC prioritizes meeting individuals' basic needs in the short-term, while working with partners to improve program processes to allow for access to more stable support in the long-term. Services are inclusive, low-barrier, safer, trauma-informed and culturally responsive. The three BHRC programs are: a Day Center, a Behavioral Health Shelter and a Bridge Housing program and will be operated by contracted providers. The BHRC Day Center opened in December of 2022. The Shelter and Bridge Housing programs will open in Spring of 2023. Operating at full capacity the BHRC will provide critical support and services to over 200 houseless individuals daily.

**Program Description**

This offer includes the BHRC Day Center, shelter and Bridge Housing programs. The Day Center operates on the first and second floors of the facility which opened in December 2022. The Day Center is open 15 hours per day and serves as an entry point for individuals that are experiencing trauma, behavioral health challenges and/or homelessness. The Day Center provides an array of services, including access to showers, bathrooms, laundry, clothing, computers, charging stations and calming spaces to relax and gain support from peer staff with lived experience. The Mental Health and Addictions Association of Oregon (MHA AO), a peer-run and peer-led nonprofit, is the contracted provider for the Day Center. A team of 29 MHA AO peers staff members oversee the Day Center operations and connect with peer participants to increase peer engagement, efficacy and wellness.

The Behavioral Health Shelter program will have 33 beds and be a mixed gender shelter. The length of stay is 1-30 days. The Bridge Housing program will provide 19 beds, offer mixed gender housing, and the length of stay is 1-90 days. The participants that utilize the shelter can choose to enter the Bridge Housing Program and develop stable and long term plans for wellness and housing. Both programs will be operated by the same contract provider, be staffed by professionals with lived experience, and be supported by clinical staff. Pets are also welcome in both Programs.

Both programs will have the opportunity to connect with the social services provided in BHRC Day Center and their individual program staff. The BHRC has invited community partners to collaborate toward a collective effort to support program participants at the BHRC. The facility has designated office space(s) on each floor to offer community providers and partners the opportunity to access the BHRC. The BHRC facility offers access to wifi, computer stations, activity space, printing, and basic physical needs (restrooms, shower, laundry, water, snacks, coffee, & tea). The BHRC Day Center vision is to have community partners connect with program participants on site, offer services, make referrals to partnering organizations, establish housing plans, offer skill shares, and art classes; the sky's the limit. The BHRC leadership and MHA AO has worked to establish the BHRC Community Partner (CP): agreements, schedule, and menu of services that will be offered to peer participants, ongoing.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals receiving peer delivered services and access to basic needs daily	NEW	150	136 (1)	150
Outcome	% of participants using shelter beds will engage in service planning to address behavioral health & housing	NEW	50%	NEW	50%
Outcome	Percent of participants will have access to onsite supports, including basic needs and social connection.	NEW	90%	NEW	90%
Outcome	Percent of individuals served daily will use onsite connection to community supports.	NEW	50%	NEW	50%

**Performance Measures Descriptions**

Measures are influenced by peer and provider stakeholder engagement and will be reviewed to identify additional program value and goal alignment as this new program develops. Since we have combined this program offer with 40105B, we have added in a shelter and bridge housing specific outcome for FY24. (1) FY23 estimate is based on the number of individuals that received services Dec 5- Jan 1, 2023.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$494,111	\$0	\$384,674
Contractual Services	\$751,095	\$1,772,928	\$0	\$1,434,987
Materials & Supplies	\$4,000	\$43,273	\$0	\$10,500
Internal Services	\$765,364	\$456,193	\$1,339,025	\$200,169
<b>Total GF/non-GF</b>	<b>\$1,520,459</b>	<b>\$2,766,505</b>	<b>\$1,339,025</b>	<b>\$2,030,330</b>
<b>Program Total:</b>	<b>\$4,286,964</b>		<b>\$3,369,355</b>	
<b>Program FTE</b>	0.00	2.50	0.00	1.50

Program Revenues				
Intergovernmental	\$0	\$2,266,505	\$0	\$2,030,330
Beginning Working Capital	\$0	\$500,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,766,505</b>	<b>\$0</b>	<b>\$2,030,330</b>

Explanation of Revenues

This program generates \$53,738 in indirect revenues.

State: \$ 1,335,000 - BHRC HUD Funding

Federal: \$ 500,000 - HSO - Behavioral Health Resource Center

Federal: \$ 75,113 - Trillium - Behavioral Health Resource Center (BHRC)

State: \$ 120,217 - OHA Behavioral Health Community Mental Health Programs & Capital - BHRC

Significant Program Changes

Last Year this program was: FY 2023: 40105A Behavioral Health Resource Center (BHRC) - Day Center

Since last year, the BHRC Day Center has opened its doors to the community and shelter and Bridge Housing programs are in development.

**Department:** Health Department      **Program Contact:** Christa Jones  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 30200  
**Program Characteristics:**

**Executive Summary**

The Behavioral Health Resource Center (BHRC) is peer-led and has three programs within the facility designed to support adults (18+) who are experiencing serious behavioral health challenges, trauma and houselessness. The BHRC prioritizes meeting individuals' basic needs in the short-term, while working with partners to improve program processes to allow for access to more stable support in the long-term. Services are inclusive, low-barrier, safer, trauma-informed and culturally responsive. The three BHRC programs are: a Day Center, a Behavioral Health Shelter and a Bridge Housing program and will be operated by contracted providers. Operating at full capacity the BHRC will provide critical support and services to over 200 houseless individuals daily.

**Program Description**

This offer includes the Behavioral Health Shelter and Bridge Housing programs, which will operate on the third and fourth floors of the BHRC and are slated to open in Spring 2023. Similar to the Day Center, these programs were developed with input from peer providers and from those with lived experience of behavioral health challenges and houselessness. The BHRC Behavioral Health Shelter and Bridge housing programs will operate 24/7/365, by referral from the BHRC Day Center and community providers.

The Behavioral Health Shelter program will have 33 beds and be a mixed gender shelter. The length of stay is 1-30 days. The Bridge Housing program will provide 19 beds, offer mixed gender housing, and the length of stay is 1-90 days. The participants that utilize the shelter can choose to enter the Bridge Housing Program and develop stable and long term plans for wellness and housing. Both programs will be operated by the same contract provider, be staffed by professionals with lived experience, and be supported by clinical staff. Pets are also welcome in both Programs.

Both programs will have the opportunity to connect with the social services provided in BHRC Day Center and their individual program staff. The BHRC has invited community partners to collaborate toward a collective effort to support program participants at the BHRC. The facility has designated office space(s) on each floor to offer community providers and partners the opportunity to access the BHRC. The BHRC facility offers access to wifi, computer stations, activity space, printing, and basic physical needs (restrooms, shower, laundry, water, snacks, coffee, & tea). The BHRC Day Center vision is to have community partners connect with program participants on site, offer services, make referrals to partnering organizations, establish housing plans, offer skill shares, and art classes; the sky's the limit. The BHRC leadership and MHA AO has worked to establish the BHRC Community Partner (CP): agreements, schedule, and menu of services that will be offered to peer participants, ongoing.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of individuals served in Shelter and Bridge Housing programs daily	NEW	NEW	NEW	52
Outcome	% of participants using shelter beds will engage in service planning to address behavioral health & housing	NEW	NEW	NEW	50%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,186,723	\$295,601	\$1,866,852
Materials & Supplies	\$0	\$30,476	\$0	\$0
Internal Services	\$653,973	\$176,296	\$807,041	\$88,148
<b>Total GF/non-GF</b>	<b>\$653,973</b>	<b>\$1,393,495</b>	<b>\$1,102,642</b>	<b>\$1,955,000</b>
<b>Program Total:</b>	<b>\$2,047,468</b>		<b>\$3,057,642</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,393,495	\$0	\$1,955,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,393,495</b>	<b>\$0</b>	<b>\$1,955,000</b>

Explanation of Revenues

State: \$ 1,890,000 - FY24 BHPlaceholder- FIOC  
 State: \$ 65,000 - CHOICE Funding

Significant Program Changes

Last Year this program was:



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$2,571,429	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,571,429</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$2,571,429</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: FY 2023: 40105A Behavioral Health Resource Center (BHRC) - Day Center

**Department:** Health Department      **Program Contact:** Jennifer Vines  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40002  
**Program Characteristics:**

**Executive Summary**

Health Officer Division portion of Integrated Clinical Services Division, Clinical Support personnel budgeted in 417020. This is the Health Officer Division's share of the personnel who support the electronic health record system utilized by the Health Officers, Emergency Medical Services staff, and Medical Examiners staff.

**Program Description**

This Program is the Health Officer Division's portion of the personnel who support the County's electronic health care records system. This electronic health care record system is accesses to document patient care encounters, and also used to have a complete understanding of a patient's health care record for care coordination, or public health related investigation including the medicolegal death investigations performed by the medical examiner staff.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	access to the Counties electronic patient care records system for appropriate Health Officer Division Staff	100%	100%	100%	100%
Outcome	Ensure Health Officer, EMS, and Medical examiner staff have appropriate access to Electronic Care Records	100%	100%	100%	100%

**Performance Measures Descriptions**

**Legal / Contractual Obligation**

none

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Materials & Supplies	\$44,492	\$0	\$46,717	\$0
<b>Total GF/non-GF</b>	<b>\$44,492</b>	<b>\$0</b>	<b>\$46,717</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$44,492</b>		<b>\$46,717</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**

Fully funded by County General Funds \$46,717

**Significant Program Changes****Last Year this program was:** FY 2023: 40106 Health Officer In/Out of Scope Services

This fee was first assessed in FY 2023.

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Corrections Health continues to struggle with staffing issues and burnout. Much of this burnout is resulting in increased sick calls and vacation requests further exacerbating staffing issues and resulting in a higher number of mandates which in turn contributes to further burnout. To get out of this cycle CH is increasing each of our shift counts (the number of nurses assigned to a shift) by 2 (by 1 at JDH).

**Program Description**

The staffing augmentation means that the number of nurses regularly scheduled to each shift will increase so if there is a call out or staff request vacation, that shift is able to work without that nurse and without mandating a nurse from the previous shift, asking current staff to pick up that shift as overtime or rely on expensive agency staff. This is a strategy that has been used successfully by King Co. Jail Health when they were sued for using mandates as a regular solution to staffing issues. Last year CH mandated 548 times. That's 46 mandates on average per month. The hope is that the increased spending on permanent staff will result in decreased spending in overtime, temp and agency staffing expenses, as well as a reduction in the cost related to continuously orienting and training new staff as a result of retention issues. CH is reducing our CHN related on-call, temp and overtime budget to help pay for the additional positions. As we fill the vacant positions the need to rely on overtime and temporary staff is expected to decrease. These additional positions acknowledge the continued demand placed on our medical staff to serve a population that suffers from many chronic health and acute medical issues. Because we work in a jail we are unable to close or not serve patients due to staffing levels and so must continue to rely on the limited staff that are available. As the acuity of the population and total number continued to increase after COVID we need to grow to meet that need. Increased number of available staff, reduced mandated shifts, more effective patient care with longer term improvement in recruitment and retention. A disproportionate percentage of the BIPOC community are incarcerated in Multnomah County. Reduction in CH direct service impacts the care we are able to provide to this population. Those incarcerated in Jail cannot seek health or mental health services outside of what is provided by Corrections Health. Continued use of mandates, on-call staff and staffing agencies. These strategies result in increased spending in overtime, on-call and temp and professional services.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Reduction in Mandated Overtime shifts	N/A	N/A	600	300
Outcome	Reduction of staff burnout as measured by vacant nursing positions	N/A	N/A	N/A	90% filled

**Performance Measures Descriptions**

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$1,211,108	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,211,108</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,211,108</b>	
<b>Program FTE</b>	0.00	0.00	6.60	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:** Health Department      **Program Contact:** Thomas Bialozor

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

Behavioral Health Emergency Coordinating Network (BHECN) is a two plus year collaborative process with the City Of Portland, Multnomah County, Coordinated Care Organizations (CCO), Hospital Systems, Community Providers, and Peer stakeholders. The goal of the network is to develop and coordinate critical projects such as a new detox and respite space, expanded behavioral health crisis triage services, and a coordinated system for referring people from these crisis spaces to options that support their longer-term stabilization.

**Program Description**

This program offer funds Phase 2 of the process. Phase 2 will be a Request for Proposals (RPF), and will allow the BHECN steering committee to evaluate the options and the funding strategies based on the RFP proposals received. The two options will be 1) a Crisis stabilization facility; or option 2) Polysubstance subacute. Once proposals are received, the steering committee will evaluate quality and the return on investment of the options presented and determine which, if any, the collaborative partners are willing to fund.

Multnomah County should anticipate paying up to 20% of the total cost which represents the percentage of indigent, un/under insured people who will utilize these services as well as a proportionate share of operating costs that will not be covered by Medicaid.

As part of the Behavioral Health Department’s commitment to equity, the division’s leadership of BHECN will strive to identify, develop, and support crisis services with a mind toward culturally responsive or culturally specific crisis services facilitated, when possible, by individuals with lived experience, who speak the same language, and reflect the diverse populations being served.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of Request for Proposals Compete	N/A	N/A	N/A	100%
Outcome	Percentage of program operator/contractor identified	N/A	N/A	N/A	100%
Output	Percentage of Contract(s) developed and executed	N/A	N/A	N/A	100%
Outcome	% of Exec. Committee Stakeholders who support the addition(s) to the behavioral health system of care	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

The performance measures represent all essential BHECN project activities required to achieve final stakeholder approval of the project and launch this new program, optimally in FY2025  
 Future outcomes will include program-level results, such as the percentage of individuals served by BHECN and discharged to a lower level of care.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$2,000,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,000,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$2,000,000</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:

This program is new.

**Department:** Health Department      **Program Contact:** Thomas Bialozor

**Program Offer Type:** New      **Program Offer Stage:** Adopted

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

**Executive Summary**

Since FY21, the Behavioral Health Division has implemented a number of initiatives to better serve Multnomah County residents struggling to navigate the Coronavirus pandemic. Older adults and Black, Indigenous and other People of Color (BIPOC) experience significant barriers to access support to address symptoms of stress, anxiety, depression, isolation, fear, and loneliness. The second full year of the pandemic further heightened disparities in social indicators of health in BIPOC communities, across the age spectrum, and impacting mental health acuity and crisis, substance use, violence and education. BHD works to proactively address these challenges while continuously adapting to meet the shifting community needs. This program offer is designed to address the current known factors and retain flexibility as the pandemic continues.

**Program Description**

This program is a continuation of the Behavioral Health Division's (BHD) response to COVID-19 response initiated in FY21. It is developed with the intent to retain enough flexibility to allow services to be directed toward emerging needs while also retaining appropriate measures for accountability, as we have learned that community needs may shift rapidly as the effects of the pandemic continue. To address the behavioral health challenges brought on through the pandemic, this program offer prioritizes:

- \*Flexible peer support services to address access to services and other increased needs
- \*Enhanced crisis response services
- \*Community identified gaps/needs among BIPOC, LGBTQIA and other vulnerable populations
- \*Communications and marketing to address impacts of Covid on behavioral health, with emphasis on BIPOC and other vulnerable populations

Personnel costs included in this program offer are associated with increased demand in crisis and safety net services and the infrastructure required to support contract monitoring, evaluation of services, increased demand in current services, as well as standing up infrastructure for new services BHD is providing to the community.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of BIPOC served across all services <sup>1</sup>	39%	35%	36%	35%
Outcome	Build data tracking mechanisms & reports for new BHD programs for establishing and monitoring outcomes <sup>2</sup>	50%	100%	36%	35%
Output	Percentage of older adults served across all services <sup>1</sup>	52%	35%	36%	35%
Output	Number of unique individuals connected to behavioral health services and other resources, via peers.	550	900	N/A	900

**Performance Measures Descriptions**

<sup>1</sup> This measure was split into two separate outcomes to better track data. BIPOC individuals may be reflected in both outcomes if they also qualify as an older adult. Older adults may be reflected in both areas if they are also BIPOC.

<sup>2</sup> Workforce shortages delayed hiring staff, which delayed Evolv, Reporting and Policy development. Funding for another year is essential to provide these teams the infrastructure they need to support the community.

**Legal / Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$0	\$706,404	\$586,793	\$0
Contractual Services	\$0	\$891,444	\$0	\$0
Materials & Supplies	\$0	\$13,192	\$0	\$0
Internal Services	\$0	\$14,848	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,625,888</b>	<b>\$586,793</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,625,888</b>		<b>\$586,793</b>	
<b>Program FTE</b>	0.00	1.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,625,888	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,625,888</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues****Significant Program Changes**

**Last Year this program was:** FY 2023: 40199D ARP - Behavioral Health - Continuing COVID Response

The progress on this program offer was impacted by a behavioral health workforce crisis which has limited capacity amongst providers across the county and impacted hiring and retention. Further, severe weather events diverted resources. The unfortunate continuation of elevated COVID levels due to the Delta and Omicron variants continues to put strain on our behavioral health systems and to exacerbate stressors on our communities, especially BIPOC and houseless communities. As noted in the program, BHD has intentionally built in flexibility in the allocation of funds to reflect the ever-shifting needs of the pandemic, particularly in BIPOC and other vulnerable communities. BHD will continue to provide behavioral health crisis services, counseling, peer support, and connection to ongoing services/resources. In FY 2023, this program was funded with American Rescue Plan funding. It is now being funded with General Fund and is therefore marked New.

**Program #40110 - Gun Violence Impacted Families Behavioral Health Team FY 2024 Adopted**

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:** 40080B  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Gun violence, shootings, and homicides continue to occur at a high frequency in Multnomah County. Gun violence is a racial justice issue that is fueled by discrimination and structural inequities in our society. Gun violence in Multnomah County is disproportionately impacting our African American, Latinx, Asian and African Refugee communities. Multiple community organizations and community leaders have been proactively addressing community gun violence for decades, working side by side with the communities most impacted and advocating for racial justice. This program provides additional direct mental health services to youth (ages 10-18) and their families impacted by gun violence, specifically focusing on the African American, Latinx and African Refugee community.

**Program Description**

The Gun Violence Behavioral Health Response team includes three Mental Health Consultants (African American knowledge skills and abilities (KSA), Latinx KSA, and African Refugee KSA), a Program Specialist Senior and a Program Supervisor providing mental health services to those impacted by gun violence. The team provides a range of culturally relevant, evidence-based mental health services for the impacted community. These trauma-informed services are provided to improve the social and emotional functioning of youth and families who are impacted by community and gang violence. The MHC team utilizes lived experience and community informed practices to provide culturally specific mental health prevention support, mental health services, consultation, outreach and engagement. Referrals to this program will come from both internal county programs and external community partners and providers. In conjunction with this staffing the county contracts with community partners including Portland Opportunities and Industrialization Center, Immigrant and Refugee Community Organization, and Latino Network to support a credible messenger/mentor, with lived experience. The intent is to directly support the most impacted communities, with a specific focus on the youth population and their families. This team of mental health consultants and credible messengers/mentors work collaboratively to address the needs of the community. Together, this team of mental health consultants and mentors provide a range of culturally relevant, trauma-informed services, consultation, and training for impacted communities. Another partnership will be with Portland State to do a thorough evaluation of the program and collect data on the impact of the program.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total # of children who received behavioral health services from this specialty team	8	40	36	40
Outcome	ACORN Distribution of Patient Change Rate reported by client/student as their perception of improvement <sup>1</sup>	N/A	65%	N/A	65%
Output	Total # of outreach/engagement activities attended/provided in the community	7	30	35	30

**Performance Measures Descriptions**

<sup>1</sup>Our program has no data at this time for ACORN as we are still in the early implementation stages for FIT and still need to have our MHC trained for FIT. Our program is exploring a different measure but that is still in the works.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$575,859	\$680,361	\$0
Contractual Services	\$0	\$543,939	\$546,726	\$0
Materials & Supplies	\$0	\$94,602	\$2,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,214,400</b>	<b>\$1,229,587</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,214,400</b>		<b>\$1,229,587</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,214,400	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,214,400</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

**Last Year this program was:** FY 2023: 40199Q ARP - Gun Violence Impacted Families Behavioral Health Team

Care Oregon has limited ACORN training and staff were unable to attend the training sessions to implement ACORN. Program is investigating a more appropriate outcome tool for future years.

This program was previously funded with American Rescue Plan funding. It is now funded with one-time-only General Fund and is therefore marked New.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Over the last 10 years significant increases in behavioral health challenges including depression, anxiety, and suicidal ideation are the leading cause of disability and poor life outcomes in young people. Marginalized youth are especially vulnerable and often do not have access to support or services.

Recognizing the lack of culturally responsive mental health providers available to work with youth in schools, this pilot program will support workforce development opportunities for interns seeking licensure and/or internship hours thereby increasing capacity for and accessibility to culturally grounded school-based mental health services.

**Program Description**

In partnership with local schools of social work and community-based non-profits, the Culturally Specific Mental Health Workforce Development Program will support bicultural/bilingual interns providing behavioral health services to the Latinx community with supervision and access to culturally grounded best practices, ensuring that interns receive consistent statewide standards and processes for training, licensing, and hiring from community-led agencies.

This pilot program will allow social work interns to complete internships at culturally-specific afterschool programs for 6th to 12th grade students in three different schools where they will use a combination of learnings from their coursework and tools from culturally responsive providers to support students, both one on one and in small groups. Interns will focus on increasing youth's knowledge about their own mental health needs, decreasing loneliness, and providing youth with clinical and social interventions either directly or through an external provider.

As an added benefit, this model increases capacity and support for frontline providers to reduce burnout and staff turnover while strengthening referral systems that ensure all students have access to services and support.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of school-based mental health social work interns supported	NA	NA	NA	3
Outcome	Number of group sessions held for youth in schools	N/A	N/A	N/A	9
Outcome	Total number of unduplicated youth served	N/A	N/A	N/A	30

**Performance Measures Descriptions**

**Revenue/Expense Detail**

	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>	<b>Adopted General Fund</b>	<b>Adopted Other Funds</b>
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$0	\$0	\$154,286	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$154,286</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$154,286</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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:

**Department:** Health Department **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing **Program Offer Stage:** Adopted  
**Related Programs:** 40199T, 40010C  
**Program Characteristics:**

**Executive Summary**

The Community Immunization Program (CIP) contributes to a safe environment by supporting providers in their use of federally subsidized Vaccines for Children (VFC) and 317 (adults at high risk) programs. The program assures that schools and childcare facilities comply with state school immunization rules and supports the provision of COVID-19 vaccines and testing and annual influenza vaccinations. A portion of CIP funding and activities are also in program offer 40010C.

**Program Description**

As a program within Communicable Disease Services (CDS), the goal of the Community Immunization Program (CIP) is to be a trusted community resource that protects the people of Multnomah County from vaccine-preventable communicable diseases, including COVID-19. As vaccine-preventable diseases spread from person-to-person, vaccination is important not only for individual health but also for the health of the community and places where children live, play, and go to school. CIP assures state and federally funded program components and approaches are implemented to protect community health.

Key areas of work include:

Safe vaccine supply and efficient use of vaccines - CIP supports the County system of Federally Qualified Health Centers in receiving Vaccines for Children and 317 (adults at high risk) vaccine supply.

State school immunization laws - CIP issues exclusion orders as needed and assures that all children and students are complete or up-to-date on their immunizations. The program works in BIPOC and other underserved communities to address health and vaccine inequities. In FY22, CIP will assist over 600 facilities in complying with State mandates.

COVID-19 and influenza - CIP provides COVID-19 vaccination, influenza vaccination, and access to COVID-19 testing at locations throughout the county. Testing strategies also include home testing kits. The program prioritizes work within BIPOC and other underserved communities. CIP collaborates with Public Health's REACH and Community Partnerships and Capacity Building programs and community based organizations to implement vaccination and testing activities.

CIP works with other CDS programming to identify racial, ethnic, and other community groups who are either at risk of or being impacted by infectious diseases utilizing multiple data sources. CIP is committed to the values of innovation, collaboration, diversity, and accountability and works closely with community partners to reach BIPOC and other underserved communities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of immunizations provided to children under 18, including COVID-19 vaccines	3302	600	680	350
Outcome	Percent of schools and daycares successful in meeting immunization law requirements	100%	90%	100%	90%
Output	Number of schools & other facilities assisted with immunization law requirements.	N/A	600	648	480
Outcome	Percentage of COVID-19 Vaccine provided to BIPOC individuals.	60%	60%	70%	70%

**Performance Measures Descriptions**

Measure 2 was moved from 40010A to this program offer and program offer 40010C in FY23. Measure 3: The FY23 Offer number reflects the percentage of CIP staff budgeted in this program offer. The FY23 Offer for 40010C reflects the percentage of CIP staff budget in that offer. Combined, the two offers will assist 600 schools and other facilities in FY23.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$443,552	\$0	\$1,357,256
Contractual Services	\$0	\$0	\$0	\$20,000
Materials & Supplies	\$0	\$960	\$0	\$43,740
Internal Services	\$0	\$953,882	\$0	\$297,072
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,398,394</b>	<b>\$0</b>	<b>\$1,718,068</b>
<b>Program Total:</b>	<b>\$1,398,394</b>		<b>\$1,718,068</b>	
<b>Program FTE</b>	0.00	4.17	0.00	8.88

Program Revenues				
Intergovernmental	\$0	\$1,398,394	\$0	\$1,718,068
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,398,394</b>	<b>\$0</b>	<b>\$1,718,068</b>

Explanation of Revenues

This program generates \$189,609 in indirect revenues.  
 Federal through State - \$1,718,068

Significant Program Changes

**Last Year this program was:** FY 2023: 40199B ARP - Public Health Communicable Disease Community Immunization

In FY24, the focus of this offer is being broadened to include additional immunization work and it is connected to 40010C. 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.

This program falls under the Public Health Emergency Response ARP priority area.

**Department:** Health Department      **Program Contact:** Jessica Guernsey  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 40001, 40010B, 40010C, 40199B, 40037, 40053, 40060, 40096A, 40097  
**Program Characteristics:**

**Executive Summary**

In June 2021, Public Health was awarded funding through the Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved. This funding runs through May 2024. Activities aim to build infrastructure support and partner mobilization that both address disparities and set the foundation to address future responses. Public Health is supporting both internal staff and community partners to focus on disparities that are impacting BIPOC and other underserved communities.

**Program Description**

Public Health CDC COVID-19 Health Disparities funding supports an array of activities across the Public Health Division. Key activities include coordinating Public Health COVID-19 response (testing and vaccination) and recovery activities; supporting internal project management, fiscal, and administrative infrastructure; implementing communications and health literacy strategies; building community partners capacity through contracts, technical assistance, and facilitating collaboration; emergency preparedness planning both for COVID-19 and future events such as those related to climate change; and developing policy, system, and environment change strategies that work to improve health, social, and economic disparities within BIPOC and other underserved communities.

Work within the following program offers is resourced through CDC COVID-19 Health Disparities funding budgeted in the Program Design and Evaluation Services Program. The continuing projects for infrastructure support include development of BIPOC centered Public Health Emergency Response Plan; development of systems approach to COVID-19 and upstream factors; formulation and continued internal and external advisory councils to address health disparities; culturally and linguistically appropriate member communications; department-wide equity capacity building and evaluation and performance measurement plan. Continuing projects for partner mobilization include development of COVID-19 communications plan; partner mobilization work with community-based organizations and community health workers; and a youth mental health communications campaign.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of Public Health programs supported	N/A	9	1	9
Outcome	# of community partners supported	N/A	250	250	250

**Performance Measures Descriptions**

Measure 1 is defined as the number of program offers with staff/activities/partners funded by CDC grant funds. Measure 2 is defined as both funded and unfunded partners.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,689,547	\$0	\$732,686
Contractual Services	\$0	\$1,559,222	\$0	\$1,698,854
Materials & Supplies	\$0	\$167,935	\$0	\$89,202
Internal Services	\$0	\$237,520	\$0	\$102,356
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,654,224</b>	<b>\$0</b>	<b>\$2,623,098</b>
<b>Program Total:</b>	<b>\$3,654,224</b>		<b>\$2,623,098</b>	
<b>Program FTE</b>	0.00	11.77	0.00	4.50

Program Revenues				
Intergovernmental	\$0	\$3,654,224	\$0	\$2,623,098
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,654,224</b>	<b>\$0</b>	<b>\$2,623,098</b>

Explanation of Revenues

This program generates \$102,356 in indirect revenues.  
 Federal \$ 2,623,098 - CDC COVID-19 Public Health Disparities in PDES

Significant Program Changes

**Last Year this program was:** FY 2023: 40199T Public Health CDC COVID-19 Health Disparities

In FY24 this grant funding is budgeted in the Program Design and Evaluation, in Program Offer 40096A.

This program falls under the Public Health Emergency Response ARP priority area.

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

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, 2024. 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. This funding falls within the community clinical linkages strategy area.

**Program Description**

REACH programming centers a culture- and strength-based approach, relying on community wisdom to develop and implement culturally tailored interventions that address root causes of health inequities and preventable risk behaviors. The following supplemental activities are implemented alongside input and support from community partners.

Identifying barriers to vaccine uptake via community assessment and engagement - providing technical assistance and other wraparound support connections to community health workers (CHWs), faith ministries, and other community spokespersons to support data collection; developing social media content, videos, and messaging to raise awareness and educate in a way that resonates with Black, African American, and African immigrant and refugee families; and collaborating with state and local Public Health and Integrated Clinical Services Federally Qualified Health Center (FQHC). While the REACH Program has a priority population, the services rendered through the supplemental grant provided an avenue for many communities including Multnomah County BIPOC communities.

Equipping community members with the knowledge and data related to vaccination strategies - identifying and training CHWs and trusted community-level spokespersons to communicate COVID-19 and flu disparities and importance of vaccination and other prevention activities through local media outlets, social media, faith-based venues, community events, and other community-based, culturally-appropriate venues. Implementing vaccine clinics - connecting vaccination providers with places of worship, community organizations, and other trusted community settings to set up COVID-19 and flu vaccination sites.

Health Department partners include the FQHC program, local health systems, and other Public Health programs. External partners include the ACHIEVE Coalition and Healthy Birth Initiative Community Action Network; Portland Community College and nursing schools; faith-based organizations; Portland Public Schools; Schools Uniting Neighborhoods (SUN); Boys & Girls Club; Black- and African-led community and service organizations; Portland Fire and Rescue; Portland Trail Blazers, and community members, leaders, and influential voices.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of settings with COVID-19/flu vaccine clinics	70	45	29	5
Outcome	# of people receiving a COVID-19/flu vaccine	35,000	8,000	8,811	500

**Performance Measures Descriptions**

FY22 Estimates are based on 12 months. FY23 Offer is based on 3 months (July 2022 through September 2022) since supplemental funding ends in September 2022.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$105,195	\$0	\$480,803
Contractual Services	\$0	\$127,550	\$0	\$276,912
Materials & Supplies	\$0	\$7,000	\$0	\$117
Internal Services	\$0	\$14,139	\$0	\$67,168
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$253,884</b>	<b>\$0</b>	<b>\$825,000</b>
<b>Program Total:</b>	<b>\$253,884</b>		<b>\$825,000</b>	
<b>Program FTE</b>	0.00	0.25	0.00	3.05

Program Revenues				
Intergovernmental	\$0	\$253,884	\$0	\$825,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$253,884</b>	<b>\$0</b>	<b>\$825,000</b>

Explanation of Revenues

This program generates \$67,168 in indirect revenues.  
 \$825,000 - COVID-19 Federal REACH - Flu Vaccine

Significant Program Changes

**Last Year this program was:** FY 2023: 40199U Public Health REACH COVID-19/Flu Vaccine Supplement

Covid/Flu REACH Supplemental Grant - \$825,000; 3.05 FTE

This program falls under the Public Health Emergency Response ARP priority area.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$299,082
Contractual Services	\$0	\$0	\$0	\$150,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$449,082</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$449,082</b>	
<b>Program FTE</b>	0.00	0.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$449,082
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$449,082</b>

Explanation of Revenues

Federal 449,082 ARPA

Significant Program Changes

Last Year this program was:

In FY23, the staff and coalition funding was budgeted in Program Offer 40019J, Public Health Community Partners and Capacity Building.

This program falls under the County's Crisis Response & Community Recovery ARP Priority Area.





## Legal / Contractual Obligation

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$0	\$109,438	\$0	\$123,016
Contractual Services	\$0	\$5,895	\$0	\$0
Materials & Supplies	\$0	\$18,000	\$0	\$0
Internal Services	\$0	\$0	\$0	\$10,317
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$133,333</b>	<b>\$0</b>	<b>\$133,333</b>
<b>Program Total:</b>	<b>\$133,333</b>		<b>\$133,333</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$133,333	\$0	\$133,333
<b>Total Revenue</b>	<b>\$0</b>	<b>\$133,333</b>	<b>\$0</b>	<b>\$133,333</b>

## Explanation of Revenues

State \$133,333 from the Oregon Health Authority - Stimulus Funding specific for the EASA program

## Significant Program Changes

**Last Year this program was:** FY 2023: 40199Y Early Assessment and Support Alliance (EASA) COVID-19 Stimulus

The Outcome measure is not available and the Output measure is an estimate because this position has not yet been hired. The budget was approved in August and recruitment for this position started in September 2022. Interviews for this position will begin in January 2023.

This program falls under the Public Health Emergency Response ARP priority area.

### Department Overview

A cherished institution for more than 150 years, Multnomah County Library is a key community asset, meeting a complex set of evolving individual and community needs and demands. Multnomah County Library serves our community based on a set of priorities that change over time (last revised October 2022) and on four foundational pillars.

**Our pillars:**

- Free access for all
- A trusted guide for learning
- The leading advocate for reading
- A champion for equity and inclusion

The library works to create an environment that serves and supports those who have not had access or been welcomed. The library acknowledges its own legacy of oppression and racism, and is committed to a path of evolution and improvement to deconstruct those systems. Multnomah County Library will focus resources on people and groups who have been left out. To this end, the library will act based on the priorities below.

**Evolving library services:**

- Centering community voices, race, and culture in developing library services, collections, and resources
- Meeting and serving communities at their point of need
- Uplifting the voices of those who have not been heard

**Supporting education and learning for all ages:**

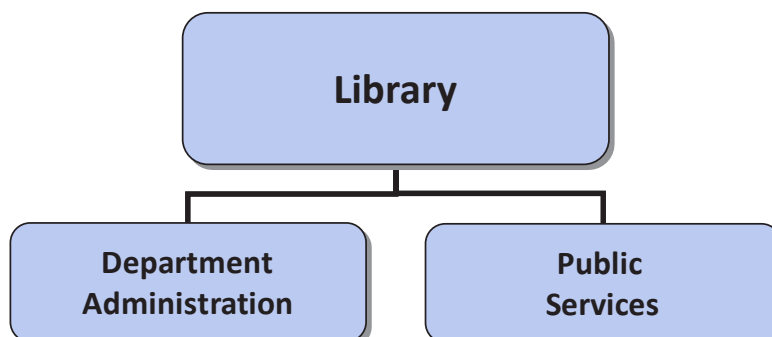
- Serving youth, educators, parents, and caregivers in libraries and beyond
- Offering students and learners tools and resources to help online and in-person learning
- Providing tools and help for lifelong learning

**Delivering technology training, access, and assistance for all:**

- Making technology available and useful for those who need it most
- Collaborating with partners to provide devices, internet access, and training
- Acting and advocating for digital equity and inclusion

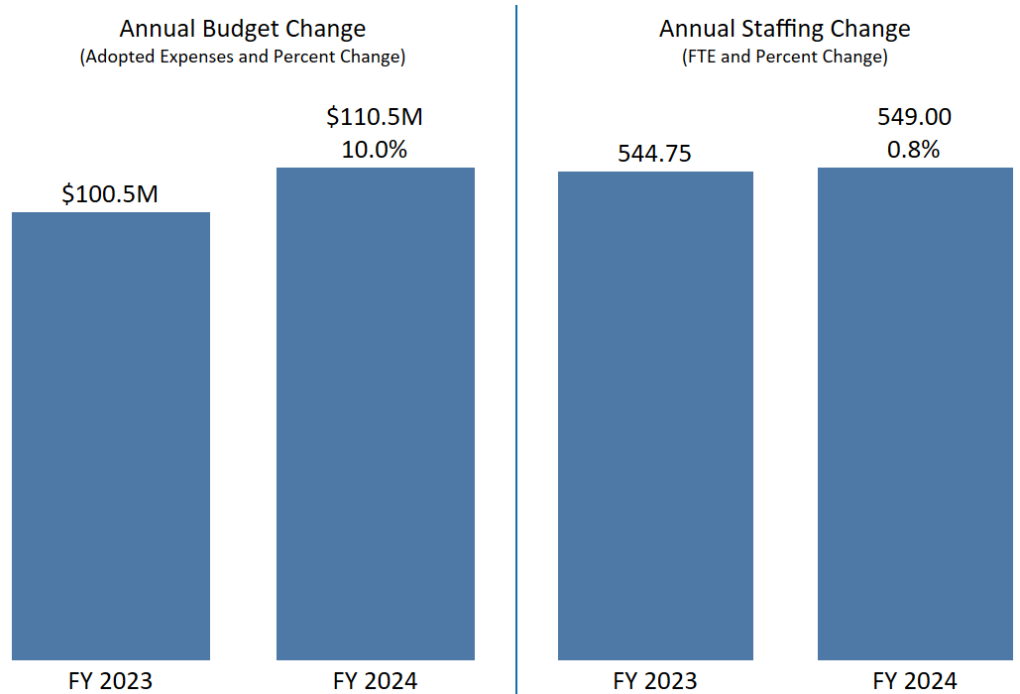
**Creating and maintaining safe and healthy spaces:**

- Serving people in buildings that are as safe and healthy as we can make them
- Striving to maintain inclusive library spaces that promote emotional health and safety
- Planning for future library spaces that support safety, health, and well-being



### Budget Overview

The Library FY 2024 Adopted budget is \$110.5 million, a \$10.0 million, or 10.0%, increase from the FY 2023 Adopted budget. Library operations are funded exclusively through the independent Multnomah County Library District. In the eleventh year of the Library District, the Library proposes to levy a rate of \$1.22 per \$1,000 of assessed value. This rate is unchanged from FY 2023 and is below the voter approved maximum of \$1.24 per \$1,000 of assessed value. According to the most recent economic forecast for the Library, the Library District will experience growing property tax revenues due to the impending end of several large Urban Renewal Areas in the City of Portland which will allow the Library to run modest surpluses without raising the tax rate in the near term.



In November of 2020, voters passed the Library General Obligation Bond (GO Bond) measure which will fund development or significant renovations of eight library branches, including a new East County Flagship branch, as well as a new sorting center and expansion of automated materials handling capabilities. The majority of funding from the bond is held in DCA program offers 78228A-J, which also feature detailed updates on each bond project.

### Budget Overview (cont)

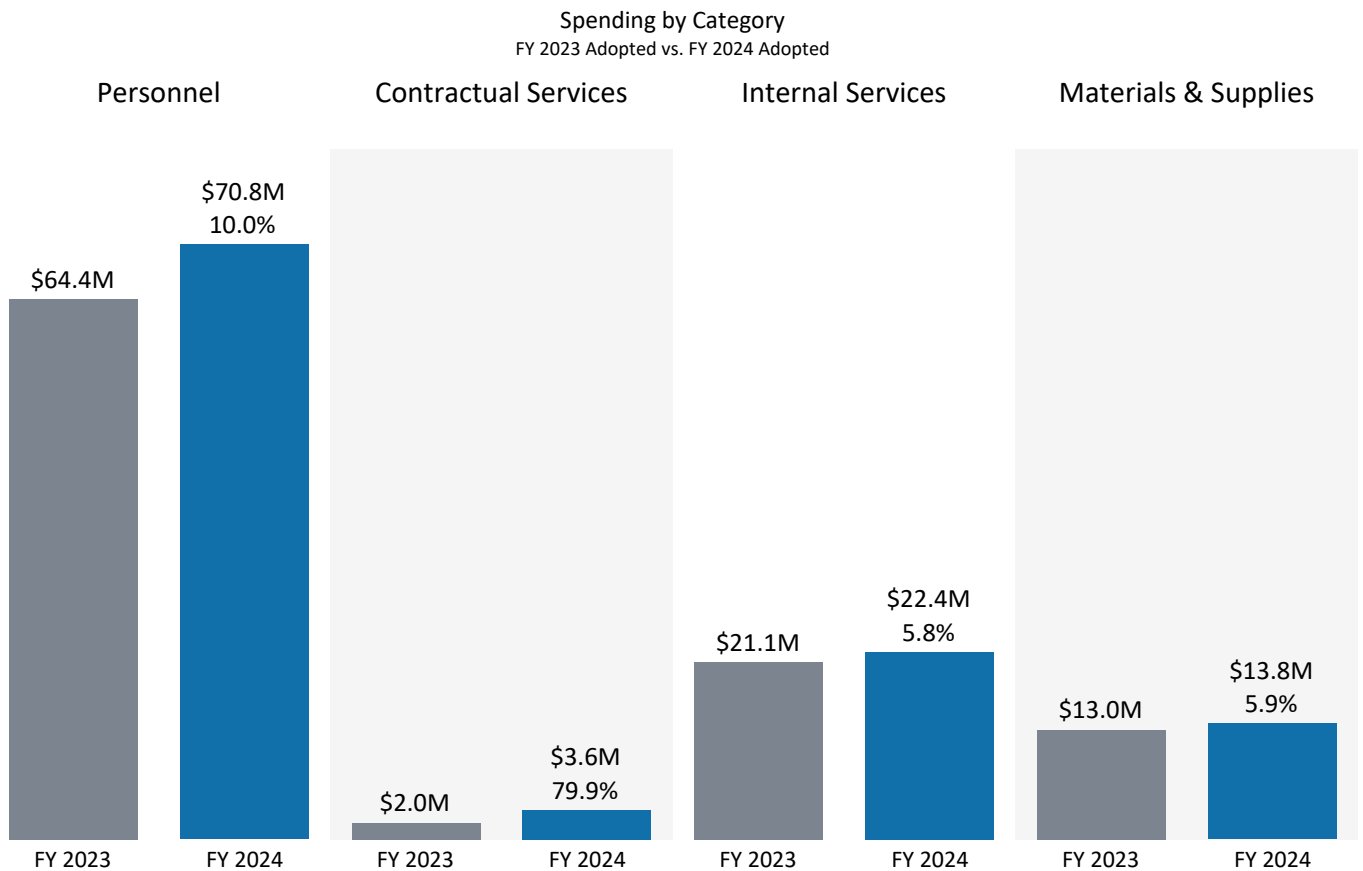
Highlights for FY 2024 include:

- Library Building Bond Administration (80024) \$0 and 6.00 FTE: The budget for the 6.00 FTE is held in the DCA budget under program offer Library Capital Bond Construction (78228A).
- Library Special Projects (80025) is a new program offer that will utilize almost \$1.4 million in one-time resources to help the library navigate temporary space, technology, and other needs that arise as a result of the major bond program, as well as explore pilot projects and programs. The Library District’s Fund Balance grew significantly during the COVID-19 pandemic due to underspending caused by operational disruptions. The Library has established a five-year plan to spend some of this fund balance on discrete projects, which will be budgeted in this program offer.

Budget Trends	FY 2022	FY 2023	FY 2023	FY 2024	Difference
	<u>Actual</u>	<u>Estimate</u>	<u>Budget</u>	<u>Budget</u>	
Staffing FTE	536.58	545.09	544.75	549.00	4.25
Personnel Services	\$51,687,372	\$61,152,866	\$64,418,733	\$70,839,893	\$6,421,160
Contractual Services	1,192,683	1,775,347	1,975,107	3,553,860	1,578,753
Materials & Supplies	12,082,788	13,055,090	13,030,759	13,804,620	773,861
Internal Services	19,671,440	20,967,675	21,117,170	22,350,754	1,233,584
Capital Outlay	<u>170,574</u>	<u>50,000</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>Total Costs</b>	<b>\$84,804,857</b>	<b>\$97,000,978</b>	<b>\$100,541,769</b>	<b>\$110,549,127</b>	<b>\$10,007,358</b>

### Budget Overview (cont)

The chart below provides a breakdown of the budget's expense categories from FY 2023 to FY 2024. Personnel services is the largest component of the Library's budget while contractual services grew the most between FY 2023 and FY 2024.



## Successes and Challenges

The library looks to FY 2024 as a turning point in the evolution of library spaces and services. As operations take their post-pandemic forms across the system with the library's renewed focus on aligning resources and staffing to serve priority communities, we look to the expansion and transformation of library spaces to advance this work.

In FY 2023, the library expanded in-person programming with culturally specific events like Slavic New Year, Lunar New Year, Dia de los niños/Dia de los libros, and more. The library also continued its notable community reading program, Everybody Reads, celebrating its 21st year with a range of programs and activities around *A Tale for the Time Being* by Ruth Ozeki.

In FY 2023, the library made substantial progress toward its bond-related goals and in other areas. Each library construction project requires a vast and complex set of support actions, involving readying the building, storing and redistributing materials, staging furniture, fixtures, and technology, and assigning staff to other duties or locations under the terms of labor agreements.

FY 2023 saw the beginning in earnest of the library's ambitious effort to build, expand, and renovate library spaces across the system. Multnomah County and Library leaders, along with project teams and community members, celebrated a trio of groundbreaking events at the new Operations Center, Holgate Library, and Midland Library. Refresh projects are also set to begin, with Central Library being the first. Other refresh projects will follow at Capitol Hill Library, Gregory Heights Library, and other locations.

Ongoing challenges are present with safety and security at the library and across the community. The severity and frequency of behavioral problems in library spaces continue to be a concern. The library welcomed the addition of Multnomah County's Workplace Security unit and works closely with that group around pressing issues. In the current year, those have included mental health needs, significant incidents including violent and racist behavior, illicit drug use, and other concerns. The library expanded contracted security resources in FY 2023 and continues to address issues and consider solutions in partnership with Workplace Security, Local 88, Multnomah County Health Department, and others.

The library expects to encounter ongoing cost pressures due to rising personnel expenses and conditions of a wider inflationary environment. The library is in a position to navigate these factors, thanks to a stable and dedicated funding stream. In the coming years, the library will continue to plan for and monitor the impact of personnel costs and operational changes as new library spaces come online.

Recruitment and staffing continue to be important priorities for the library. Many library programs have expanded the number of positions with cultural and language Knowledge, Skills, and Abilities designations. This has led to many new recruitments in a much more competitive marketplace for professional talent. To that end, the library will be continuing to support capacity for recruitment in the Human Resources program offer (80017).

## 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. Besides residency, there are no membership requirements; no annual fees; and no restrictions based on identity, age, income, gender, race, or creed. Multnomah County Library is committed to the goals of equity, inclusion, and sustaining a workforce that reflects and engages the community it serves.

In FY 2023, the library hired an equity analyst to expand and enrich equity and inclusion work across the system. Ongoing efforts include training and coaching for managers and working with represented staff to identify and define racial equity culture change and transformational change. The library has a proposed total of 628 budgeted staff members (part-time and full-time) for Fiscal Year 2024. Of those positions, 164 or 26% have Knowledge, Skills, and Abilities designations related to language or culture.

The library is engaging in activities and actions of the Workforce Equity Strategic Plan (WESP), as well as broader transformational actions. The WESP provides a foundation to support staff, management, and senior leadership by educating and shifting practices. Internally, the library has allocated resources to provide opportunities to expand culturally and linguistically diverse staff and teams. In FY 2023, the library started a new group for Staff of Color who are in their first nine months of employment to ease their integration into the library, provide support to and among those attending, and provide a space for their voices to be heard. In addition, the library began a six-session equity learning cohort series for staff and managers.

The library applies the fundamentals of the equity lens in crafting its budget. The library has created resource addition proposal worksheets that score how programs and services advance equity goals or would potentially have a negative impact on those experiencing the greatest barriers.

In FY 2023, the Library Rules Equity Review team—an advisory body that consisted of managers and frontline staff from across the system—completed their review of library rules using an equity lens and made recommendations to support patrons and staff in language clarity, more equitable practices, and actions that focus on prevention and de-escalation rather than discipline. Library leadership incorporated those recommendations into new rules, implemented in FY 2023.

The Library Advisory Board functions as the library's Community Budget Advisory Committee. In preparation for their review of the budget, the committee had full access to the Library Director, Finance and Facilities Director, and Library Budget Analyst to discuss and answer questions about current library trends and the library budget. Work sessions included focuses on library personnel planning and costs, internal service rates for library facilities support from the Department of County Assets, and a ten-year forecast of library revenues and expenditures.

### COVID-19 Impacts

FY 2023 saw continued impacts of the COVID-19 pandemic, including intermittent building closures due to staffing issues and remaining work to restore some pre-pandemic services to previous levels. The library continues to use newer online service models for programs, reference services, tutorials, and one-on-one technology assistance.

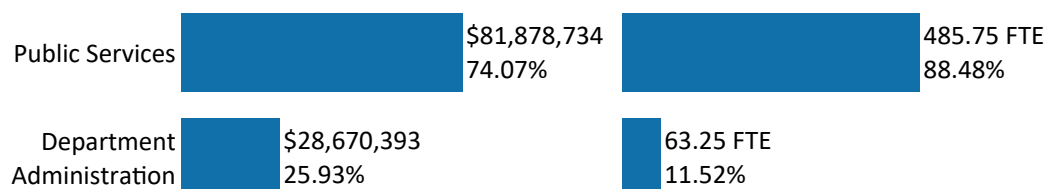
Added services will include two new vehicles to better serve and support community needs, including a tech van, equipped with mobile wi-fi access and designed for wi-fi hotspot and device lending services. The other vehicle is a bus-sized Mobile Library to bring library services to neighborhoods around Multnomah County. Along with space for storytimes and programs, the Mobile Library features bookshelves to browse, wi-fi access, and tech help. The Mobile Library is equipped with computer stations, printers, scanning and faxing, AC, and heat. Library staff will rotate the on-board collection for specific community needs. Both vehicles were funded by the American Rescue Plan Act.

This year the library has continued to develop its role of supporting the community during weather-related emergencies to provide shelter, information, and staff resources in collaboration with the County’s Office of Emergency Management.

Looking forward, the library will continue to evolve and adapt services to changing community needs in light of COVID-19 or other emerging factors. The library looks forward to continuing progress post-COVID by expanding in-person services and programs as new spaces take shape to offer more ways of meeting community needs.

### Budget by Division

Division Name	FY 2024 General Fund	Other Funds	Total Division Cost	Total FTE
Department Administration	\$0	\$28,670,393	\$28,670,393	63.25
Public Services	0	81,878,734	81,878,734	485.75
<b>Total Library</b>	<b>\$0</b>	<b>\$110,549,127</b>	<b>\$110,549,127</b>	<b>549.00</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 Library Director's Office works with elected leaders, stakeholders, residents, and staff to ensure that library services meet the needs of Multnomah County residents; develops policies and procedures to help people use library services; and ensures that the library provides relevant information and exceptional customer service to library users.

The library director serves as the library's budget officer in the annual public budgeting process. Equity and Inclusion leads the library's work to equitably nurture, empower, and lift staff, library users, and the community to their highest potential. Marketing and Communications maintains and evolves the library's public image, brand, social media presence, and informational resources to connect the community to library resources. Library Capital Bond Administration supports public investment in library spaces in collaboration with the Multnomah County Department of County Assets.

IT Services leads development and support for the library's technology strategy, ensuring innovative 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. Business Services manages the library's finance and budget operations; Facilities and Logistics coordinates buildings and grounds maintenance and the distribution of books and materials across the system; and Human Resources provides assistance with all aspects of the employment cycle, coordinates training for staff and library users, and oversees the recruitment and placement of volunteers for all libraries.

### Significant Changes

This division now includes the Library Special Projects (80025) program offer. This program offer is new in FY 2024, and will help improve communication and transparency around planned spending within the Library District. The program funds discrete, non-capital projects that are not considered part of the library's regular operating budget. These projects utilize one-time resources to help the library navigate temporary space, technology, and other needs that arise as a result of the major bond program, as well as explore pilot projects and programs.

New in FY 2024, the Human Resources team is adding a Human Resource Analyst Senior position to help address workload issues, provide additional direct support for managers, and create capacity within the team to focus on equity in hiring and workforce planning more broadly. Additional one-time resources are included in the Marketing and Communications program to temporarily expand design and communication capacity during the year.

### Public Services

Public Services includes 19 neighborhood libraries and the Mobile Library, which are hubs of community engagement, learning, and creativity. Public libraries are welcoming spaces with friendly staff who provide access to books, computers with internet access, free programs, and meeting spaces. People visit Multnomah County Library to access over two million physical and digital materials, attend programs such as storytimes in English, Spanish, Russian, Vietnamese, and Chinese, and access and get help with technology.

Community Information provides support for in-person and virtual programming and reader services. Community Learning provides support for creative learning spaces, summer reading, public training, adult learning, and partnership-based services to support literacy development for children and teens. Community Engagement connects both in-person and virtually with stakeholder groups and partners. Other programs and services include Youth Development, which supports kindergarten readiness, school-age programming, and teen engagement, and works with school districts to improve student success. Mobile and Partner Libraries provides programs and services to older adults, child care providers, and people who are institutionalized or experiencing homelessness.

Integrated Library Services buys, catalogs, digitizes, curates, and processes print and electronic/digital resources. It manages interlibrary loans, ~2,500 periodical subscriptions, more than 120 databases and online resources (such as OverDrive and Hoopla), and supports the movement of library materials.

The Public Services Division also provides project management, data management and analysis, and evaluation design for library projects and programs through the Office of Project Management and Evaluation, and oversees the library's security programming.

### Significant Changes

The library system will experience multiple bond-related closures and reopenings over the next year, affecting many work groups within the Public Services division. Holgate, Midland, North Portland, and Albina libraries will all be closed during much of FY 2024 for major bond renovations, and the new operations center will come online during the next year. Central Library and other library locations will close for part of FY 2024 to accommodate smaller refresh projects managed through the bond program. During closures, staff time will be redirected to support other library services, including outreach, additional capacity at spillover locations, and other temporary services.

A new Community Partnerships Manager position is included in the FY 2024 budget to help program and activate new library spaces. This position will be responsible for developing and nurturing location-based partnerships in library spaces—prioritizing partnerships with communities that have been underserved—as well as establishing library policies that will govern the use of community spaces more broadly.

The Community Information team will also add a new position to improve the library's approach to translation editing, and help ensure patrons receive linguistically and culturally relevant information about library services and resources.

### 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 2024 General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>					
80010	Library Director’s Office	\$0	\$1,471,665	\$1,471,665	6.00
80012	Business Services	0	3,268,522	3,268,522	8.00
80014	Facilities and Logistics	0	5,114,357	5,114,357	10.00
80017	Human Resources	0	3,405,206	3,405,206	16.75
80018	IT Services	0	11,947,939	11,947,939	6.00
80019	Marketing and Communications	0	2,100,293	2,100,293	10.50
80024	Library Building Bond Administration	0	0	0	6.00
80025	Library Special Projects	0	1,362,411	1,362,411	0.00
<b>Public Services</b>					
80001	Central Library	0	13,006,704	13,006,704	87.25
80002	North and Northeast County Libraries	0	8,834,628	8,834,628	66.75
80003	West and South County Libraries	0	8,671,602	8,671,602	59.75
80004	Mid County Libraries	0	7,864,173	7,864,173	61.25
80005	East County Libraries	0	7,449,460	7,449,460	49.75
80006	Youth Development	0	2,471,334	2,471,334	6.75
80007	Community Information	0	3,995,100	3,995,100	26.75
80008	Community Learning	0	4,087,146	4,087,146	23.00
80009	Mobile and Partner Libraries	0	1,469,194	1,469,194	8.75
80020	Integrated Library Services	0	15,325,457	15,325,457	43.25
80022	Public Services Division Management	0	6,473,271	6,473,271	41.50
80023	Community Engagement	0	2,230,665	2,230,665	11.00
<b>Total Library</b>		<b>\$0</b>	<b>\$110,549,127</b>	<b>\$110,549,127</b>	<b>549.00</b>



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$9,071,941	\$0	\$9,434,480
Contractual Services	\$0	\$237,170	\$0	\$238,772
Materials & Supplies	\$0	\$102,727	\$0	\$86,868
Internal Services	\$0	\$3,087,468	\$0	\$3,246,584
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,499,306</b>	<b>\$0</b>	<b>\$13,006,704</b>
<b>Program Total:</b>	<b>\$12,499,306</b>		<b>\$13,006,704</b>	
<b>Program FTE</b>	0.00	87.75	0.00	87.25

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

## Explanation of Revenues

This program generates \$337,755 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80001 Central Library

The library system will experience multiple bond-related closures and reopenings over the next year. During closures, staff time and location-based spending will be reallocated from closed locations to support other library services, including outreach, additional capacity at spillover locations, and other temporary services in the community.

The Mobile Library vehicle is included as part of the Central Library program offer this year. Previously, the Mobile Library vehicle was budgeted as part of the Mobile and Partner Libraries program offer.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$7,055,567	\$0	\$7,639,642
Contractual Services	\$0	\$4,700	\$0	\$2,979
Materials & Supplies	\$0	\$109,762	\$0	\$106,233
Internal Services	\$0	\$1,468,946	\$0	\$1,085,774
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,638,975</b>	<b>\$0</b>	<b>\$8,834,628</b>
<b>Program Total:</b>	<b>\$8,638,975</b>		<b>\$8,834,628</b>	
<b>Program FTE</b>	0.00	65.50	0.00	66.75

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

## Explanation of Revenues

This program generates \$273,500 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80002 North and Northeast County Libraries

The library system will experience multiple bond-related closures and reopenings over the next year. During closures, staff time and location-based spending will be reallocated from closed locations to support other library services, including outreach, additional capacity at spillover locations, and other temporary services in the community.





## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$6,686,331	\$0	\$6,927,094
Contractual Services	\$0	\$8,500	\$0	\$3,047
Materials & Supplies	\$0	\$59,484	\$0	\$77,145
Internal Services	\$0	\$1,560,021	\$0	\$1,664,316
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,314,336</b>	<b>\$0</b>	<b>\$8,671,602</b>
<b>Program Total:</b>	<b>\$8,314,336</b>		<b>\$8,671,602</b>	
<b>Program FTE</b>	0.00	61.00	0.00	59.75

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

## Explanation of Revenues

This program generates \$247,990 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80003 South and Southwest County Libraries

The library system will experience multiple bond-related closures and reopenings over the next year. During closures, staff time and location-based spending will be reallocated from closed locations to support other library services, including outreach, additional capacity at spillover locations, and other temporary services in the community.

**Department:** Library

**Program Contact:** Silvana Santana Gabriell

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

Mid County libraries (Gregory Heights, Holgate, Midland, Woodstock) enact Multnomah County Library values by leading with racial equity and inclusion to create spaces and services for all community members. This region provides culturally relevant services to African American, Indigenous, Vietnamese, Chinese, Russian, and Spanish-speaking library users, and helps decrease the digital divide throughout Multnomah County.

**Program Description**

**ISSUE:** Public spaces to access information, educational opportunities, technology, and an area to connect with others are systemically lacking in Multnomah County. There are substantial limitations for no-charge, culturally specific community hubs that provide access to language learning, early literacy and learning, technology support, and more.

**PROGRAM GOAL:** Mid 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, library staff prioritize services such as tech access, 1:1 tech help, job search help, training and resources, literacy resources, and classes for youth and adults. Gregory Heights Library will be refreshed through the Capital Bond project to create more space for the community, support efficiency through Automated Materials Handling, and add new furniture and layouts to support a variety of needs.

**PROGRAM ACTIVITY:** Reopening libraries after COVID-19 closures has focused on strategies to best serve marginalized communities and advance racial equity. Reopening decisions were informed using a community needs assessment and the prioritization of services based on identified needs: technology access and assistance, collection access, craft and educational kits, information access, library materials pick-up, and dedicated hours for immunosuppressed patrons. The result was expanding in-person services while continuing to support patrons through virtual programs and services. Library services were prioritized to serve those from underserved communities and provide a cultural- and/or language-specific lens. This included early literacy programs, virtual and in-person classes, and tech training. Youth ages 0-18 received free summer lunches at the Midland Library.

**RACIAL EQUITY ADVANCEMENT:** All library locations are actively engaging in equity work. An equity assessment was distributed to all location staff in April 2022; based on results, region-specific equity plans were developed and are in implementation. "Pulse checks" will occur every six months to determine progress, with plans revised as needed.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of library visits	393,051	370,000	330,000	150,000
Outcome	% of library users who found books and items they wanted	92%	90%	93%	93%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$6,767,916	\$0	\$7,015,074
Contractual Services	\$0	\$4,500	\$0	\$2,915
Materials & Supplies	\$0	\$68,957	\$0	\$73,943
Internal Services	\$0	\$1,461,587	\$0	\$772,241
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,302,960</b>	<b>\$0</b>	<b>\$7,864,173</b>
<b>Program Total:</b>	<b>\$8,302,960</b>		<b>\$7,864,173</b>	
<b>Program FTE</b>	0.00	61.25	0.00	61.25

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

## Explanation of Revenues

This program generates \$251,139 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80004 Mid County Libraries

The library system will experience multiple bond-related closures and reopenings over the next year. During closures, staff time and location-based spending will be reallocated from closed locations to support other library services, including outreach, additional capacity at spillover locations, and other temporary services in the community.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$5,645,959	\$0	\$5,977,757
Contractual Services	\$0	\$3,900	\$0	\$2,382
Materials & Supplies	\$0	\$72,262	\$0	\$100,659
Internal Services	\$0	\$1,258,673	\$0	\$1,368,662
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,980,794</b>	<b>\$0</b>	<b>\$7,449,460</b>
<b>Program Total:</b>	<b>\$6,980,794</b>		<b>\$7,449,460</b>	
<b>Program FTE</b>	0.00	49.50	0.00	49.75

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

## Explanation of Revenues

This program generates \$214,004 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80005 East County Libraries

The library system will experience multiple bond-related closures and reopenings over the next year. During closures, staff time and location-based spending will be reallocated from closed locations to support other library services, including outreach, additional capacity at spillover locations, and other temporary services in the community.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$946,224	\$0	\$1,012,237
Contractual Services	\$0	\$34,000	\$0	\$1,288,500
Materials & Supplies	\$0	\$86,847	\$0	\$124,566
Internal Services	\$0	\$43,734	\$0	\$46,031
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,110,805</b>	<b>\$0</b>	<b>\$2,471,334</b>
<b>Program Total:</b>	<b>\$1,110,805</b>		<b>\$2,471,334</b>	
<b>Program FTE</b>	0.00	6.75	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

This program generates \$36,238 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

Last Year this program was: FY 2023: 80006 Youth Development





## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$3,165,546	\$0	\$3,460,961
Contractual Services	\$0	\$276,000	\$0	\$276,475
Materials & Supplies	\$0	\$136,398	\$0	\$84,914
Internal Services	\$0	\$138,338	\$0	\$172,750
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,716,282</b>	<b>\$0</b>	<b>\$3,995,100</b>
<b>Program Total:</b>	<b>\$3,716,282</b>		<b>\$3,995,100</b>	
<b>Program FTE</b>	0.00	25.75	0.00	26.75

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

## Explanation of Revenues

This program generates \$123,902 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80007 Community Information

The Community Information program will add a new Translation Editor position to improve the library's approach to translation editing, and help ensure patrons receive linguistically and culturally relevant information about library services and resources.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$3,126,528	\$0	\$3,370,412
Contractual Services	\$0	\$76,250	\$0	\$100,500
Materials & Supplies	\$0	\$539,041	\$0	\$476,536
Internal Services	\$0	\$125,996	\$0	\$139,698
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,867,815</b>	<b>\$0</b>	<b>\$4,087,146</b>
<b>Program Total:</b>	<b>\$3,867,815</b>		<b>\$4,087,146</b>	
<b>Program FTE</b>	0.00	22.75	0.00	23.00

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

## Explanation of Revenues

This program generates \$120,661 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

Last Year this program was: FY 2023: 80008 Community Learning



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,194,118	\$0	\$1,201,059
Contractual Services	\$0	\$737	\$0	\$0
Materials & Supplies	\$0	\$188,202	\$0	\$211,283
Internal Services	\$0	\$52,717	\$0	\$56,852
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,435,774</b>	<b>\$0</b>	<b>\$1,469,194</b>
<b>Program Total:</b>	<b>\$1,435,774</b>		<b>\$1,469,194</b>	
<b>Program FTE</b>	0.00	9.75	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

This program generates \$42,998 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80009 Mobile and Partner Libraries

In prior years, the library's Mobile Library vehicle was budgeted as part of this program offer. As of this year, the Mobile Library vehicle is included as part of the Central Library program offer.



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,160,797	\$0	\$1,252,000
Contractual Services	\$0	\$77,500	\$0	\$91,500
Materials & Supplies	\$0	\$68,628	\$0	\$63,402
Internal Services	\$0	\$58,663	\$0	\$64,763
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,365,588</b>	<b>\$0</b>	<b>\$1,471,665</b>
<b>Program Total:</b>	<b>\$1,365,588</b>		<b>\$1,471,665</b>	
<b>Program FTE</b>	0.00	6.00	0.00	6.00

Program Revenues				
Intergovernmental	\$0	\$100,306,769	\$0	\$109,151,716
Other / Miscellaneous	\$0	\$35,000	\$0	\$35,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$100,341,769</b>	<b>\$0</b>	<b>\$109,186,716</b>

## Explanation of Revenues

This program generates \$44,822 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

Last Year this program was: FY 2023: 80010 Library Director's Office





## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,422,858	\$0	\$3,009,085
Contractual Services	\$0	\$14,200	\$0	\$9,700
Materials & Supplies	\$0	\$86,459	\$0	\$102,420
Internal Services	\$0	\$84,932	\$0	\$147,317
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,608,449</b>	<b>\$0</b>	<b>\$3,268,522</b>
<b>Program Total:</b>	<b>\$1,608,449</b>		<b>\$3,268,522</b>	
<b>Program FTE</b>	0.00	7.75	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

This program generates \$107,725 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80012 Business Services

The Business Service program offer includes the estimated department-wide cost for a one-time retention bonus in FY 2024, per the Local 88 union contract.

**Department:** Library

**Program Contact:** Alene Davis

**Program Offer Type:** Support

**Program Offer Stage:** Adopted

**Related Programs:** 80025

**Program Characteristics:**
**Executive Summary**

Facilities and Logistics prioritizes diversity, equity, and inclusion to ensure that library buildings provide access for all and create safe and inclusive places for learning and reading. This program invests in quality buildings to reduce long-term operational costs and provide maximum flexibility for the future, allowing programs to deliver high-impact services to all patrons. In addition to managing more than 20 Library District buildings, Facilities and Logistics oversees the library's central stores, fleet, and the movement of materials and supplies between locations, supporting all library programs in successfully achieving their goals.

**Program Description**

**ISSUE:** Because the Library District owns the building assets for the Multnomah County Library, the library holds ultimate accountability for the state of its buildings.

**PROGRAM GOAL:** Facilities and Logistics ensures the upkeep and utilization of the library's long-term assets meet the library's mission and vision, both now and into the future.

**PROGRAM ACTIVITY:** The Facilities team provides oversight for repair and maintenance activities for more than 20 library locations. This includes coordinating with County staff, telecommunications, contractors, and vendors. It is also responsible for the development of the Library District's five-year plan, and contributes to and approves the Department of County Asset's five-year Capital Improvement Plan for library buildings. It provides stakeholder-level input into criteria for projects, including new construction and major renovation. It serves all library staff and patrons as experts on ADA-compliant building access and ergonomics, and provides support for secure building access. The Logistics team oversees deliveries that move materials between locations, enabling quick access to library materials throughout the county. The program operates daily, delivering to approximately 40 service points each weekday. Delivery includes all library books and materials, interoffice mail, U.S. mail, library supplies, and bank deposits. The team provides support to all library fleet vehicles to coordinate service, interface with the County fleet, and oversee vehicle replacement. It also manages central supply stores on behalf of the library system. This program manages risk and safety for the library along with the Security program, and contributes to security policy development and implementation.

**RACIAL EQUITY ADVANCEMENT:** Facilities and Logistics directly supports diversity, equity, and inclusion by budgeting to upgrade facilities to better meet universal design standards—in addition to ADA requirements—to support equitable access for all, with a prioritized focus on underserved communities. This program also promotes design justice, including trauma-informed design, sustainability, pandemic resiliency, connection to nature, and workforce equity within facilities projects.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Crates of books, mail, and supplies moved annually	172,769	200,000	186,800	140,000
Outcome	% of patrons who agree library spaces are safe and welcoming	94%	90%	92%	90%

**Performance Measures Descriptions**

Performance measure "Library manager satisfaction with the delivery system" was discontinued in FY 2024. The annual survey that garnered this data point is being revised.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,195,371	\$0	\$1,334,082
Contractual Services	\$0	\$1,200	\$0	\$2,000
Materials & Supplies	\$0	\$51,742	\$0	\$51,232
Internal Services	\$0	\$2,750,702	\$0	\$3,727,043
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,999,015</b>	<b>\$0</b>	<b>\$5,114,357</b>
<b>Program Total:</b>	<b>\$3,999,015</b>		<b>\$5,114,357</b>	
<b>Program FTE</b>	0.00	10.00	0.00	10.00

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

## Explanation of Revenues

This program generates \$47,760 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

Last Year this program was: FY 2023: 80014 Facilities

**Department:** Library **Program Contact:** Johnette Easter  
**Program Offer Type:** Administration **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

Human Resources promotes resource management of highly qualified, diverse staff throughout the employment life cycle, including recruiting, hiring, and retaining. The program also includes Learning and Organizational Development, which focuses on staff training and development, as well as the library's Volunteer Services program.

### Program Description

**ISSUE:** Library Human Resources (HR) leads the recruitment, retention, and development of the library workforce that allows the library to fulfill its mission and provide service in accordance with library priorities.

**PROGRAM GOAL:** HR manages staff through the employment life cycle to recruit and retain highly qualified, diverse applicants to ensure a highly functioning workforce that serves the changing needs of Multnomah County residents. It applies an equity lens on a wide range of employee and labor relations issues.

**PROGRAM ACTIVITY:** In addition to consulting with managers and employees across workforce topics—including performance management—HR partners with the County's Central Human Resources and Labor Relations to develop initiatives and ensure the union contract and personnel rules are enforced appropriately. This program includes Learning and Organizational Development (L+OD), which coordinates training and supports organizational growth through targeted development programs, workgroup planning, and team-building. L+OD also partners with County HR, and helps initiate and lead high-impact, cross-functional projects by providing change management and effectiveness strategies. The HR program also includes Volunteer Services. Volunteer Services oversees the entire life cycle and support of volunteers, including placement, policies, and recognition. Library volunteers reflect the racial and ethnic diversity of Multnomah County, and Volunteer Services recently added a position specifically focused on creating equitable and accessible volunteer opportunities. Volunteers range from elementary school students to octogenarians and bring an array of skills, abilities, and life experiences to support the library.

**RACIAL EQUITY ADVANCEMENT:** HR continues to support the library's focus on diversity, equity, and inclusion by developing new tools and training to meet the library's Workforce Equity Strategic Plan and department objectives. The program will also continue to recruit and hire qualified diverse applicants. The program will work with the library's equity team to ensure development and change management activities are viewed through an equity lens.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Hours contributed by volunteers	5,000	6,000	16,000	9,000
Outcome	% of library staff who agree that they can make a difference by working here	80%	87%	80%	80%
Outcome	% of incoming staff participating in New Employee Orientation equity training	95%	95%	95%	95%
Outcome	% of library staff who agree that they receive sufficient training and education to do their jobs effectively	71%	84%	71%	71%

### Performance Measures Descriptions

The FY 2023 output estimate reflects the return of in-person Summer Reading volunteers. The anticipated drop in the FY 2024 output offer is due to pausing materials movement volunteers systemwide while Central Library is closed, as well as a reduction in Summer Reading volunteers while several libraries are closed across the system.

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,605,051	\$0	\$2,848,961
Contractual Services	\$0	\$48,250	\$0	\$65,000
Materials & Supplies	\$0	\$329,291	\$0	\$371,361
Internal Services	\$0	\$109,250	\$0	\$119,884
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,091,842</b>	<b>\$0</b>	<b>\$3,405,206</b>
<b>Program Total:</b>	<b>\$3,091,842</b>		<b>\$3,405,206</b>	
<b>Program FTE</b>	0.00	15.75	0.00	16.75

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

## Explanation of Revenues

This program generates \$101,992 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80017 Human Resources

This program offer includes resources for an additional Human Resources Analyst Senior to support recruiting and address workload constraints within the library's Human Resources team.



## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,121,819	\$0	\$1,215,899
Contractual Services	\$0	\$236,000	\$0	\$638,090
Materials & Supplies	\$0	\$1,079,460	\$0	\$1,728,396
Internal Services	\$0	\$8,461,111	\$0	\$8,365,554
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,898,390</b>	<b>\$0</b>	<b>\$11,947,939</b>
<b>Program Total:</b>	<b>\$10,898,390</b>		<b>\$11,947,939</b>	
<b>Program FTE</b>	0.00	6.00	0.00	6.00

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

## Explanation of Revenues

This program generates \$43,529 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80018 IT Services

This program offer includes additional in-target spending for technology support, including Automated Materials Handling and audiovisual needs.





## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,481,007	\$0	\$1,742,577
Contractual Services	\$0	\$157,000	\$0	\$123,000
Materials & Supplies	\$0	\$164,552	\$0	\$166,726
Internal Services	\$0	\$57,819	\$0	\$67,990
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,860,378</b>	<b>\$0</b>	<b>\$2,100,293</b>
<b>Program Total:</b>	<b>\$1,860,378</b>		<b>\$2,100,293</b>	
<b>Program FTE</b>	0.00	10.50	0.00	10.50

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

## Explanation of Revenues

This program generates \$62,384 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80019 Marketing and Communication

This program offer includes resources for a limited duration marketing position to provide additional communications capacity through bond-related closures and reopenings.

**Department:** Library  
**Program Offer Type:** Support  
**Related Programs:** 80025

**Program Contact:** Dave Ratliff  
**Program Offer Stage:** Adopted

**Program Characteristics:**

**Executive Summary**

Integrated Library Services (INTS) provides equitable access to diverse, dynamic, and relevant collections of physical books and digital information for all ages. This program honors the lived experience of all community members and the languages they speak. This informs the way that INTS selects, acquires, catalogs, processes, and distributes library materials. INTS also manages technical tasks and policies that allow patrons to use materials.

**Program Description**

**ISSUE:** Public access to information, educational opportunities, technology, and connection with others are systemically lacking in Multnomah County. There are substantial limitations for no-charge, culturally specific community hubs that provide access to language learning, early literacy, technology support, and more.

**PROGRAM GOAL:** Integrated Library Services ensures that the books, media, and electronic resources that support these needs are available to the public.

**PROGRAM ACTIVITY:** INTS staff manage and coordinate all aspects of provision and access to the library's collection of materials. This includes selecting, purchasing, and digitizing materials, maintaining an accurate catalog of materials, processing physical items for library use, evaluating collection usage and diversity, implementing equitable circulation policies, coordinating the timely distribution of materials throughout the system, mailing holds and outreach items directly to patrons, coordinating borrowing with other libraries, and maintaining the technical systems that support this work. The library collects materials in a variety of formats to accommodate patrons with visual or other disabilities. This program also works to reduce barriers to access through policy changes and direct services, such as mailing holds to patrons who are unable to access them at a library location. Library users provide input on collection decisions by suggesting items for the library to purchase or requesting materials through interlibrary loan.

**RACIAL EQUITY ADVANCEMENT:** This program serves Multnomah County residents of all ages, ethnicities, and economic backgrounds by reducing barriers and providing a wide range of materials. The collection includes materials in English and five other primary languages (Spanish, Chinese, Vietnamese, Russian, and Somali), as well as a smaller collection of other world language collections, including Ukrainian. The INTS team includes speakers of multiple languages from multiple cultures, specifically tasked with working for and with those communities—as well as our employees with specific cultural and language knowledge, skills, and abilities—to create collections that meet community needs.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of items in the collection, physical and digital	2,792,427	2,550,000	2,500,000	2,500,000
Outcome	% of library users who found books and items they wanted	93%	90%	93%	93%
Efficiency	Turnover rate, physical and digital content	6.0	5.0	6.4	6.0
Output	% of the library collection that supports diversity, equity, and inclusion	24%	21%	21%	25%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$4,906,325	\$0	\$5,373,615
Contractual Services	\$0	\$534,800	\$0	\$534,600
Materials & Supplies	\$0	\$9,576,847	\$0	\$9,201,198
Internal Services	\$0	\$192,466	\$0	\$216,044
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$15,210,438</b>	<b>\$0</b>	<b>\$15,325,457</b>
<b>Program Total:</b>	<b>\$15,210,438</b>		<b>\$15,325,457</b>	
<b>Program FTE</b>	0.00	42.25	0.00	43.25

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

## Explanation of Revenues

This program generates \$192,376 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80020 Integrated Library Services

The Integrated Library Services team will begin utilizing Automated Materials Handling systems in the next fiscal year, as well as relocating from interim spaces to the new, permanent operations center funded through the Library Capital Bond Program.

**Department:** Library

**Program Contact:** Annie Lewis

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

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

### Executive Summary

Public Services Division Management (PSDM) provides direction for the implementation of library values: free access for all; a trusted guide for learning; the leading advocate for reading; and a champion for equity and inclusion. PSDM is responsible for leadership and accountability for the library's direct service to the people of Multnomah County, and manages Security, the Office of Project Management and Evaluation (OPME), and Policy.

### Program Description

**ISSUE:** Public Services Division Management provides direction and oversight to ensure Public Services is working together to focus on patron outcomes, deconstructing white supremacy structures in library systems and services, creating operational efficiencies, supporting emergency response, and centering racial equity in all aspects of service.

**PROGRAM GOAL:** PSDM's goals are to create and maintain cohesive organizational structures to enact the library's mission, and to advance countywide principles identified in the Workforce Equity Strategic Plan. It also aims to create a responsive administration to improve patron outcomes. This will all be accomplished while ensuring compliance and adherence to national and state library standards.

**PROGRAM ACTIVITY:** PSDM plans services, develops and evaluates programs and staff, and administers the budget for Location Services, Community Services, Integrated Library Services (INTS), OPME, and Policy. Public Services teams in Location Services, Community Services, and INTS partner with community-based organizations, County departments, and other agencies in Multnomah County to provide services in library buildings, as well as direct service through outreach programs. In FY 2024, Public Services will strengthen resources for partnership development to prepare for the activation of new library spaces developed through the Capital Bond project. Additionally, Multnomah County Library (MCL) will continue to implement planned changes to security and public service staffing.

**RACIAL EQUITY ADVANCEMENT:** PSDM provides leadership and accountability to ensure MCL advances racial equity through the use of tools, systems, and expectations for Public Services, security, and OPME resources. For system-level projects, OPME uses a prioritization tool that weights racial equity as the top priority. MCL also continues to contract with Coalition of Communities of Color to conduct a data equity evaluation, which will allow MCL to examine current data strategies; connect with key stakeholders to co-construct a path towards more equitable data practices; and provide actionable recommendations to ensure equity is centered in the collection, analysis, use, sharing, and reporting of data.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Digital material checkouts	5,292,344	5,100,000	5,600,000	5,500,000
Outcome	% of survey respondents who are satisfied with library staff assistance	99%	N/A	99%	98%
Outcome	% of library employee survey respondents who agree they are able to offer the best quality service	72%	N/A	72%	72%

### Performance Measures Descriptions

Two performance measures were retired in order to include measures that better reflect the entire division. Retired measures include outreach program attendance and library user satisfaction with Book-a-Librarian service. New outcome measures reflect survey feedback from both library users and library employees.

## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$5,181,485	\$0	\$6,154,602
Contractual Services	\$0	\$33,400	\$0	\$41,400
Materials & Supplies	\$0	\$25,840	\$0	\$38,668
Internal Services	\$0	\$137,348	\$0	\$238,601
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,378,073</b>	<b>\$0</b>	<b>\$6,473,271</b>
<b>Program Total:</b>	<b>\$5,378,073</b>		<b>\$6,473,271</b>	
<b>Program FTE</b>	0.00	39.50	0.00	41.50

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

## Explanation of Revenues

This program generates \$220,335 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

**Last Year this program was:** FY 2023: 80022 Public Services Division Management

This program offer includes a new position, Community Partnerships Manager, which will focus on developing and managing location-based community partnerships in new library spaces.

New this fiscal year, the library's spending on security is now centralized within the Public Services Division Management program offer. This change includes the reassignment of multiple positions from individual library locations.



## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,683,890	\$0	\$1,870,356
Contractual Services	\$0	\$27,000	\$0	\$13,000
Materials & Supplies	\$0	\$284,260	\$0	\$274,070
Internal Services	\$0	\$67,399	\$0	\$73,239
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,062,549</b>	<b>\$0</b>	<b>\$2,230,665</b>
<b>Program Total:</b>	<b>\$2,062,549</b>		<b>\$2,230,665</b>	
<b>Program FTE</b>	0.00	11.00	0.00	11.00

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

## Explanation of Revenues

This program generates \$66,959 in indirect revenues.

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (99.97%) and resources from the County's Library Fund (0.03%). It represents a prorated share of property taxes (97.5%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (1.3%), and District Fund balance utilized for one-time-only retention bonuses (1.2%).

## Significant Program Changes

Last Year this program was: FY 2023: 80023 Community Engagement





## Legal / Contractual Obligation

With the passage of the Library Capital Construction Bond (Measure 26-211), the voters of Multnomah County have approved the funding for all of the projects that are laid out as part of the bond plan.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$0</b>	
<b>Program FTE</b>	0.00	6.00	0.00	6.00

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

## Explanation of Revenues

Positions in this program offer are funded by the Multnomah County Library Capital Construction Fund (2517).

## Significant Program Changes

Last Year this program was: FY 2023: 80024 Library Building Bond Administration



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$0	\$120,000
Materials & Supplies	\$0	\$0	\$0	\$465,000
Internal Services	\$0	\$0	\$0	\$777,411
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,362,411</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,362,411</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,362,411
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,362,411</b>

## Explanation of Revenues

The revenue allocated to this program offer reflects an intergovernmental service reimbursement from the Library District (100%). All revenues allocated to this program offer are one-time-only, sourced from available fund balance in the Library District. Revenues and expenses in this program offer are isolated in a sub-fund within the Library Fund.

## Significant Program Changes

**Last Year this program was:**

This is a new program offer in FY24.

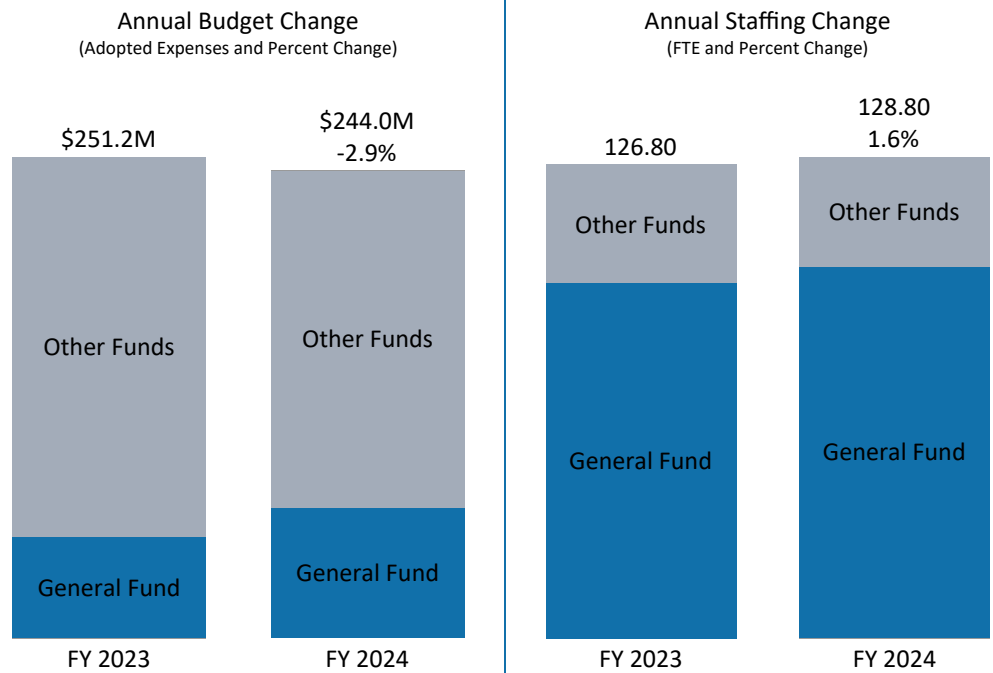
### Department Overview

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 Community Involvement Committee; independent County organizations such as the Local Public Safety Coordinating Council; 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. The Community Involvement Committee, an advisory body to the County, involves the community in County policy and decision-making processes. Several independent County agencies provide advice, oversight, analysis, and advocacy on behalf of the County and the community. 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.

### Budget Overview

Nondepartmental contains County programs, independent County agencies, corporate functions, and payments to other entities that do not belong to County departments. The Nondepartmental FY 2024 Adopted budget is \$244.0 million, a \$7.2 million decrease from the FY 2023 Adopted budget.



The General Fund (including Video Lottery) has increased by \$15.0 million. The General Fund increase includes \$934,200 in new, ongoing funding for:

- Deputy Chief of Staff (10000B) \$240,000
- Ombudsperson – Charter Review (10005B) \$257,800
- WESP Planning and Engagement (10017C) \$240,000
- Resolution & Development Coordinator (10040B) \$196,400

Additionally, the Nondepartmental General Fund includes \$17.7 million in one-time-only funding for:

- Countywide Visioning Renewal Process (10000C) \$250,000
- Public Records Software (10007B) \$200,000
- Transforming Justice Implementation (10009C) \$150,000
- Diversion Planning & Development Pilot (10009E) \$122,000
- OCI - Policy & Training Coordinator (10010B) \$1,376,842
- Logistics, Warehouse, & Vehicles (10012B/C) \$400,000
- Food Access Focus (10018B) \$32,200
- Tree Memorial (10018C)

### Budget Overview (cont.)

- Resilience Hub East County (10018D) \$250,000
- Courthouse Security (10021B) \$191,100
- Employee Retention Incentive Payments - Year 2 (10030) \$14,303,913
- Elected Official Transition (10031) \$20,000
- Center for Tribal Nations (10032) \$250,000

Programs funded with one-time-only Other Funds total \$1.6 million. This amount is all Federal aid through the American Rescue Plan (ARP) as follows:

- Sustainability - Wood Stove Replacement Pilot (10095) \$500,000
- Sustainability - Electric School Buses (10096) \$500,000
- Youth Connect (10097) \$600,000

A full list of new programs or programs funded as one-time-only can be found in the Budget Director’s Message.

The increase in personnel services mostly relates to the employee retention payments (10030). In FY 2024, these payments are budgeted at \$14.3 million in one-time-only General Fund for all eligible employees, with the exception of Library employees that are covered by Library District funding in Library program offers. The decrease in contractual services primarily relates to a decrease in the Oregon Public Employees Retirement System (PERS) Bond Sinking Fund (10028). In FY 2023, The County established a new PERS side account (\$25 million) with Oregon PERS to help mitigate rising PERS costs by providing PERS rate relief. Because the FY 2023 side account was a one-time-only expenditure, contractual services return to typical service levels in FY 2024.

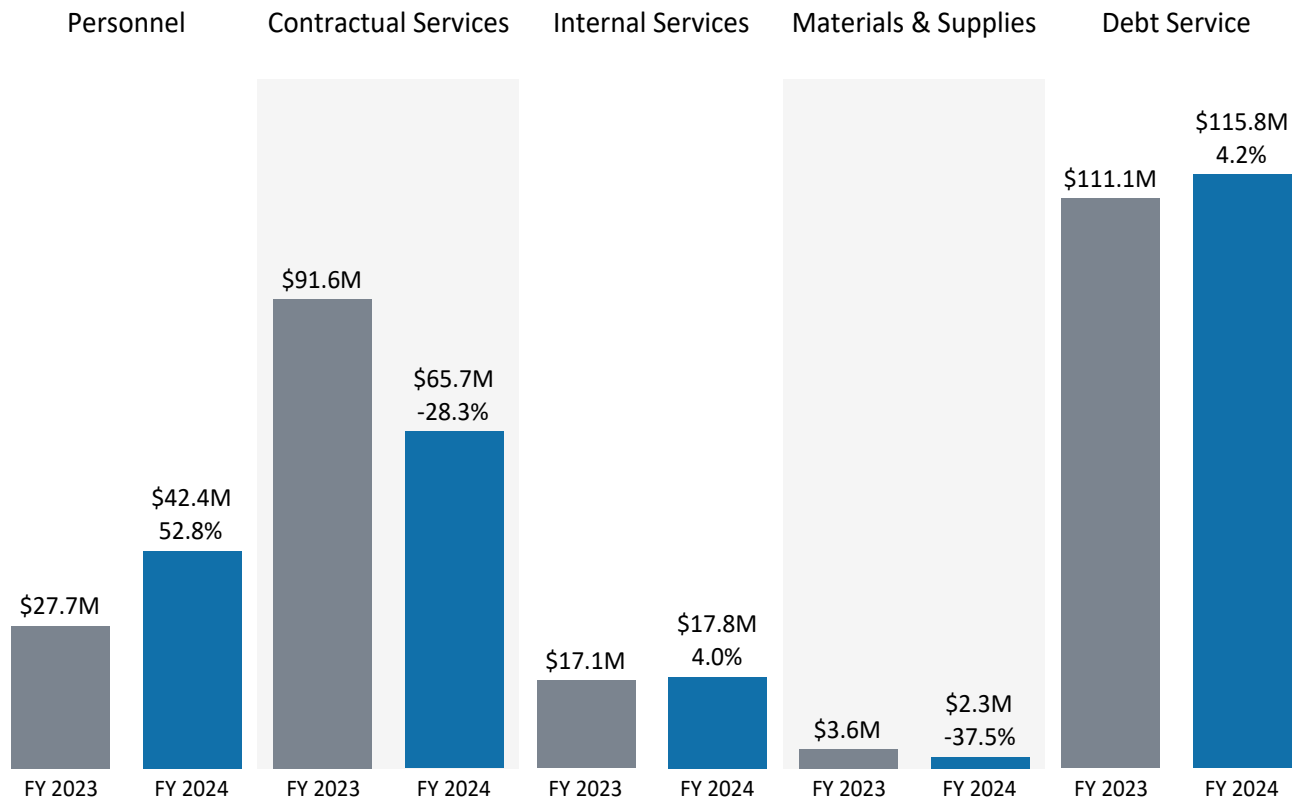
Budget Trends	FY 2022	FY 2023	FY 2023	FY 2024	Difference
	<u>Actual</u>	<u>Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	117.63	126.30	126.80	128.80	2.00
Personnel Services	\$28,361,072	\$44,388,829	\$27,730,463	\$42,365,858	\$14,635,395
Contractual Services	60,957,900	89,742,208	91,563,870	65,657,181	(25,906,689)
Materials & Supplies	1,947,012	3,556,855	3,628,514	2,268,171	(1,360,343)
Internal Services	15,994,538	16,805,146	17,145,108	17,833,547	688,439
Debt Service	<u>105,736,217</u>	<u>108,894,460</u>	<u>111,116,796</u>	<u>115,837,045</u>	<u>4,720,249</u>
<b>Total Costs</b>	<b>\$212,996,739</b>	<b>\$263,387,498</b>	<b>\$251,184,751</b>	<b>\$243,961,802</b>	<b>(\$7,222,949)</b>

\*Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies, and unappropriated balances.

### Budget Overview (cont.)

The chart below provides a breakdown of the budget’s expense categories from FY 2023 to FY 2024. Debt Service is the largest component of the Nondepartmental budget which includes the Capital Debt Retirement Fund at \$30.7 million (10026), Library GO Bond at \$53.8 million (10027), and PERS Pension Bond Sinking Fund at \$31.3 million (10028). Personnel grew the most between FY 2023 and FY 2024 primarily due to the employee retention payments budgeted at \$14.3 million one-time-only (10030).

This chart does not include cash transfers, contingencies or unappropriated balances.



### Successes

The **Auditor's Office's** mission is to ensure that County government is efficient, effective, equitable, transparent, and fully accountable to all who live in our county. To support this mission in fiscal year 2023, the office worked on audits of the Joint Office of Homeless Services, the Library, the County's budget process, and contract monitoring. The office issued an audit report on COVID-19 contact tracing, reports on tips to the Good Government Hotline, a report on results from the County's ethical culture survey, and reports on the status of audit recommendations. This fiscal year, voters approved amendments to the County Charter that ensure the Auditor's access to information and established an ombudsperson in the Auditor's Office. Allocations to the Auditor for fiscal year 2023 enabled the office to add four staff auditors, hire the ombudsperson, and procure an audit management system. Throughout the year, the Auditor concentrated on three Workforce Equity Strategic Plan focus areas and on enhancing the office's trauma-informed practices.

The **Communications Office** significantly improved the accessibility and reach of Multnomah County's regular and crisis communications through a 225% increase in videos produced over pre-pandemic levels. This includes multiple videos in Spanish, Cantonese, Mandarin, Russian, Ukrainian, Vietnamese and Arabic that featured culturally specific spokespeople and content. Staff also produced District 4 Commissioner Lori Stegmann's anti-racism video series featuring all Multnomah County elected officials in ongoing public service announcements rooted in their individual heritages and histories.

We also worked with the Chair's Office and the County departments to directly reach residents with more than 600,000 direct mailers on Preschool for All and property tax notifications and shelter sitings. We introduced the new County Chair, District 3 Commissioner and department directors to the community through website development and media events. We drafted all press releases, accompanying videos, social media, the Elections newsletter and conducted media interviews across two election cycles. We convened 30 housing and homeless service providers to begin developing a shared repository of trauma-informed communication assets and tools. Staff led the crisis communications for the region through six severe weather events, with in-person communication support and media management during record snow and the longest heat wave in Oregon history. We produced more than 300 graphics including more than 70 in languages other than English as well as writing and designing the 10th Domicile Unknown report. We created more than 63,000 photographs to document County services, staff and clients and provide for the media and public, including images featured in free online courses by Harvard University's Center for the Environment. We improved connections between the County's nearly 6,000 employees and managers through 50 Wednesday Wire editions and new, focused messaging around severe weather shelter recruiting.



### Successes (cont.)

The **Office of County Attorney** is the County's legal resource center. We support County leaders to address the ever changing needs of Multnomah County's most vulnerable people. The Office's most visible work is defending legal claims brought in state and federal court. We successfully defended and resolved cases involving COVID-19 emergency measures, civil rights, employment, Habeas Corpus, gun permits, and a class action wage and hour claim.

The Office actively supported the deployment of several voter approved charter amendments, including rank choice voting and the implementation of candidate contribution limits and enforcement.

We successfully negotiated and drafted the engineering, design and construction contracts for major capital projects including the Earthquake Ready Burnside Bridge. In addition, the Office participated in the County's multifaceted response to ongoing housing crises and researched, negotiated and drafted nearly 40 commercial leases. The office facilitated the County's negotiation and execution of the Regional Workforce Equity Agreement which are among the first of their kind with respect to promotion of social goals and best in class with respect to Owner/Union relations.

In support of the County's Safety, Trust and Belonging, the Office updated a suite of internal training included workplace harassment, ADA/FMLA, public records, and ethics reporting. Additionally, The County's Privacy Program provided legal support for hundreds reported privacy and security incidents, breaches and complaints, and provided county-wide training on privacy laws.

The **Office of Diversity and Equity (ODE)** focused on initiatives and leadership around civil rights, disability and LGBTQ+ equity, gender inclusion, and employee accommodations, with continued intention around data, research and evaluation. In addition to those ongoing initiatives, there was the delivery of the 2020-21 Workforce Equity Strategic Plan Annual Report that reflects the County's progress in implementing the plan. The report meets our commitment to identifying findings, recommendations, and updates while recognizing our accomplishments to date. There was also emphasis on resource group governance, supporting a thriving Multnomah Youth Commission and continuance of building equity into the budget process using the Equity and Empowerment Lens. All that ODE accomplished this fiscal year was done through important partnerships, intentional collaboration and continued education.

### Successes (cont.)

The **Local Public Safety Coordinating Council** facilitated the completion of the Transforming Justice Vision and Core Strategies in Summer 2022. This work leads with race by prioritizing non justice interventions for BIPOC communities while decreasing the criminal system footprint and growing health and human service responses. Since then, the Transforming Justice project has been diligently documenting work already underway and strategizing ways to launch into successful implementation with government and community partners. LPSCC also leads implementation of the MacArthur Foundation's Safety and Justice Challenge grant, which launches pretrial system changes starting on June 1, 2023. The Justice Fellowship, another MacArthur funded project, will provide civic leadership training for community members interested in participating in policy conversations. Lastly, LPSCC staff continue to manage local Justice Reinvestment program operations and evaluation and all of the LPSCC subcommittees and ad hoc workgroups needed to ensure quality collaboration among justice partners.

The **Office of Emergency Management** activated 10 times in the past 12 months including the two largest shelter operations as a result of Severe Weather ever. The largest event was a result of the December 2022 snow event and the second as a result of the February 2023 snow event. In total, the office coordinated the opening of 49 shelters over 12 months for 153 site days, delivered over 20,000 meals and coordinated 6,400 shelter shifts totalling over 40,000 hours. Our COVID-19 activities, while diminishing in the last quarter of FY 2023, resulted in fulfilling over 5,300 resource requests to 1,197 organizations focused on underserved communities.

The Office has been active as it returns to a post COVID-19 posture, delivering several exercises including the two day Cascadia Subduction Zone exercise in June 2023, developing and overseeing numerous After Action Reports (AARs) for our activations and drafting key plans including the Natural Hazard Mitigation Plan (NHMP) and the Community Wildfire Protection Plan (CWPP).

The Office also continues to support other organizations during unforeseen events. This year the Office has stepped in to support Animal Services during a temporary closure as well as the Joint Office of Homeless Services (JOHS) as they stood up a Multi-Agency Coordination Center (MAC) as a result of the Governor's "Oregon All-In" initiative.

The **Office of Government Relations'** work in the Legislature to develop policy to improve the coordination between Local Mental Health Authorities and Behavioral Health Resource Networks, Funding for Earthquake Ready Burnside, Banning the display of donated bodies for profit and Transparency in Community Mental Health Budgeting. The Office continued to advocate at the Federal level securing Congressionally directed funding for the Earthquake Ready Burnside, as well as submitting proposals to fund Cook Plaza and Gun Violence Programing. On boarding of Tribal Advisor and working with Commissioners to build a Tribal Engagement plan.

### Successes (cont.)

The **Office of Sustainability** has continued to put environmental and climate justice at the heart of our work. This year the Office made substantial progress on co-developing, with community based organizations that represent frontline people of color led organizations, a vision for climate justice for Multnomah County. This included hosting a Climate Justice Convening event with community partners, and developing a Climate Justice Framework that will guide the development of a Climate Justice Plan in FY 2024. In addition the Office worked with colleagues in the Health Department and Department of Community Human Services to develop a woodstove exchange program designed to work with low and moderate income households to replace polluting wood stoves with clean and efficient heat pumps that warm and cool homes. This program tackles the single largest source of particulate pollution in the County, wood burning. In addition, the Office of Sustainability continued to work with the City of Gresham on tree planting efforts in low tree canopy neighborhoods in the Rockwood area, planting over 500 trees in the last five years, with over 70 trees planted this year. The Office also championed protections for low income utility ratepayers, pushing for more protective shutoff protections and implementation of discount programs. The Office also launched a climate resilience program with a focus on the development of an East County Resilience Hub. Finally, the Office of Sustainability took the lead in launching the first ever East County resource fair that brought information and resources to hundreds east county residents.

The **Complaints Investigation Unit** is the County's primary centralized point for all inquiries and complaints regarding protected class discrimination. In its third full year, the team, made up of three investigators, a manager, an investigations coordinator and a new position funded this year to coordinate resolution and development, fielded over 100 inquiries and opened 43 investigations into allegations of harassment and discrimination based on race, sex, disability, gender identity and other protected classes. Of these cases screened in for investigation, 48 percent resulted in findings of violation of Multnomah County's personnel rules against harassment and discrimination, while another 14 percent found violations of other applicable personnel rules. The team continues to attend ongoing training on investigative best practices, trauma informed delivery, and alternative dispute resolution options. The Resolutions and Development Coordinator partners closely with Department Human Resources, Organizational Learning, the Office of Diversity and Equity, the Unions, and others across the County to highlight trends in cases and help find ways to prevent them from becoming complaints in the future. This new role has also worked with 50+ employees from each department to identify gaps, maximize resources and clarify roles during investigation as well as working with departments to determine best practices for restoration. In addition, they have established post investigation processes in order to drive resolution and healing solutions after investigations.

### Diversity, Equity, and Inclusion

As we look back and reflect on multiple crises of the past several years, we observe that they represented opportunities for the County to showcase its values and work through the ways it met the community's needs. In light of a global pandemic, the County worked to protect the health and safety of the community through equity-focused approaches to public health strategies that prioritized our BIPOC communities, which were disproportionately impacted by the pandemic, particularly in its early days. We have supported and uplifted solutions designed by and in collaboration with those most affected. We have committed resources to address youth mental health, which has significantly worsened over the past several years. We have also committed historic investments in a countywide response to help shelter, house, and add resources to address the behavioral health needs of people experiencing homelessness. Among those investments is the County's new Housing Multnomah Now program, which aims to serve approximately 545 households. The funding would also create 140 new shelter beds, primarily at Safe Rest Villages. We have implemented a first in the nation Preschool for All program, providing free, high quality, culturally responsive and inclusive programming to 700 young children. Our goal is to increase the number of slots to 1,400 for FY 2024. We are moving forward to renovate and expand our libraries including building a flagship branch in East County. And we have proposed increasing staffing at our animal shelter by over 30%.

Alongside that work, Multnomah County continued to advance the internal Workforce Equity Strategic Plan by meeting performance measures and developing language that supports the County's "Inclusively Leading with Race" approach. In this budget we have included an investment to support the initial Workforce Equity Strategic Plan in FY 2024.

Nondepartmental offices play a significant role in determining and defining the ways that equity is built into programs, processes and policies across Multnomah County. This shows up through the utilization of the Equity and Empowerment Lens, the Office of Diversity and Equity's efforts to increase inclusion and disability access, and through the Office of Community Involvement's leadership around stakeholder engagement, which is a core component of our budget development and adoption process. Amidst responding to and mitigating impacts from climate change including dangerous cold, raging wildfires and toxic smoke, the Office of Sustainability and the Office of Emergency Management have worked to protect public health and reverse climate change. This is accomplished by focusing on those most disproportionately affected and those most vulnerable. In addition, the Local Public Safety Coordinating Council's Transforming Justice initiative continues to create pathways for lasting public safety reform that responds to the community's demand to confront the racial and ethnic disparities that show up at every decision-point in our criminal legal system.

The County's departments and Nondepartmental offices continue to support community led work relating to justice reform and violence prevention. Many partner community based organizations have been forced to dramatically pivot their services throughout the pandemic to meet the emerging needs

### Diversity, Equity, and Inclusion (cont.)

of the culturally specific communities they serve. The Office of Diversity and Equity and the Department of County Management are continuing to support staff in departments as we review these critical partnerships and shift focus to more permanent support, including considerations of pay equity and capacity building.

Multnomah County's FY 2024 budget builds on the work that has been done over the past fiscal year and reflects critical investments that support the ability of Nondepartmental offices to explore and implement policy approaches that improve the County's ability to respond to ongoing and emerging community issues.

# Nondepartmental

fy2024 adopted budget

## 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 2024 General Fund	Other Funds	Total Cost	FTE
10000	Chair's Office	\$2,313,000	\$0	\$2,313,000	9.65
10000B	Deputy Chief of Staff	240,000	0	240,000	1.00
10000C	Countywide Visioning Renewal Process	250,000	0	250,000	0.00
10001	BCC District 1	806,300	0	806,300	4.00
10002	BCC District 2	806,300	0	806,300	4.00
10003	BCC District 3	806,300	0	806,300	4.00
10004	BCC District 4	806,300	0	806,300	4.00
10005A	Auditor's Office	2,788,480	0	2,788,480	13.00
10005B	Ombudsperson - Charter Review	257,800	0	257,800	1.00
10006	Tax Supervising and Conservation Commission	498,828	0	498,828	2.00
10007A	Communications Office	2,709,490	0	2,709,490	14.00
10007B	Public Records Software	200,000	0	200,000	0.00
10008	County Attorney's Office	0	7,885,120	7,885,120	25.00
10009A	Local Public Safety Coordinating Council	862,384	1,081,000	1,943,384	2.00
10009B	HB3194 Justice Reinvestment	0	425,271	425,271	0.80
10009C	Transforming Justice Implementation	150,000	0	150,000	0.00
10009D	Community Violence Coordination	185,336	0	185,336	1.00
10009E	Diversion Planning & Development Pilot	120,000	0	120,000	0.00
10010A	Office of Community Involvement	379,000	0	379,000	2.00
10010B	OCI - Policy & Training Coordinator	122,000	0	122,000	0.00
10011	Office of the Board Clerk	1,121,330	0	1,121,330	2.35
10012	Office of Emergency Management	2,351,950	1,019,148	3,371,098	10.00
10012B	Logistics & Warehouse	604,842	0	604,842	0.00
10012C	Logistics & Vehicles	772,000	0	772,000	0.00
10016	Government Relations Office	1,476,630	0	1,476,630	6.00
10017A	Office of Diversity and Equity	1,897,921	0	1,897,921	8.00
10017B	Multnomah Youth Commission Support	219,085	0	219,085	1.00
10017C	WESP Planning and Engagement	240,000	0	240,000	1.00
10018	Office of Sustainability	1,065,170	50,000	1,115,170	6.00
10018B	Food Access Focus	400,000	0	400,000	0.00

# Nondepartmental

fy2024 adopted budget

Prog. #	Program Name	FY 2024 General Fund	Other Funds	Total Cost	FTE
<b>Nondepartmental (cont.)</b>					
10018C	Tree Memorial	32,200	0	32,200	0.00
10018D	Resilience Hub East County	250,000	0	250,000	0.00
10020	Regional Arts & Culture Council	300,000	0	300,000	0.00
10021A	State Mandated Expenses	13,098,420	1,765,188	14,863,608	0.00
10021B	Courthouse Security	191,100	0	191,100	0.00
10022	Pass-Through Payments to East County Cities	13,181,051	0	13,181,051	0.00
10023	OHS Local Option Levy	0	3,902,074	3,902,074	0.00
10024	County School Fund	0	80,125	80,125	0.00
10025	Convention Center Fund	0	41,576,080	41,576,080	0.00
10026	Capital Debt Retirement Fund	0	31,878,630	31,878,630	0.00
10027	Library GO Bond	0	55,702,015	55,702,015	0.00
10028	PERS Pension Bond Sinking Fund	0	76,137,162	76,137,162	0.00
10029	Youth Opportunity and Workforce Development	817,540	0	817,540	1.00
10030	Employee Retention Incentive Payments - Year 2	14,303,913	0	14,303,913	0.00
10031	Elected Official Office Transition	20,000	0	20,000	0.00
10032	Center for Tribal Nations	250,000	0	250,000	0.00
10040A	Complaints Investigation Unit	1,191,186	0	1,191,186	5.00
10040B	Resolution & Development Coordinator	196,400	0	196,400	1.00
<b>COVID-19 &amp; American Rescue Plan</b>					
10095	Sustainability - Wood Stove Replacement Pilot	0	500,000	500,000	0.00
10096	Sustainability - Electric School Buses	0	500,000	500,000	0.00
10097	Youth Connect	0	600,000	600,000	0.00
<b>Total Nondepartmental</b>		<b>\$68,282,256</b>	<b>\$223,101,813</b>	<b>\$291,384,069</b>	<b>128.80</b>

\*The table above includes cash transfers, contingencies and unappropriated balances.

## 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 2024 General Fund	Other Funds	Total Cost	FTE
95000	Fund Level Transactions	\$122,611,141	\$106,788,315	\$229,399,456	0.00
	<i>This beginning fund balance is not shown in the Nondepartmental detail budget.</i>				
95001	General Fund Revenues	\$779,536,357	\$0	\$779,536,357	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:** Jessica Vega Pederson  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Chair is the Chief Executive Officer of Multnomah County, leading the County's efforts to create a community where anyone who needs help can find it, everyone shares in opportunity and the most vulnerable among us are seen and supported. With both legislative and executive responsibilities, the Chair leads the strategic policy direction, priorities and budget aimed at serving the community equitably and effectively. The Chair works with the Board of Commissioners to implement policy, priorities and budget under the Home Rule Charter. All departments and Nondepartmental offices, report to the Chair. The Chair is a key stakeholder at national, state and regional tables, as a convener for community partnerships and as a spokesperson for the core mission, values, and initiatives critical to the County.

**Program Description**

The Chair oversees a \$3.3 billion budget and over 6,000 employees. Responsibilities include: developing an executive budget, appointing department directors, overseeing contracts, presiding over Board meetings, executing policies and ordinances adopted by the Board, serving as the Chief Personnel Officer and maintaining strong ties and connections with Multnomah County residents and other regional leaders.

The County's critical role in helping to address systemic inequities that disproportionately harm Black, Indigenous and other communities of color has been underscored by the COVID-19 pandemic and continued calls for racial justice. Many of the Chair's priorities, including preventing and ending homelessness, creating family stability, providing accessible healthcare to underserved populations and reducing the use of incarceration while increasing the use of diversion programs, are aligned with the County's work to build a more equitable community. The Chair will also focus attention in less represented parts of the County that have been historically overlooked.

During FY 2024, Chair Vega Pederson will focus on the following priorities:

- Rapidly expand access to the housing and support services we know people need to end their homelessness.
- Provide new ideas, partnership and strategic use of resources to urgently reduce unsheltered homelessness.
- Invest in areas that support children and youth and family stability, particularly through the Preschool for All program.
- Lead the transformation of the criminal legal system with investments that support diversion, reentry & healing.
- Mobilize public health strategies focused on eliminating health disparities perpetuated by systemic racism by leveraging County departments and their respective roles in achieving health equity.
- Champion Workforce Equity Strategic Plan strategies that move the County towards greater safety, trust & belonging.
- Lead the library capital bond to build a new "flagship" library in East Multnomah County and update 7 branch libraries.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Ensure broad community input by conducting community listening sessions and budget hearings.	N/A	10	10	20
Outcome	Meet with State/Fed officials on critical issues like homelessness, housing, behavioral health, and safety	N/A	N/A	N/A	12
Output	Proactively communicate with residents through a regular community newsletter	N/A	12	14	12

**Performance Measures Descriptions**

The performance measures for FY 2023 reflect goals for the final 6 months of the year after Chair Vega Pederson took office in January 2023.

Chair Vega Pederson represents Multnomah County at national policy making tables convened by Association of Oregon Counties, National Association of Counties and at the Large Urban County Caucus. In addition, she works with regional partners along the West Coast to address shared challenges. learn and develop cross-jurisdictional solutions.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,843,547	\$0	\$1,955,064	\$0
Contractual Services	\$16,210	\$0	\$33,840	\$0
Materials & Supplies	\$87,570	\$0	\$108,785	\$0
Internal Services	\$218,761	\$0	\$215,311	\$0
<b>Total GF/non-GF</b>	<b>\$2,166,088</b>	<b>\$0</b>	<b>\$2,313,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,166,088</b>		<b>\$2,313,000</b>	
<b>Program FTE</b>	9.65	0.00	9.65	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 2023: 10000 Chair's Office

1.00 FTE Staff Assistant is moved from the Communications Office (10007A) to align the staff. This transfer does not result in new FTE.

**Department:** Nondepartmental      **Program Contact:** Jessica Vega Pederson  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

In the past few years, the scale and scope of Multnomah County’s work has changed significantly. New voter approved initiatives have led to new funding for supportive housing services, Preschool for All, and an overhaul of our library facilities, enlarging the scope and impact of the County, its programs, and its budget. In partnership with the Chair’s chief of staff, this position will oversee major projects for the Chair’s office, including policy initiatives, project management, deliverables and long term planning. The deputy chief of staff will help the chair’s office in the annual budget process, building upon and refining existing budgeting systems, as well as other internal County projects.

**Program Description**

The deputy chief of staff will support the County Chairperson and their chief of staff. The deputy will manage a variety of long-term, cross-organizational projects. They will lead the planning and implementation of projects; develop project plans; facilitate the definition of project scope, goals, milestones, and deliverables; define project tasks and resource requirements; plan and schedule project timelines; identify project risks and develop contingency plans; assemble and coordinate project staff; manage project budgets; communicate with stakeholders; and create and maintain comprehensive project documentation.

This position will provide leadership and guidance for the countywide annual budget development, communication strategy and oversight, as well as assist in strategically structuring the annual budget meetings with department heads, policy advisors and the Central Budget Office.

The deputy chief of staff will incorporate an equity lens, in collaboration with ongoing work through the Workforce Strategic Equity Plan, into policy work that helps to align initiatives to the diverse communities Multnomah County serves. This position will also serve as a backup for the Chair’s chief of staff.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Quarterly check-ins with policy staff to establish long term policy goals & monitor progress toward completion.	N/A	N/A	N/A	20
Outcome	Development of a Mission, Vision, Values statement with the board of commissioners around budgetary priorities.	N/A	N/A	N/A	1

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$236,503	\$0
Materials & Supplies	\$0	\$0	\$1,997	\$0
Internal Services	\$0	\$0	\$1,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$240,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$240,000</b>	
<b>Program FTE</b>	0.00	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:

**Department:** Nondepartmental      **Program Contact:** Jessica Vega Pederson  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Countywide Visioning Renewal Process is an initiative to update the County’s mission, vision, and values to ensure that the County’s services and programs are aligned with the current and future needs of the community.

**Program Description**

The Countywide Visioning Renewal Process is an external and internal engagement process to review the County’s current mission, vision, and values and generate revisions to these guiding principles to prepare the County to support the needs of the public and its employees for the future. The County’s current mission, vision, and values were last updated in 2013.

The funds will be designated to engage an external facilitation and consultation group that will lead the design of external and internal engagement processes to gather input. This group will engage with a set of community and employee stakeholders who will help guide and assist the consultant group in effective outreach strategies. Funds will also support purchasing materials and equipment that may be needed in order to complete the initiative.

With the development of a renewed mission, vision, and values, the next phase of this project may include County departments engaging in goal and priority setting activities that will connect department efforts to the greater guiding principles of the County.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Employee and community participation	N/A	N/A	N/A	2,500
Outcome	Revised mission, vision, values documents	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Employee and community participation will be a measure of the number of individual people engaged in the Renewal Process.

The outcome measure will be a complete mission, vision and values report.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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

Funded with one-time-only general fund dollars.

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental

**Program Contact:** Sharon Meieran

**Program Offer Type:** Existing

**Program Offer Stage:** 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 and advancing 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 Description

Commissioner Meieran's priorities include: systems coordination and improvement in areas of behavioral health, homeless services, public safety and crisis response; increasing access to quality behavioral health services, including those specific to methamphetamine and Fentanyl addiction; supporting public safety system innovations to reduce recidivism and promote alternatives to incarceration; reducing homelessness through a holistic public health approach to the full spectrum of need from shelter through permanent housing; improving accountability and transparency of policy and budget making-decisions; improving County contracting systems to ensure transparency, oversight and accountability in County contracts with partner organizations; implementing recommendations from a feasibility study of municipal broadband in Multnomah County; collaborating with her colleagues on construction and infrastructure projects in District 1; supporting veterans, older adults, and people with disabilities; mitigating the risks to human life and the environment in the CEI Hub located in District 1; engaging with advocates and individuals with lived experience to advance policies to address domestic violence and sex trafficking. Commissioner Meieran will advance and support policies that pay a living wage to frontline workers employed by community based organizations partnering with the County in health and human services.

Commissioner Meieran also advocates for effective legislation and adequate state and federal funding for local programs. She proactively engages with her District 1 constituents and strives for her office to respond to constituent inquiries and concerns in a timely manner. In the FY 2024 budget process, Commissioner Meieran will center the need to enact policies that address racial injustices, health inequities, and other disparities that disproportionately harm communities of color. She will promote inclusive decision-making that involves those most impacted by policy and budget decisions.

Commissioner Meieran is the Board Liaison to the Aging Services Advisory Council, Disability Services Advisory Council, Veterans Task Force, Domestic Violence Fatality Review, Gateway Center for Domestic Violence, Multnomah County Sex Trafficking Collaborative, RACC, Our Creative Future Project, and Westside Multimodal Committee.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Respond to constituent emails, phone calls and meeting requests timely and resolve constituent concerns.	99%	100%	100%	100%
Outcome	Provide testimony and meet directly with state and federal legislators for priority issues.	50 events	35 events	40 events	30 events
Output	Conduct or partner on twice quarterly outreach events.	20 events	24 events	24 events	20 events
Output	Proactively connect with District 1 constituents, with an emphasis on marginalized communities.	105 events	75 events	100 events	80 events

### Performance Measures Descriptions

1) Timely response is 10 business days. 2) Priority issues include the County's legislative agenda and other emerging issues; D1 added meeting with City leaders in Q2 of FY22. 3) D1 updated the frequency of outreach events from quarterly to monthly in Q1 of FY22. 4) Output includes neighborhood meetings, community events, and other in-district connections (including virtual).



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$620,949	\$0	\$665,283	\$0
Materials & Supplies	\$58,399	\$0	\$65,188	\$0
Internal Services	\$87,285	\$0	\$75,829	\$0
<b>Total GF/non-GF</b>	<b>\$766,633</b>	<b>\$0</b>	<b>\$806,300</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$766,633</b>		<b>\$806,300</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 2023: 10001 BCC District 1

**Department:** Nondepartmental

**Program Contact:** Susheela Jayapal

**Program Offer Type:** Existing

**Program Offer Stage:** 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, Northeast, and parts of East Portland. Commissioner Jayapal is committed to ensuring racial equity, promoting effective evidence-driven programs and services, and engaging in community-driven policy. To learn more about Commissioner Jayapal's office visit the website at <https://multco.us/commissioner-jayapal>.

### Program Description

It is with pragmatic optimism that Commissioner Jayapal enters her second four year term. The county continues to grapple with the changing landscape after managing multiple public health crises over the last 3 years, and the FY 2024 budget needs flexibility for evolving public health needs while continuing the investments in robust services across the county. Many innovative and effective new projects started over the last few years due to investments from the Federal government, and our challenge will be how to continue rethinking our services in ways that will move us toward equity and justice with fiscal constraints.

Commissioner Jayapal continues to prioritize housing and homelessness; economic justice; clean air and climate resilience; and public safety. Specific efforts include ensuring effective implementation of Regional Longterm Rent Assistance and the acquisition of housing units; diversion of low-level offenses from the criminal justice system; and strengthening of services for immigrants and refugees. During the 2024 budget process, she will prioritize programs and strategies that address racial inequities, focus on proven prevention, protect our most vulnerable residents, and deliver results. Recognizing that we cannot achieve equity for the community we serve if our own employees do not experience equity and belonging in their workplace, the Commissioner is committed to monitoring and supporting the progress of the Workforce Equity Strategic Plan.

Commissioner Jayapal serves as a member of the Tri-county Planning Body and Oversight Committee for Metro's Supportive Housing Services. She serves as co-chair on the Earthquake Ready Burnside Bridge and is the liaison to the Joint Policy Advisory Committee on Transportation (JPACT), the Region 1 Area Commission on Transportation, and the Regional Tolling Advisory Committee. Commissioner Jayapal serves as liaison and Executive Committee member for the Workforce Development Board (Worksystems). She also serves on the Walnut Park Redevelopment Project, and is a board member for the Association of Oregon Counties. In 2020 she chaired the Joint Task Force on Supporting Business in Reducing Diesel Emissions.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Community engagement and constituent outreach via meetings and events.	27	18	20	20
Outcome	Ongoing responsiveness to all County departments.	100%	100%	100%	100%
Output	Respond to constituent emails, phone calls and meeting requests in a timely manner.	100%	100%	100%	100%
Outcome	Use of Leading with Race framework in all policy and community work.	100%	100%	100%	100%

### Performance Measures Descriptions

1) Measured by the number of constituent coffees, neighborhood meetings and community events hosted, attended or led by Commissioner Jayapal either virtually or in person. 2) Measured by the percentage of department meetings, briefings and communication requested and completed. 3) A timely response is within 10 days. 4) New measure for FY 2022.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$622,382	\$0	\$675,203	\$0
Contractual Services	\$14,640	\$0	\$15,000	\$0
Materials & Supplies	\$42,326	\$0	\$42,055	\$0
Internal Services	\$87,285	\$0	\$74,042	\$0
<b>Total GF/non-GF</b>	<b>\$766,633</b>	<b>\$0</b>	<b>\$806,300</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$766,633</b>		<b>\$806,300</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 2023: 10002 BCC District 2

**Department:** Nondepartmental

**Program Contact:** Julia Brim-Edwards

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

Multnomah County Commissioner Julia Brim-Edwards is one of five elected officials who form the governing body of Multnomah County. She represents District 3, comprising much of Southeast Portland and a portion of Northeast Portland. District 3 is the most densely populated County district according to 2020 U.S. Census data. Commissioner Brim-Edwards 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://www.multco.us/commissioner-brim-edwards>.

### Program Description

Commissioner Julia Brim-Edwards represents East Portland, her home of more than 50 years, and brings to this role a lifetime of public service and private-sector experience, including serving on the Portland Public School Board 2001-2005 and 2017-present, serving as Chair twice, as well as Vice Chair, Chair of the Policy Committee, and Chair of the Audit Committee. Most recently she managed a consulting business and previously served as a Senior Director at Nike, with a focus on strategy, public engagement, and, recently, business continuity and the response to COVID-19. Notably, she co- led efforts to manufacture more than 300,000 units of Personal Protection Equipment (PPE) for Multnomah County hospitals at the start of the pandemic to protect local health workers, worked with Multnomah County Health officials and education leaders to reopen local schools safely and get students back in classrooms, and chaired the Portland Public Schools 2020 Bond campaign to modernize and rebuild Portland Schools.

As a Multnomah County Commissioner, Commissioner Brim-Edwards is committed to meaningfully addressing the top three urgent priorities she heard from District 3 residents: homelessness, behavioral health, and public safety. She will also advance and champion specific District 3 initiatives and monitor, advise or take action – as appropriate – on County projects within District 3.

She joins the Board at a pivotal time when community members are experiencing the aftermath of the global COVID-19 pandemic, when many community members are increasingly experiencing housing instability, the need for mental health and addiction treatment services, rising costs for essential goods, and extreme weather events. Along with the Board and County staff, Commissioner Brim-Edwards will work alongside her colleagues to address these issues with an equity-focused lens to allocate resources to those in the community who need them the most. The Chair has assigned Commissioner Brim-Edwards to serve as the County's liaison to the 82nd Avenue Transit Project Steering Committee; Advisory Committee on Sustainability and Innovation; the Board of Commissioners Audit Committee; the Portland Children's Levy; and the Mt. Hood Cable Regulatory Commission.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Connect with D3 residents through community events, meetings, advisory committees	N/A	N/A	N/A	50
Outcome	Influence planning & implementation on priority policies facing the county	N/A	N/A	N/A	100%
Output	Engage in a timely manner with District 3 constituents who reach out to the office	N/A	N/A	N/A	100%

### Performance Measures Descriptions

1) Includes convening and/or participating in community-led events and meetings and providing opportunities for engagement with local issues and County. 2) Includes influencing at the local, state, and federal levels and by engaging residents, community stakeholders, local District 3 businesses and organizations, and elected leaders. 3) Engaging with District 3 constituents in a timely manner includes acknowledgment of receipt of contact within 2 business 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$641,311	\$0	\$668,701	\$0
Materials & Supplies	\$37,856	\$0	\$63,314	\$0
Internal Services	\$87,466	\$0	\$74,285	\$0
<b>Total GF/non-GF</b>	<b>\$766,633</b>	<b>\$0</b>	<b>\$806,300</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$766,633</b>		<b>\$806,300</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 2023: 10003 BCC District 3

**Department:** Nondepartmental      **Program Contact:** Lori Stegmann  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 Description**

Commissioner Stegmann’s office focuses on place-based anti-poverty strategies and efforts to increase economic mobility without displacement. This vision guides involvement in conversation about East County growth and continued investment. The core value of this is to mitigate the impacts of poverty and negative systemic interactions for all residents of East Multnomah County.

Specific policy areas for Commissioner Stegmann’s office include: increasing housing stability and affordability, improved access to health and human services, reducing disparities for communities of color and residents involved in the justice system, and effective, ongoing conversations with East County communities about coordination of future growth strategies.

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 convener of the East County Issue Forum. 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 Urban Flood and Water Safety Quality District. Appointed to the Governor’s Metro Regional Solutions leadership team, Commissioner Stegmann continues to bring East County needs to regional and state resource discussions.

She continues her leadership on the National Association of Counties Economic Mobility leadership cohort examining best practices and policies to address inequities in counties across the United States and bringing those efforts home to East Multnomah County. Commissioner Stegmann is committed to implementing the Equity and Empowerment Lens in all policy discussions and decisions that may disproportionately impact communities who are underrepresented in those discussions.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of residents involved in discussion of East County issues and policy areas	2,500	2,500	2,000	2,500
Outcome	Increase in awareness of East County issues	75%	75%	75%	75%
Output	Number of meetings and events convened	30	30	15	10
Outcome	Increase in knowledge of East County resources	75%	75%	75%	75%

**Performance Measures Descriptions**

1) Measured by the number of individuals involved in topic-specific meetings, gathered through mailing lists and sign-in sheets. 2) Measured by qualitative response at monthly issue forums. 3) Measured by the number of publicized and completed meetings hosted or led by Commissioner Stegmann and her staff. 4) Measured by qualitative response 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$657,396	\$0	\$704,601	\$0
Materials & Supplies	\$24,109	\$0	\$28,452	\$0
Internal Services	\$85,128	\$0	\$73,247	\$0
<b>Total GF/non-GF</b>	<b>\$766,633</b>	<b>\$0</b>	<b>\$806,300</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$766,633</b>		<b>\$806,300</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 2023: 10004 BCC District 4

**Department:** Nondepartmental      **Program Contact:** Jennifer McGuirk  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Auditor is elected by voters countywide and answers to the people of 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, special studies, and investigations that provide accountability to the public and help improve County programs, services, and operations.

**Program Description**

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. This is a significant task, as the county includes a wide range of programs and services.

Guided by a commitment to equity, 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. Auditors use an equity lens tool in every step of the work, from audit planning through the development of recommendations. For example, our audit process includes identifying community groups affected by an audit, engaging thoughtfully with those groups, and providing meaningful acknowledgment to them about how their knowledge and experiences shaped audit objectives, findings, and/or recommendations. A volunteer Community Advisory Committee that includes BIPOC and LGBTQ+ members provides guidance to the Auditor on the annual audit plan, community engagement, and work to integrate diversity, equity, and inclusion into audits.

Audit work includes a comprehensive 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 achieving the County's mission to help people. We develop recommendations that are meaningful to community members, provide county leaders with information to help build policies that support racial equity and other forms of equity, and support continuous improvement.

Since 2007, the Office has operated the Good Government Hotline for employees and the public to report potential fraud, waste, or abuse of position in County government. 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, management, and the external auditor for the external financial audits required under Oregon law. All of our reports and audit schedule are online.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of audit reports and follow-ups issued.	6	5	5	6
Outcome	For reports with recommendations, percent with at least one rec. focused on supporting racial equity.	NA	100%	100%	100%
Output	Number of special studies & special reports issued.	3	2	3	2
Outcome	Recommendations in progress or implemented at time of evaluation.	91%	90%	90%	90%

**Performance Measures Descriptions**

The first and third output measures include reports on audits and recommendations, special studies, and annual reports on the hotline and Auditor's Office. The second output measure ensures that audit reports consider equity. The outcome measure reports on audit recommendations that the Office finds to be in progress or implemented.



## 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 [GAGAS]. The auditor may also conduct studies intended to measure or improve the performance of county efforts." GAGAS include continuing education requirements and regular external reviews. Charter requires the Auditor to appoint the Salary Commission and apportion Commission districts. County Code created the Auditor's role to support the Audit Committee.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,171,772	\$0	\$2,290,540	\$0
Contractual Services	\$183,390	\$0	\$192,560	\$0
Materials & Supplies	\$95,289	\$0	\$100,080	\$0
Internal Services	\$200,274	\$0	\$205,300	\$0
<b>Total GF/non-GF</b>	<b>\$2,650,725</b>	<b>\$0</b>	<b>\$2,788,480</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,650,725</b>		<b>\$2,788,480</b>	
<b>Program FTE</b>	13.00	0.00	13.00	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 2023: 10005A Auditor's Office

This program combines 10005C Audit Capacity Expansion from FY 2023.

**Department:** Nondepartmental      **Program Contact:** Jennifer McGuirk  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

In November 2022, more than 85% of Multnomah County voters passed a County Charter amendment establishing the ombudsperson as a role reporting to the County Auditor. The Auditor is elected by voters countywide and answers to the people of Multnomah County.

### Program Description

As of November 2022, County Charter requires the County Auditor to include an ombudsperson in their office. The ombudsperson function supports the Auditor’s mission to ensure that County government is efficient, effective, equitable, transparent, and accountable to all who live in our county.

Multnomah County government provides critical safety net services to historically under-resourced community members. People also connect with county government through bridges and roads, libraries, and many other general services.

At times, government can make mistakes, treat people unfairly, craft policies that have disparate impacts, or simply reach the wrong decision. The ombudsperson is available to the people of Multnomah County as an impartial resource to receive complaints about specific county government administrative actions.

The ombudsperson impartially investigates complaints and makes related reports. They conduct their work with the goal of safeguarding the rights of the public and promoting high standards of fairness, competency, efficiency, and justice in the provision of county services. The ombudsperson seeks solutions for people who have been treated unjustly, recommends steps to eliminate inequities, and supports people’s trust in government.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of public outreach activities	N/A	N/A	N/A	15
Outcome	Percent of complaints responded to within 2 business days	N/A	N/A	N/A	100%
Output	Annual report issued	N/A	N/A	N/A	1

### Performance Measures Descriptions

The first output measure ensures the Auditor's Office connects with the public about the new ombudsperson service. The second output measure ensures the office publicly reports on the ombudsperson's work. The outcome measure ensures the ombudsperson responds promptly to public complaints about specific county government actions.

## Legal / Contractual Obligation

County Charter 8.10 (4) states: "The ombudsperson function is established within the office of auditor" and defines the ombudsperson's duties.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$233,334	\$0
Materials & Supplies	\$0	\$0	\$9,042	\$0
Internal Services	\$0	\$0	\$15,424	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$257,800</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$257,800</b>	
<b>Program FTE</b>	0.00	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:

**Department:** Nondepartmental      **Program Contact:** Allegra Willhite  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Tax Supervising and Conservation Commission (TSCC) serves the public by overseeing budget, debt, and property tax issues for local governments in Multnomah County. Created by the Legislature in 1919, the TSCC focuses on four primary duties: advocating for the public by holding public hearings, training and supporting local government staff on issues related to local and state budget law, informing the public on issues related to local government budgets through publications, and conducting annual reviews and certifications of budgets for member districts. The Commission considers the whole community to be its customers and seeks to make the financial affairs of local governments transparent and accountable to those living within each district.

### Program Description

The Tax Supervising and Conservation Commission (TSCC), established by ORS 294.605-710, 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. TSCC protects and represents the public interest, ensures local government compliance with local budget law, promotes economy and efficiency within those local governments, and provides budgetary advice and assistance. Oregon law describes the duties of the TSCC, including the following:

**Advocacy and Public Information:** TSCC holds public hearings on member budgets and tax measures to engage with elected officials and advocate for the public in the spending of taxpayer dollars. Guided by a commitment to equity, TSCC encourages members of the public from all corners of our community to attend and comment at these public hearings. Additionally, each year the TSCC publishes a comprehensive report on local government budgets, indebtedness, and property taxes. This report is the only one of its kind in the region. The report was revised in 2022 to improve accessibility.

**Budget Reviews/Certifications and Training:** TSCC checks 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. TSCC holds annual local budget law trainings and provides regular advisory and consultative services to local government staff to improve compliance with budget law.

TSCC funding comes from three sources per ORS 294.632: the County General Fund, member districts, and the state's County Assessment Function Funding Assistance grant. TSCC budget increases are set by law to 4% annually.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Hold public hearings on subject jurisdiction budgets and property tax ballot measures.	12	15	16	14
Outcome	Minimize the number of recommendations and objections to district budgets.	5	4	4	4
Output	Number of responses to budget law and other inquiries (annual measure).	88	45	50	50

### 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 that are subject to local budget law (13 large 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 jurisdiction. (23 out of 30 small districts are members).

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$420,920	\$0	\$446,458	\$0
Contractual Services	\$6,240	\$0	\$6,560	\$0
Materials & Supplies	\$52,084	\$0	\$44,296	\$0
Internal Services	\$3,428	\$0	\$1,514	\$0
<b>Total GF/non-GF</b>	<b>\$482,672</b>	<b>\$0</b>	<b>\$498,828</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$482,672</b>		<b>\$498,828</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

Although not budgeted directly in TSCC, the program is supported by the following countywide revenue:  
 Revenue from other member districts: \$169,712  
 Revenue from the County Assessment Function Funding Assistance (CAFFA) grant: \$73,403

## Significant Program Changes

Last Year this program was: FY 2023: 10006 Tax Supervising and Conservation Commission

**Department:** Nondepartmental

**Program Contact:** Julie Sullivan-Springhetti

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Communications Office connects people in Multnomah County to the Chair and Board of Commissioners, County services, and staff. We do this by providing external communications and media relations, including writing, photography, videography and graphic design. We convey news developments and policy initiatives through accessible and equitable web articles, social media, event planning and public education campaigns. We fulfill public records requests. We respond to emergencies 365 days a year, leading crisis communications in the region. We also connect County employees to one another through the weekly employee newsletter, the Wednesday Wire, and supporting County leadership's direct communication with staff.

### Program Description

The Communications Office consistently and accurately informs the public of County services, news developments, policies and initiatives to increase understanding of what the County does, and the difference the County makes in people's lives. Staff work creatively via television, newspapers, radio, social media, direct mail, advertising, community events and in producing content across more than 20 County websites to proactively increase the visibility of the County and the services it provides to all residents. The Office leads with care in identifying issues, audiences, and communication strategies. Staff work to ensure that the public sees that Multnomah County government is efficient, transparent and accountable. The Office strives to make the County a trusted source of information and help in a crisis.

Goals for 2024 include:

Expanding our written, visual, graphic and storytelling tools to reach the most diverse audiences by increasing our bilingual and bicultural work with staff and community partners.

Launching a new Homeless and Housing Services coordination team to better provide taxpayers, the public and the media with stories and information about critical county programs and partnerships.

Improving internal communications to connect an increasingly diverse and disparate hybrid workforce.

Developing new infrastructure to public records requests.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of news stories generated by the office in all media -- TV, print, radio, County website and blogs	2,074	1,800	2,000	2,050
Outcome	Number of multi-media videos/projects produced by the office that reach diverse audiences.	119	120	130	140
Outcome	Number of Twitter users for the County that signal public engagement, particularly during a crisis.	47,137	47,500	49,000	49,500
Outcome	Number of Facebook followers for the County that signal public engagement.	15,630	15,630	17,500	17,750

### Performance Measures Descriptions

The performance measure capture social media reach including a new Spanish language Facebook audience.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$2,285,834	\$0	\$2,426,424	\$0
Contractual Services	\$12,360	\$0	\$12,980	\$0
Materials & Supplies	\$84,534	\$0	\$88,808	\$0
Internal Services	\$159,153	\$0	\$181,278	\$0
<b>Total GF/non-GF</b>	<b>\$2,541,881</b>	<b>\$0</b>	<b>\$2,709,490</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,541,881</b>		<b>\$2,709,490</b>	
<b>Program FTE</b>	14.00	0.00	14.00	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 2023: 10007A Communications Office

This program combines 10007B Communications Coordinator Homeless and Housing Services & 10007C Internal Communications Coordinator from FY 2023.

In FY 2024, 1.00 FTE Staff Assistant is moved to The Chair's Office (10000) to align the staffing - this transfer does not result in new FTE.

**Department:** Nondepartmental

**Program Contact:** Julie Sullivan-Springhetti

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

**Executive Summary**

Multnomah County strives to meet the spirit and intent of Oregon’s Public Records law in order for residents to see how their County government works, understand financial decisions and hold public employees accountable. Public records laws are central to our representative democracy, and the state’s statutes provide a clear framework and schedule for local governments to acknowledge, research and respond to the public requests in a timely manner.

**Program Description**

This investment will fund the implementation and maintenance of a software tool that will allow the public to submit a public records request electronically. This includes the internal and external costs of making the software part of County business practices. After implementation, staff will use the software to organize and expedite the County’s response to that request by an automated system that schedules acknowledgment of the request, assigns the task to the appropriate custodian of the records, coordinates work groups that may be collaborating to collect the documents, calendars required actions, permits redactions during legal review, limits duplication of efforts and allows the County to stay in compliance with Oregon Public Records Law.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Complete the evaluation and selection of a software develop.*	N/A	100%	100%	N/A
Outcome	Percentage of milestones met based on the approved plan and timeline.	N/A	100%	100%	100%
Output	Contractor to automate County's public records.*	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

\*Performance Measure #1 is split across two performance measures in FY 2024.



## Legal / Contractual Obligation

Under Oregon's Public Records Law, "every person" has a right to inspect any nonexempt public record of Multnomah County.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Materials & Supplies	\$0	\$0	\$200,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$200,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$200,000</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:** FY 2023: 10007D Public Records Software

In FY 2023, this program was funded with one-time-only General Fund.

**Department:** Nondepartmental

**Program Contact:** Jenny Madkour

**Program Offer Type:** Existing

**Program Offer Stage:** 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 Description**

The Office of County Attorney prepares and reviews legal documents including contracts, Ordinances, Resolutions, Board Orders, Executive Rules, Administrative Procedures, and other legal instruments. It provides legal advice and counsel to the Board of County Commissioners, County elected officials, County Departments and Offices, Advisory Boards, Districts, and Commissions. The Office of County Attorney prepares formal written opinions as deemed necessary by the County Attorney regarding significant interpretations of federal and state laws, the County Charter and 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 proceedings in any court or tribunal and as requested by the Board.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	County Attorney Direct Service Hours	24,985	25,000	25,000	25,000
Outcome	Percentage of County Attorney Time Dedicated to Direct Client Services	96%	95%	95%	95%
Input	Number of Tort Claims Received	245	220	200	210

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The role and duties of the County Attorney are set forth in Multnomah County Code Chapter 25.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$6,148,690	\$0	\$6,731,389
Contractual Services	\$0	\$297,360	\$0	\$312,230
Materials & Supplies	\$0	\$229,982	\$0	\$242,910
Internal Services	\$0	\$577,178	\$0	\$598,591
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,253,210</b>	<b>\$0</b>	<b>\$7,885,120</b>
<b>Program Total:</b>	<b>\$7,253,210</b>		<b>\$7,885,120</b>	
<b>Program FTE</b>	0.00	26.00	0.00	25.00

Program Revenues				
Other / Miscellaneous	\$0	\$7,253,210	\$0	\$7,885,120
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,253,210</b>	<b>\$0</b>	<b>\$7,885,120</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 2023: 10008 County Attorney's Office

In FY 2024, a vacant 1.00 FTE Legal Assistant Senior (9004) is cut.

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The central purpose of Multnomah County's Local Public Safety Coordinating Council (LPSCC) is to coordinate public safety planning, policies, operations, and strategies of government agencies to improve the local public safety system's cost effectiveness and responsiveness to the needs of the community. LPSCC convenes leaders from local governments; public safety, social service and health agencies; private service providers and local communities to collaborate on and improve public safety system outcomes. LPSCC focuses on equity by leaning into the requirement that justice reforms and programs must lead with race. LPSCC staff acknowledge the harm caused by the criminal legal system over the last 400 years, and each project and policy area is evaluated by its impact on Black Indigenous and People Of Color communities.

**Program Description**

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 led by County Chair Jessica Vega Pederson.

LPSCC and its partners collaborate on the development of (a) solutions to problems in the intergovernmental operations of the public safety systems, (b) coordinated policies to improve those systems and (c) evidence-based strategies that address issues important to community safety. The LPSCC office prioritizes racial justice by ensuring leading with race is the lens through which policy development and evaluation occurs. With the help of data, the staff can also support policy efforts to reduce racial and ethnic disparities in the criminal legal system.

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: coordination between the public safety and mental health systems, decreasing Racial and Ethnic Disparities, and overseeing the Justice Reinvestment Program, and MacArthur Foundation's Safety + Justice Challenge. 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 that allows for longitudinal analysis and evaluation. The LPSCC also champions the Transforming Justice project.

In FY 2024, LPSCC will fund an Executive Director, who coordinates inter-agency public safety policy discussions; and an Executive Assistant, who provides organizational and communications support. In addition, to support implementation of the MacArthur Foundation's Safety + Justice Challenge (SJC), focused on overhauling the pretrial justice system, LPSCC funds three staff.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of data analyses that disaggregate and evaluate racial and ethnic disparities.	100%	100%	100%	100%
Outcome	% of new initiatives/projects that consult the Office of Diversity and Equity, including Equity Lens application	100%	100%	100%	100%
Output	Percentage of staff attending at least one diversity, equity, and inclusion trainings each year	100%	1	100%	100%
Outcome	Percentage/number of policy-level projects that include voices of people with lived experiences.	60%	60%	70%	70%

**Performance Measures Descriptions**

Performance Measure 3 updated from FY23

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$1,183,896	\$0	\$824,976
Contractual Services	\$0	\$265,400	\$0	\$80,400
Materials & Supplies	\$0	\$119,837	\$0	\$130,036
Internal Services	\$824,840	\$81,456	\$862,384	\$45,588
<b>Total GF/non-GF</b>	<b>\$824,840</b>	<b>\$1,650,589</b>	<b>\$862,384</b>	<b>\$1,081,000</b>
<b>Program Total:</b>	<b>\$2,475,429</b>		<b>\$1,943,384</b>	
<b>Program FTE</b>	0.00	3.00	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$514,885	\$0	\$406,000
Other / Miscellaneous	\$0	\$1,060,704	\$0	\$675,000
Beginning Working Capital	\$0	\$75,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,650,589</b>	<b>\$0</b>	<b>\$1,081,000</b>

## Explanation of Revenues

This program generates \$29,534 in indirect revenues.  
 State Department of Corrections through SB 1145 - \$406,000  
 MacArthur Foundation - \$675,000

## Significant Program Changes

**Last Year this program was:** FY 2023: 10009A Local Public Safety Coordinating Council

1.00 FTE and 1.00 LDA IT positions that supported SJC implementation have completed their work and are eliminated in FY 2024.

The Justice Fellowship Coordinator LDA has moved from OCI to LPSCC (as of Jan 9, 2023).

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Existing      **Program Offer Stage:** 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 the Justice Reinvestment Grant, administered by the Oregon Criminal Justice Commission.

**Program Description**

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 led by County Chair Jessica Vega Pederson.

LPSCC and its partners collaborate on the development of (a) solutions to problems in the intergovernmental operations of the public safety systems, (b) coordinated policies to improve those systems and (c) evidence-based strategies that address issues important to community safety. The LPSCC office prioritizes racial justice by ensuring leading with race is the lens through which policy development and evaluation occurs. With the help of data, the staff can also support policy efforts to reduce racial and ethnic disparities in the criminal legal system.

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 the Multnomah County Justice Reinvestment Program (prison diversion) and funding directed to agencies who serve victims of crime from underserved and Black Indigenous and People Of Color communities.

This program offer includes the funding for victim's services contracts. 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. 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 0.80 FTE LPSCC Project Manager for the Multnomah County Justice Reinvestment Program.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of victims services contracted providers that aim to serve marginalized & underrepresented communities	3	3	3	3
Outcome	Percentage of MCJRP related analyses that included evaluation of racial and ethnic disparities	100%	100%	100%	100%
Outcome	Percentage of policy agreements made motivated by racial equity (i.e., eligibility)	100%	100%	100%	100%

**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). Per the Oregon Criminal Justice Commission, each county's LPSCC is required to be the grant applicant for justice reinvestment funds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$155,778	\$0	\$170,983
Contractual Services	\$0	\$473,556	\$0	\$247,687
Materials & Supplies	\$0	\$480	\$0	\$480
Internal Services	\$0	\$5,592	\$0	\$6,121
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$635,406</b>	<b>\$0</b>	<b>\$425,271</b>
<b>Program Total:</b>	<b>\$635,406</b>		<b>\$425,271</b>	
<b>Program FTE</b>	0.00	0.80	0.00	0.80

Program Revenues				
Intergovernmental	\$0	\$635,406	\$0	\$425,271
<b>Total Revenue</b>	<b>\$0</b>	<b>\$635,406</b>	<b>\$0</b>	<b>\$425,271</b>

## Explanation of Revenues

This program generates \$6,121 in indirect revenues.

State HB 3194 Criminal Justice Commission (CJC) - \$425,271

This revenue includes formula funding based on a statewide allocation (\$343,291) and supplemental funding (\$81,980) from the State for this program.

## Significant Program Changes

**Last Year this program was:** FY 2023: 10009B HB3194 Justice Reinvestment

In addition to funding a 0.80 FTE Project Manager, this program funds \$247,687 for three contracts for services to victims of crime (IRCO, Oregon Crime Victims Law Center, and Lutheran Community Services NW).

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**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. In 2021, LPSCC embarked on a bold, multi-sector effort to Transform Justice to create a more just, equitable, and service-oriented non-criminal legal response to communities and individuals in need. That effort continued into FY 2023, which resulted in eighteen Core Strategies to support the effort to achieve a vision for a just legal system. In FY 2024, these funds will launch each of these strategies, accompanied by significant buy-in, sustainable implementation plans, and governance.

**Program Description**

At the What Works Public Safety conference in January 2020, the criminal legal system leaders, health system administrators, behavioral health experts, advocates for victims of crime, and a number of government leaders in attendance agreed to embark on a large-scale planning and implementation process that will transform the future of local justice policy. This future system must be equitable and acknowledge the 400 years of institutionalized racism perpetrated by its inception. The system currently lacks a North Star, requiring the criminal legal system to often be the intervention for housing, behavioral health, and public health crises.

In order to effectively develop and implement a vision, an outside firm was selected through a competitive procurement process. The visioning began in earnest in FY 2022. A report summarizing the perspective of over 130 stakeholders (from individuals in recovery to judges) was completed in 2022, which led to the development and approval of a Vision for the Future of Justice Policy and eighteen accompanying Core Strategies. The last few months of 2022 focused on eighteen two-hour sessions to better define the implementation work ahead for each unique strategy.

This program offer allocates \$150,000 toward a contractor to support launch and implementation of each strategy, creating local independence and leadership for the entirety of the Transforming Justice project. This one-time-only request concludes the planning and launch phases of the work, closing out the contract by the end of FY 2024.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of meetings held with non-County stakeholders	NA	NA	80%	80%
Outcome	Percentage of core strategies moved from development to implementation.	N/A	100%	0	100%
Outcome	Percentage of strategies that lead with race using data and intentional approaches to reduce disparities.	N/A	100%	100%	100%

**Performance Measures Descriptions**

FY 2023 Transforming Justice work was slowed significantly due to a number of other systemic crises. These performance measures quantify the efforts to study and prepare the project to launch and implementation outside the LPSCC office. (#1 is N/A as Steering Committee completed its work)



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$250,000	\$0	\$150,000	\$0
<b>Total GF/non-GF</b>	<b>\$250,000</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$250,000</b>		<b>\$150,000</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: FY 2023: 10009C Transforming Justice Implementation

In FY 2023, this program was funded with one-time-only General Fund.

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

There has been a significant uptick in gun violence across our community since the beginning of the Covid-19 pandemic. Multnomah County has invested in a number of areas to help respond, adding prosecutors, detectives, community health workers, trauma support specialists, and behavioral health supports. With all these new resources, it is imperative that the County also assist with coordinating these diverse lines of work. This program funds one FTE in Multnomah County Local Public Safety Coordinating Council (LPSCC) office to provide leadership and subject matter expertise in respect to gun violence responses, as well as assess and coordinate community violence prevention strategies that further the goals of the County.

**Program Description**

Multnomah County is heavily involved in violence prevention work across the organization. That work ranges from upstream interventions like building healthy relationships and social/emotional supports for youth, to far more downstream responses that are exemplified by the work of the criminal legal system. One area where we have seen an increased need since the start of the pandemic is gun violence. Over the last two years, Portland and Multnomah County have seen a sharp increase in gun related homicides and overall shooting incidents.

The County has responded by adding additional staff in the District Attorney’s Office, Multnomah County Sheriff’s Office, the Department of Community Justice, and Health Department. These new resources, in addition to the work already existing within departments to respond to gun violence, are far reaching. The need for a level of coordination and collaboration is essential at this time.

This coordinator in the Multnomah County Local Public Safety Coordinating Council office deepens the expertise and capacity to coordinate intra-county efforts to reduce gun and community violence. The position will work between departments and external agencies to monitor, track and coordinate existing and new efforts to reduce violence. This position serves as a resource on each department’s violence prevention policies, programs, and outcomes. This coordination also includes being a point of contact and liaison with area advisory bodies, work groups and steering committees on violence prevention efforts in Multnomah County.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of LPSCC meetings convened	N/A	12	12	18
Outcome	Provide an annual report that details the impact of gun violence prevention and intervention investments	N/A	1	1	1
Output	Number of briefings, planning groups and presentations provided to increase collaboration and coordination	N/A	12	12	18

**Performance Measures Descriptions**

LPSCC meetings facilitate solutions to problems in the intergovernmental operations of the public safety system, coordinate policies to improve that system and offer evidence-based strategies to address issues important to community safety. The annual report identifies positive and negative results providing transparency and accountability for county investments. Briefings, planning groups and presentations increase collaboration and information sharing to ensure deeper coordination for intra-county and external facing efforts to reduce gun and community violence.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$174,491	\$0	\$171,836	\$0
Materials & Supplies	\$1,991	\$0	\$1,891	\$0
Internal Services	\$0	\$0	\$11,609	\$0
<b>Total GF/non-GF</b>	<b>\$176,482</b>	<b>\$0</b>	<b>\$185,336</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$176,482</b>		<b>\$185,336</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 2023: 10009D Gun Violence Coordination

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The diversion planning and development pilot will fund a human-centered design planning process that results in a criminal justice diversion program in Gresham, Oregon. In partnership with the LPSCC office, Commissioner Jayapal, Gresham Police Department and a variety of community stakeholders, this pilot will facilitate and plan a Law Enforcement Assisted Diversion (LEAD)-inspired policy and program which aims to increase non criminal justice intervention for low level crime.

**Program Description**

This request will place \$120,000 in LPSCC (\$80,000 to be used for a contracted facilitator and \$40,000 for staffing the project) to immediately support facilitation, planning, evaluation, and project coordination. An additional request sets aside \$200,000 in contingency to assist with the start-up costs for a pilot diversion program in the next fiscal year. This remaining amount will fund staff for a 6 month pilot.

LPSCC will help convene County departments, law enforcement representatives, elected officials, and service providers, to develop an implementation plan. The plan will outline how this program will incorporate best practices that have been developed in other jurisdictions, as well as lessons learned from the County's previous LEAD initiative. LPSCC will present this plan to the Board of County Commissioners in fall, followed by a vote to move remaining money from contingency to the appropriate county department.

This model aligns closely with the ongoing work of the Transforming Justice project being led by the Local Public Safety Coordinating Commission (LPSCC).

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of stakeholder planning meetings	N/A	N/A	N/A	24
Outcome	Agreed upon policy and accompanying program for a LEAD-like project in Gresham	N/A	N/A	N/A	1
Outcome	Established target population and measurable decreased criminal justice contact	N/A	N/A	N/A	1
Output	Percentage of planning meetings using human-centered design and uplifting consumer/community input	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

This is a planning process which will include government leaders and staff as well as members of the community. The measures above describe the goals of inclusivity, transparency, and establishing a solid diversion program and policy all stakeholders agree to.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$40,000	\$0
Contractual Services	\$0	\$0	\$80,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$120,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$120,000</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:** Nondepartmental

**Program Contact:** JR Lilly

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Office of Community Involvement 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. The office connects community members with opportunities to serve on advisory boards and committees, with a focus on elevating the voices of communities historically underrepresented in government decision-making. The office's recruitment process prioritizes applicants from communities most impacted by the county's programs and services.

### Program Description

The Office of Community Involvement coordinates programs and activities designed to engage people from Multnomah County's diverse communities and support the County's community involvement programs. The office 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 office maintains a community contact list for communications and sends out a periodic e-newsletter with opportunities to volunteer on County advisory groups and participate in public input processes. The office provides a single point of contact for community members interested in volunteering by maintaining lists of advisory committees and other volunteer opportunities, managing inquiry and application processes, referring inquiries from the public to appropriate opportunities and resources, and maintaining a database of active and potential volunteers. The office also hosts an annual volunteer recognition event for all county departments.

The office staffs the volunteer members of the Community Involvement Committee (CIC), including providing support, training and coordination for CIC meetings. The CIC serves as Multnomah County's advisory body on community engagement and involvement. The office also manages the Community Budget Advisory Committee (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 office also provides staffing and technical assistance to the County's Central and Nondepartmental CBACs. The office serves as a resource for offices and departments in the development of effective and inclusive community engagement plans, and coordinates a community of practice for county staff who support advisory boards and committees.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Percentage of participants in activities who felt time was well spent	100%	90%	85%	90%
Outcome	Percentage of volunteer positions on CIC and CBACs filled	94%	90%	90%	90%
Outcome	Percentage of new CIC & CBAC members who have not previously served on County advisory group	83%	90%	80%	90%
Outcome	Community meetings & events with partners serving historically underrepresented/hard to reach communities	4	10	5	10

### Performance Measures Descriptions

Measure 1 is based on an annual survey of CIC and CBAC members. Measures 3 and 4 reflect the office's focus on engaging communities historically underrepresented in county decision-making and commitment to recruiting new community members to serve on advisory groups.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$259,852	\$0	\$294,486	\$0
Contractual Services	\$15,850	\$0	\$16,650	\$0
Materials & Supplies	\$25,557	\$0	\$26,800	\$0
Internal Services	\$43,757	\$0	\$41,064	\$0
<b>Total GF/non-GF</b>	<b>\$345,016</b>	<b>\$0</b>	<b>\$379,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$345,016</b>		<b>\$379,000</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 2023: 10010A Office of Community Involvement

In FY 2024, the office will no longer be supervising the Limited Duration Staff Positions for the Justice Fellowship Program and the Charter Review Committee as these positions have served its purpose or work is being supervised by another program.





Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$118,371	\$0
Materials & Supplies	\$0	\$0	\$2,129	\$0
Internal Services	\$0	\$0	\$1,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$122,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$122,000</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:** Marina Hovious

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Office of the Board Clerk supports the Board of County Commissioners by managing the Board meetings and providing information on items brought before the Board and the public. The Office is responsible for ensuring that notices of Board meetings, the agendas for the meetings, and any official actions taken are posted for the public. The Office is focused on making this information as accessible as possible.

### Program Description

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 are responsible for the following:

- Notifying internal and external customers of scheduled meetings and cancellations
- Processing, posting, and distributing all agenda submissions and official documentation that result from Board action and directives
- Ensuring access for future internal and external inquiries
- Providing members of the public with agenda, notices of public hearings, and access to public records
- Preserving the official County records both electronically and on paper for perpetuity
- Providing information on upcoming Board items

The Office of the Board Clerk focuses on making the Board meetings and the information it provides accessible to as much of the public as possible. For example, during some public hearings, the Board Clerk ensures that translators are available for a variety of different languages so that members of the public can more easily communicate with the Board. The Office of the Board Clerk also provides live closed captioning during Board meetings and posts videos and transcripts after the meetings. During the COVID-19 pandemic, the Office adapted to provide virtual public testimony so that the public could still engage in the public hearings. By making the information more accessible, the goal is that the meetings will be more equitable for people who communicate in different ways.

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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total number of Board related documents processed (digital files).	3,718	4,000	3,500	3,500
Outcome	Board Meeting Minutes uploaded and available to the public within two weeks.	90%	90%	90%	90%
Outcome	Board adopted resolutions, proclamations, orders & ordinances available to public within 1 week.	100%	95%	95%	95%
Outcome	All Board events have accessibility tools-including captioning and interpretation-available to public*.	100%	100%	100%	100%

### Performance Measures Descriptions

Board related documents include board packets, proclamations, resolutions, orders, & ordinances.

\*A new outcome measure was added in FY 2021 to reflect the County's efforts and goal to ensure all members of our community have the tools to listen and engage with the County Board of Commissioners - amidst new virtual formats that have been adopted in light of the COVID-19 pandemic.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$331,859	\$0	\$357,880	\$0
Contractual Services	\$50,270	\$0	\$52,790	\$0
Materials & Supplies	\$314,781	\$0	\$365,406	\$0
Internal Services	\$341,947	\$0	\$345,254	\$0
<b>Total GF/non-GF</b>	<b>\$1,038,857</b>	<b>\$0</b>	<b>\$1,121,330</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,038,857</b>		<b>\$1,121,330</b>	
<b>Program FTE</b>	2.35	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

Significant Program Changes

Last Year this program was: FY 2023: 10011 Office of the Board Clerk

In Fall 2021, the County transitioned from 19 months of virtual-only meetings to hybrid board meetings that take place in the Multnomah County Boardroom but still allow the public and presenters to virtually listen and engage.

The County is continuing to update and improve its technology equipment and management to support effective and accessible Board proceedings.

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** Existing      **Program Offer Stage:** 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. During events, MCEM will activate the emergency operations center to facilitate the appropriate response using people and resources throughout the county.

**Program Description**

The MCEM program focus includes: 1) County preparedness, 2) Intergovernmental and regional preparedness, 3) 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 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 Operations Center (EOC) 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. Annual exercise of Emergency Coordination Center and evaluation of performance of established objectives in an After Action Report (AAR).

MCEM can 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.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Annual exercise performance objectives successfully tested.	N/A	N/A	N/A	100%
Outcome	Oregon Emergency Management requirements met for annual performance grant.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Performance measures have changed back to the FY 2021 measures after they were altered due to the COVID-19 response

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,432,671	\$870,835	\$1,550,264	\$983,385
Contractual Services	\$147,270	\$966,579	\$154,640	\$0
Materials & Supplies	\$131,030	\$291,283	\$136,836	\$557
Internal Services	\$531,683	\$31,263	\$510,210	\$35,206
<b>Total GF/non-GF</b>	<b>\$2,242,654</b>	<b>\$2,159,960</b>	<b>\$2,351,950</b>	<b>\$1,019,148</b>
<b>Program Total:</b>	<b>\$4,402,614</b>		<b>\$3,371,098</b>	
<b>Program FTE</b>	8.00	2.00	8.56	1.44

Program Revenues				
Intergovernmental	\$0	\$2,159,960	\$0	\$1,019,148
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,159,960</b>	<b>\$0</b>	<b>\$1,019,148</b>

**Explanation of Revenues**

This program generates \$35,206 in indirect revenues.  
 Federal Emergency Management Performance Grant - \$262,840  
 Federal Urban Areas Security Initiative Grants - \$365,409  
 Federal State Homeland Security Program - \$390,899

In FY 2024, 0.56 FTE is backfilled with General Fund. In FY 2023 this FTE was funded by the EMPG. The reduction in grant funding is due to the Federal government reducing the statewide allocation by 13%. This resulted in last year's award being 35% greater than this years, excluding an additional EMPG supplemental also awarded last year. Last year's total award was \$490,431 (\$406,970 formula + \$83,461 supplemental) and this year's total projected award is \$262,840.

In addition, FY 2023 included carry over in grant funding due to the COVID-19 response and having to shift from normal operations. FY 2024 doesn't include carry over as Emergency Management shifts back to normal operations.

**Significant Program Changes**

**Last Year this program was:** FY 2023: 10012 Office of Emergency Management

The Office of Emergency Management began to respond to COVID-19 in January 2020 and this response continues today. The office hopes to return to a more normal operation during FY 2023. While in a response mode, many of the everyday activities including planning, training, exercises, mitigation, etc. have limited support.

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** New      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

This program totals \$604,842 in one-time-only General Fund to support two initiatives. 1. This funding provides for both the warehouse at \$322,511 and 2. a base level of Limited Duration Appointment (LDA) staffing at \$282,331 to support the logistical team which maintains equipment and personnel protective gear to support the County's COVID-19 operations and to mitigate the spread of COVID-19 in our community.

**Program Description**

The staff in this program purchase supplies, coordinate with Community Based Organizations (CBO), and offer supplies to these and other groups who may be underserved or that may be experiencing an outbreak. This team works with County departments, Cities, the State, BIPOC community organizations, contractors, non-profits, hospitals and other groups to support operations and mitigate the spread of COVID-19. This includes the requesting, purchasing, storage of personal protective equipment, supplies to support COVID outbreaks and support to shelter operations when they exceed the Joint Office of Homeless Services (JOHS) capacity.

This group also maintains the warehouse and approximately 6 million in supplies stored at the facility. This includes various systems from inventory management to the coordination and re-stock of supplies, most of which have come in from the State at no cost. This group also coordinates with other Oregon Counties on the acquisition of supplies from their organizations. This group will maintain the buying capacity for all severe weather gear funded through the Joint Office and provided at shelters and to support outreach activities.

The County leases over 12,000 square feet to store supplies and equipment necessary to continue COVID-19 operations. Additionally, the group manages 7 mobile trailers, 6 storage containers throughout the county, and supplies at one other county location and 3 shelter locations. The warehouse and staff allow us to consolidate supplies and to move supplies that are more sensitive to temperature fluctuations into a controlled atmosphere.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Maintain capability to provide supplies for 1,200 persons seeking sheltering with 72 hours notice.	N/A	N/A	95%	100%
Outcome	Provide 75% of supplies to underserved and BIPOC communities*	N/A	75%	90%	75%

**Performance Measures Descriptions**

\*Adjusted the measure to include COVID-19 outbreaks.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$2,000,000	\$282,331	\$0
Internal Services	\$0	\$425,000	\$322,511	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,425,000</b>	<b>\$604,842</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,425,000</b>		<b>\$604,842</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,425,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,425,000</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

In FY 2023, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding.  
 In FY 2024, this program is funded with one-time-only General Fund.

Significant Program Changes

Last Year this program was: FY 2023: 10093A ARP Emergency Management Logistics

In FY 2024, the County also expects to take ownership of a morgue trailer and lighting unit provided from the State as well as donated Americans with Disabilities Act (ACT) compliant vehicles from Metro to assist with transport during shelter activations.

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program consists of \$772,000 in one-time-only General Fund and supports the Emergency Management Logistics team with vehicles and 6 Limited Duration Assignment (LDA) positions to support the County's COVID-19 operations and to mitigate the spread of COVID-19 in our community and our shelter system. Program 10012B totals \$604,842 and 2 LDA's and provides base level staffing to support the Emergency Management Logistics team with the Warehouse, including the purchase of supplies. These two programs represent the complete Emergency Management Logistics team (\$1,376,842 and 8 LDA).

**Program Description**

Staff in this program are responsible for the transportation of supplies and coordination of several mission critical severe weather shelter programs. This program expects to maintain the ability to coordinate and deliver supplies to Community Based Organizations (CBOs), outbreak locations and shelter locations during activations. Calendar year 2022 included over 2,500 deliveries to CBO's including support to 627 outbreaks at organizations focused on underserved populations or high risk communities. In total, between CBO support and shelter activations, this team provided transportation for more than 2.5 million items and expects to maintain a similar capability for COVID-19 and shelter support in FY 2024.

This group ensures the delivery of meals, snacks and drinks to persons in severe weather shelters. While most meals are prepared by outside vendors and coordinated through this group; snacks and drinks are purchased, stored and delivered by this team. In 2022, this consisted of more than 18,000 meals and over 250,000 snacks and drinks. The December 2022 severe weather shelter event alone resulted in the delivery of 81,254 snacks and drinks to shelter locations. The cost of food is covered by another County Department.

Since 2021, this team has also coordinated the delivery of numerous culturally specific items requested as part of a larger shelter improvement program as well as an expansion of items for both medically fragile and persons needing various accommodations. A single shelter is often opened with approximately 40,000 items delivered by this team or through the volunteers who are supported by this team. This group also coordinates the resources necessary to support ADA transport including a collaboration with Metro in which the County receives donated Metro vehicles.

While Shelter activity is at its busiest during the winter and summer months, it is a year round activity that includes planning, training, exercises, contract negotiation, inventory management and system purchase and training. In addition, many of the improvements anticipated next year include expansion of our volunteer network and training of these new personnel would occur in the off season.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Maintain capability to provide supplies for 1,200 persons seeking sheltering with 72 hours notice.	N/A	N/A	95%	100%
Outcome	Deliver 95% of processed PPE requests within 3 business days (unless later date is requested by client)	N/A	95%	95%	95%

**Performance Measures Descriptions**

Output measure supporting sheltering is new and a goal for the warehouse



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$719,778	\$0
Internal Services	\$0	\$0	\$52,222	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$772,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$772,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	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

In FY 2023, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding. See program 10012B for the FY 2023 total ARP Logistics budget.

In FY 2024, this program is funded with one-time-only General Fund.

Significant Program Changes

**Last Year this program was:** FY 2023: 10093A ARP Emergency Management Logistics

In FY 2024, this program provides for 6.00 LDA and with the combined 2.00 LDA in program 10012B, is a 11.00 LDA reduction from FY 2023 (19.00 LDA in FY 2023).

**Department:** Nondepartmental      **Program Contact:** Jeston Black  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Government Relations Office represents the Board of Commissioners and County Departments before the United States Congress, the Oregon Legislature and local governing bodies to advance Multnomah County's annual state and federal legislative agenda. The office works with smaller cities in Multnomah County to provide insight into County actions and facilitate partnerships. In addition, the office is working to create a single point of contact for Oregon's nine recognized Tribal Governments. These functions are vital in protecting the interests of Multnomah County and its residents.

### Program Description

The Government Relations Office serves as the primary representative for the County to State, Federal Elected and Tribal Officials.

The Office of Government Relations works with the Board of Commissioners, County Departments, Regional Partners, and Community Groups to advance policy set by the Board of Commissioners at the Tribal, Federal, State, and Local Levels.

The Office of Government Relations, in partnership with County Departments, provides analysis and tracks the impacts that Federal and State Legislation would have on County programs and the people served by those programs.

The office also works with other local government partners in the metro region to align priorities and to give other local governments insight on Multnomah County operations and policy.

The Tribal Liaison position is the single point of contact for Oregon's nine federally recognized Tribal Governments, as well as works with County staff to establish processes and protocols for departments' interaction with Tribal Governments.

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.

Over the past three budget cycles the Office of Government Relations has expanded its work in developing positive partnerships with cities in East County, expanding its budget analysis capabilities to translate budget impacts in impacted communities and formalizing Multnomah County's relationship with Tribal Governments.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Develop and pass a comprehensive legislative and federal 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 countywide competitive grant capacity	35	30	33	36
Outcome	Develop engagement strategies with Tribal governments and local American Indian/Alaska Native communities	0	1	1	1

### Performance Measures Descriptions

The adoption of the legislative agenda is the culmination of a broad process of consultation with employees, departments, elected officials, advocacy organizations and community groups. The report provides transparency and identifies both positive and negative results. The office also focuses on impacts of Legislation on communities in Multnomah County, not just County operations. A Tribal engagement plan will kick off the comprehensive approach to Tribal Governments. Planning groups, trainings and presentations ensures access to the 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,127,639	\$0	\$1,232,504	\$0
Contractual Services	\$124,000	\$0	\$124,000	\$0
Materials & Supplies	\$48,651	\$0	\$51,110	\$0
Internal Services	\$71,765	\$0	\$69,016	\$0
<b>Total GF/non-GF</b>	<b>\$1,372,055</b>	<b>\$0</b>	<b>\$1,476,630</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,372,055</b>		<b>\$1,476,630</b>	
<b>Program FTE</b>	6.00	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

## Significant Program Changes

Last Year this program was: FY 2023: 10016 Government Relations Office

**Department:** Nondepartmental

**Program Contact:** Joy Fowler

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

The Office of Diversity is a team of subject matter experts focusing on the impacts on Multnomah County residents and employees disproportionately affected by institutional and systemic racism and other identity-based oppression. ODE provides countywide leadership, models and builds best practices for equity policy analysis and development, conducts research and evaluation, and creates intersectional and inclusive frameworks for practice, policy and program delivery.

**Program Description**

ODE works across the organization, providing leadership, leading initiatives, piloting best practices, consulting, coordinating and collaborating to advance equity. Core to the work of ODE is a commitment to Inclusively Leading with Race and modeling intersectional approaches that recognize how multiple and compounding forms of marginalization impact communities, employee experience and wellbeing.

ODE advances this work by providing countywide leadership as a multiracial, multi-identity, and diverse team of experts who are available to provide guidance and counsel across the organization, modeling best practices to inform and influence change.

This offer funds the ongoing implementation of key pillars of ODE work: Workforce equity and the Workforce Equity Strategic Plan through stakeholder engagement, developing communications strategies, and evaluating impacts as well as ensuring accountability to performance measures; training and internal policy toward Safety, Trust and Belonging for all employees; the Equity Policy Team’s work around disability equity and accommodations, compliance reporting, research and evaluation, exit interviews, policy development, and other initiatives that improve systems and structures; the ongoing utilization, tools, frameworks and capacity building around the Equity and Empowerment Lens: Racial Justice Focus; support, coordination and governance of Employee Resource Groups; coordination of the Multnomah Youth Commission, representing Black, Indigenous, and People of Color communities, and utilizing youth-adult partnership to advance policies and practices that reflect the priorities of youth across Multnomah County. ODE also convenes the Equity Core Team made up of equity managers across the organization and other key stakeholder groups around specific or emerging organizational equity issues.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Employee Resource Groups managed and coordinated	9	9	9	9
Outcome	Compliance on Workforce Equity Strategic Plan performance measure adherence	90%	90%	90%	90%
Output	Number of guidance documents, evaluation reports or compliance reports completed	5	4	4	5
Output	Number of disability accommodation consults	25	25	35	35

**Performance Measures Descriptions**

## Legal / Contractual Obligation

ADA Title II Coordination, EEO Reporting, Civil Rights Grievance Staffing

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$1,556,876	\$0	\$1,637,593	\$0
Contractual Services	\$24,860	\$0	\$26,110	\$0
Materials & Supplies	\$88,366	\$0	\$92,816	\$0
Internal Services	\$161,264	\$0	\$141,402	\$0
<b>Total GF/non-GF</b>	<b>\$1,831,366</b>	<b>\$0</b>	<b>\$1,897,921</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,831,366</b>		<b>\$1,897,921</b>	
<b>Program FTE</b>	8.00	0.00	8.00	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 2023: 10017A Office of Diversity and Equity

Beginning in FY 2024, funding for Multnomah Youth Commission (MYC) on-call staff will be reflected in the MYC program offer (10017B).

**Department:** Nondepartmental

**Program Contact:** Joy Fowler

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

The Multnomah Youth Commission (MYC) is the official youth policy body for Multnomah County and the City of Portland. There are 42 young adults, ages 13- 21, from majority Black, Indigenous and People of Color Communities (BIPOC), that strive to amplify youth perspectives on policy impacting and relevant to youth, their families, peers, and community. In addition to its commission role within local government, the MYC works to improve the community through Social Justice projects, and by shifting negative community perceptions about youth. 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 Description**

The Multnomah Youth Commission advises and offers recommendations on policies and programs that impact youth through focused, issue-specific committee work, the Elected Official Liaison program, and training and technical assistance. 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 is a nationally recognized model using participatory action research, policy creation and advocacy, and Youth-Adult Partnership as its foundational underpinnings.

The MYC has made an intentional and sustained effort over time to ensure that a majority of youth commissioners come from BIPOC Communities and embed equity and social justice into all of the work. MYC's current policy focus areas are driven and led by youth and selected through youth outreach and engagement. These projects empower youth to take the lead and work together to address issues most important to their communities, while highlighting and sharing ideas and experiences to build youth-led solutions. This policy and project work include the following:

- Transit Equity/TriMet Youth Pass for All
- Transforming Juvenile Probation
- Improving Youth/Police Relations
- Later High School Start Times To Combat Chronic Absenteeism
- Reducing Youth Sexual Assault and Harassment/Reporting in Schools
- Funding youth-led Environmental/Climate Justice Community Projects

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Youth Commission Meetings held	21	22	21	21
Outcome	Youth-led policies impacted and/or advocated for	12	12	8	12
Output	Number of partnerships established	12	12	14	14
Outcome	Number of Youth-led forums and/or events held	6	5	6	6

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$154,983	\$0	\$186,636	\$0
Materials & Supplies	\$20,017	\$0	\$21,014	\$0
Internal Services	\$0	\$0	\$11,435	\$0
<b>Total GF/non-GF</b>	<b>\$175,000</b>	<b>\$0</b>	<b>\$219,085</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$175,000</b>		<b>\$219,085</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 2023: 10017B Multnomah Youth Commission Support

In addition to our full-time MYC Sr Program Specialist, ODE has an on-call Program Aide. While their funding is not reflected in the FTE due to their status, their cost is reflected in the total dollars.

**Department:** Nondepartmental

**Program Contact:** Joy Fowler

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

Workforce equity requires the County identify and address structural and policy barriers to equal employment opportunity faced by our employees due to their protected class. In addition to aligning County stakeholders, implementing the WESP requires the robust engagement of employees directly impacted by racial disparities in guiding the vision and identifying recommendations for ratifying an updated Workforce Equity Strategic Plan. In addition, ODE’s emphasis on building strategic initiatives for the County will aid in program alignment and advancing short and long term goals related to and outside of the WESP.

**Program Description**

The Office of Diversity and Equity increased its staff capacity through a limited-duration position to initiate its planning and engagement process to update the WESP in the fall of 2022. The updated strategic plan is expected to provide recommendations beyond 2024. To maintain the fidelity of our organizational values described by our Equity and Empowerment Lens, the development and support of engagement processes need to expand and continue. This proposal supports transitioning the one-time, limited-duration investment to a full-time position within ODE. This full-time position will provide the necessary support to fulfill both the workforce equity goals and overarching ODE strategic initiatives which benefit the County as follows:

- Partnering with the Workforce Equity Manager to design an engagement process based on the principles of our Equity and Empowerment Lens
- Executing a stakeholder engagement process that supports the principles of our Equity and Empowerment lens through conversations, focus groups, listening sessions, surveys, and other methods of gathering and analyzing feedback
- Assist the Workforce Equity Manager with change management by supporting County leaders, departments, offices, and other stakeholders to implement the WESP and providing deeper level coordination and communication.

Updating the WESP will include stakeholders, including but not limited to the County's Chief Operating Officer, County leadership, Human Resources, Equity Managers, department equity committees, the Complaint Investigations Unit, Employee Resource Groups, and other County staff.

In alignment with the WESP, this role will also help drive ODE's strategic initiatives that support county-wide work, manage results and outcomes that are actionable and advance our commitment to equity by partnering with the Chief Diversity and Equity Officer to identify areas of opportunity; advise on strategy, recommend solutions related to advancing both ODE and county-wide short and long term goals through actionable steps.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of meetings engaging with project team leads on process design and updates.	N/A	4	4	10
Outcome	Updated WESP where all stakeholders are invited to engage in meeting outlined objectives.	N/A	N/A	85%	85%
Output	Number of stakeholder engagement process sessions.	N/A	10	10	15
Output	Number of WESP focus areas reviewed.	N/A	5	5	5

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$157,499	\$0
Contractual Services	\$0	\$0	\$80,000	\$0
Materials & Supplies	\$0	\$0	\$2,501	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$240,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$240,000</b>	
<b>Program FTE</b>	0.00	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 2023: 10017C WESP Update Planning and Engagement

This program adds 1.00 FTE Human Resources Analyst Senior (9748).

**Department:** Nondepartmental

**Program Contact:** John Wasiutynski

**Program Offer Type:** Existing

**Program Offer Stage:** 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 policies and 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. Equity and environmental justice are core guiding principles that shape the office's approach to policy and programs.

### Program Description

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 is not only committed to a healthy planet but also firmly roots our work in the County's mission to protect the most vulnerable in our community. This value shapes how we approach sustainability, an approach based on achieving social, economic, and environmental justice.

Major focus areas for FY 2023 include implementing the Climate Justice Initiative, 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, increase community resilience in the face of a warming climate, pursue policies that reduce human exposure to harmful air pollutants, and supporting a culture of resource-conservation in County operations. The Office 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; partnership and co-creation with frontline-led community based organizations and community members; and through research, data analysis, and reporting.

The Office will lead the Climate Action Plan update in a new direction, one fully rooted in a community vision of a just transition and that centers frontline community voices. This reimagining of climate action rooted in environmental justice and committed to a community led process of co-creation will produce a new type of climate action plan based on a community driven consensus on how to build a more resilient and decarbonized community. 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 prioritize the decarbonization of the electric grid.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of unique County employees engaged with programming offered by the Office of Sustainability.	1,032	500	684	800
Outcome	Decrease in community wide greenhouse gas emissions over 1990 levels based on trend line analysis.	25%	17%	20%	20%
Output	Total number of advisory committee meeting volunteer hours	216	100	200	200
Outcome	Percent Energy burdened Multnomah County Households	24%	24%	24%	24%

### Performance Measures Descriptions

Greenhouse gas emissions data are several years lagging, in this case the most recent year for which data is available is 2020. These data are also reported on a calendar year basis. Since 2020 data are impacted by the pandemic induced economic slow down, an emissions rebound is anticipated. An individual or family is considered energy burdened if they spend 6% or more of their income on energy costs. Energy burdened household data comes from Oregon Department of Energy's biannual report.

## Legal / Contractual Obligation

The Office of Sustainability will support the County's ability to obtain grant funding from both the state and Federal government in light of unpresidented funding being directed at emissions reduction, pollution reduction, and environmental justice communities.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$888,936	\$7,000	\$969,912	\$7,000
Contractual Services	\$16,558	\$42,749	\$17,390	\$42,749
Materials & Supplies	\$30,796	\$0	\$32,360	\$0
Internal Services	\$57,644	\$251	\$45,508	\$251
<b>Total GF/non-GF</b>	<b>\$993,934</b>	<b>\$50,000</b>	<b>\$1,065,170</b>	<b>\$50,000</b>
<b>Program Total:</b>	<b>\$1,043,934</b>		<b>\$1,115,170</b>	
<b>Program FTE</b>	6.00	0.00	6.00	0.00

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

## Explanation of Revenues

This program generates \$251 in indirect revenues.

Local - The Office of Sustainability has secured grant funding from the East Multnomah Soil & Water Conservation District, \$50,000 for the CY 2023.

## Significant Program Changes

**Last Year this program was:** FY 2023: 10018A Office of Sustainability

This program combines 10018C Climate Resilience Coordinator from FY 2023.

In FY 2023, the Office added a Senior Climate Resilience Policy Analyst position. This position will build on ongoing work to address community vulnerabilities to the impacts of the climate crisis. This will include partnerships with Multnomah County Communications, Emergency Management, Departments, other jurisdictional partners, and the community. The impacts of global heating are dramatically altering the local environment and creating unprecedented risks to community safety. This requires renewed emphasis on partnership, policy development, and program implementation.

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Community Reaps Our Produce and Shares (CROPS) is a Multnomah County initiative that began in 2009 and was established to address hunger, a growing public health concern, and its links to obesity and chronic diseases. The CROPS Farm, now under the management of Mudbone Grown, will become a hub for community access to fresh culturally appropriate food, and for culturally specific training of new farmers with a particular focus on Black and African immigrant farmers.

**Program Description**

In CY 2021 the County officially awarded a 5-year license for the use of the CROPS site to MudBone Grown, a local Black owned farming business specializing in growing organically grown food, and providing farm training to people who are Black, African, Indigenous and veterans. MudBone will operate the CROPS site as an incubator farm for beginning farmers and as a community training site.

In order to fulfill our goals of increasing access to culturally appropriate organically grown food and offering access to economic development opportunities for historically marginalized and discriminated against groups, particularly in relation to farm-land access, the site must be improved with farm infrastructure. The funds will support the creation of farm buildings, irrigation, greenhouse(s), access to electricity, and other related capital expenses that will allow new farmers to have access to a turn-key farm operation. This aspect of the project will be important because new farmers, particularly Black farmers, often lack access to land, and farm equipment and other infrastructure when beginning their business and building a market for their agricultural products.

The project will also integrate with the Multnomah County Health Department REACH program, helping to promote healthy, fresh, locally grown, and culturally appropriate fruits and vegetables through “prescription CSA shares” and institutional procurement. To date, the county has installed municipal water connection, irrigation infrastructure, completed demolition work, and is in the process of completing construction drawings and obtaining permits. We anticipate the construction of the access road and community-orchard to be completed by the end of the current fiscal year, FY 2023. In FY 2024 we anticipate construction of the barn and greenhouse to be completed..

Also, starting this spring, MudBone will begin sub-leasing to beginning farmers now that irrigation infrastructure has been installed.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of farmers using CROPS	0	4	3	4
Outcome	Increase number of Black farmers in Multnomah County	0	1%	75%	100%
Output	Volunteer hours	128	1,000	500	1,000

**Performance Measures Descriptions**

According to the USDA only 0.27% of all farmers in MultCo identify as Black. This small percentage is the result of hundreds of years of discriminatory practices by governments, especially the Federal Government. This project is a deliberate attempt to increase farm training, economic development and access to farmland for Black and African farmers, while also increasing access to fresh, local, organically grown produce and opportunities for culturally specific community engagement in a farm setting for people who are food insecure.

## Legal / Contractual Obligation

The County will utilize existing contracts and cooperative contracts to complete this work.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$0	\$500,000	\$400,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$400,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$500,000</b>		<b>\$400,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$500,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$0</b>

## Explanation of Revenues

In FY 2023, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding.  
In FY 2024, this program is funded with one-time-only General Fund.

## Significant Program Changes

**Last Year this program was:** FY 2023: 10094 ARP Office of Sustainability Food Access Focus

The program supports community recovery by promoting economic opportunity through access to farmland for beginning farmers and training opportunities, particularly in greenhouse propagation, for Black and African Immigrant farmers. The program will also address the ongoing issue of food insecurity through partnerships with the Health Department REACH program to increase prescription-CSA and institutional food purchases of local, culturally appropriate, organically grown produce.

Increased funding for improvements to the barn, road, parking, and greenhouse.

**Department:** Nondepartmental      **Program Contact:** John Wasitynski  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The June 2021 Heat Dome event resulted in 69 deaths from hyperthermia. Later that same summer, during a subsequent heat wave, another 3 people died from extreme heat, for a total of 72 deaths. These tragic deaths highlight the dangers posed by human-caused climate change, with extreme heat being just one manifestation of a global crisis. These funds will be used to plant one tree for each person who died from heat in the summer of 2021. Tree's will be planted in low tree canopy urban areas in the community, particularly areas identified as heat islands, eventually helping to lower ambient temperatures.

**Program Description**

Prior to June 2021, the highest temperature ever recorded in usually temperate Multnomah County was 107 degrees Fahrenheit, which happened in 1965 and again in 1981. Between June 25 and June 30, 2021, the county shattered that record with temperatures of 108, 112, and 116 degrees over three consecutive days. Temperatures remained high overnight during this period, providing little relief. Warm overnight temperatures over consecutive days — when homes and apartments without air conditioning do not cool down at night — are a primary driver of heat related illness, hospital visits and deaths during extreme heat events.

The extreme heat led to both an unprecedented response by the County and an unprecedented loss of life. Despite the largest sheltering operation for a heat event in our history, the Multnomah County Medical Examiner's data indicated that 72 people succumbed to hyperthermia in 2021. The majority of those who died were older, white and living alone in apartment buildings. In the County's "June 2021 Extreme Heat Event Preliminary Finding" report, planting trees in areas with low tree canopy and high urban heat island impacts was identified as a key long-term intervention necessary to protect the community from future heat events.

The June 2021 severe heat event would have been virtually impossible without human-caused global warming. Researchers have estimated that the extraordinary temperatures were a once-in-1,000-year event. However, if current greenhouse gas emissions continue, an event this extreme could happen every five to 10 years by the year 2040. The purpose of this program-offer is to both honor the lives of those who died as a result of the excessive heat and reduce the risk for others during future events. The trees will be planted by community members during a tree planting memorial event.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Host one volunteer planting and memorial event with 50 volunteers.	N/A	N/A	N/A	200 hours
Outcome	Plant 72 trees	N/A	N/A	N/A	72

**Performance Measures Descriptions**

Output - 50 volunteers for 4 hours, for a total of 200 hours.  
Outcome - Plant 72 street trees or yard trees that are close to the street.

## Legal / Contractual Obligation

The County will look to procure services for street tree planting and for organizing a community memorial and tree planting event. The County and contracting partner will recruit property owners who will not only welcome a street tree adjacent to their property, but who are specifically committed to caring for a memorial tree.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$0	\$32,200	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$32,200</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$32,200</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:** John Wasiutynski  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

This program builds off of the feasibility planning that was funded in FY 2023 to enhance community resilience in East Multnomah County (“East County”). This program will support implementation of priority recommendations produced by the East County Resilience Network (ECRN) to strengthen East County’s ability to prepare for, respond to and recover from natural hazard risks, such as severe weather and wildfire fueled by climate change, or the eventual Cascadia Subduction Zone (CSZ) earthquake. This program will provide funding to augment a County-owned building located in Gresham with resilient infrastructure; continue building capacity in community based organizations (CBOs) active in the ECRM; and fund CBOs serving East County to participate in the Office of Sustainability’s Climate Justice Plan development.

### Program Description

Multnomah County is threatened by natural hazards that pose a severe risk including the eventual CSZ earthquake and seasonal natural hazards that are being made worse by global heating, such as wildfire, wildfire smoke, extreme heat, and severe winter storms. Resilience is connected to physical infrastructure, social cohesion, socio-economic status and income. East County is lower income, has fewer social services and emergency response resources, less access to transit, and other barriers which inhibit the community’s resilience. Gentrification and exclusionary policies have forced lower income households, and households of color, into East County. In response to these patterns, the County aims to continue increasing services in East County and to help fortify infrastructure in light of natural hazards. A “Resilience-Hub” (“Hub”) can support community resilience through connection to services, enhanced social cohesion, and by serving as a disaster recovery node.

This project will build off of work completed in FY 2022 and FY 2023, and will begin the first phase of implementation of a pilot Hub in East County. The pilot Hub will be located at the Cook Plaza building, which was purchased by the Joint Office of Homeless Services to be a resource center for community members experiencing homelessness, who are among the most vulnerable in the face of natural disasters. This program will provide funding for capital improvements to Cook Plaza to support access to electricity in the event of a prolonged power outage, as recommended in a Resilience Hub feasibility study conducted by a contractor. Access to power is a critical resource during a crisis event as it provides cooling/heating, power for medical devices, connection to telecommunications, and refrigeration.

This project will also provide funding to continue building capacity for CBOs participating in the East County Community Resilience Network by providing translation services of emergency preparedness resources, holding engagement summits focused on community resilience, and exploring the integration of best practices for emergency preparedness. Lastly, this program will support the participation of organizations that serve the unique needs of East County in the Office of Sustainability’s Climate Justice by Design process, which will serve as a critical part of the County’s plan for climate action.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Resilience Summits held	N/A	N/A	N/A	2
Outcome	Community-based organizations engaged in resilience building activities	N/A	N/A	N/A	10
Output	Capital improvements made	N/A	N/A	N/A	1

### Performance Measures Descriptions

- 1) Resilience Summits with coalition of community organizations (2 per year)
- 2) Community-based organizations engaged in resilience building activities, such as the Resilience Summits
- 3) Capital improvement made to Cook Plaza to support emergency power (as specified by architectural assessment)



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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:** FY 2023: 10018D Supporting Community Resilience in East County

This program builds off the work completed in the following FY 2023 program offers:  
 10018D - Supporting Community Resilience in East County (one-time-only)  
 25157 - YFS East Multnomah Resilience Hub (one-time-only)

**Department:** Nondepartmental

**Program Contact:** Jennifer Matsumura

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

### Executive Summary

The Regional Arts & Culture Council (RACC) provides contract services to Multnomah County. Formerly a County bureau (as the Metropolitan Arts Commission), since 1995 RACC has been a 501(c)(3) nonprofit serving the Portland Metro area. With 50 years of community-based engagement with our county partners, we continue to leverage support from other regional government partners and private donors, including foundations and trusts. Ultimately, RACC invests much more in arts and culture than the County can afford to do alone—we leverage public dollars for the common good. As you will read in this report, these investments create vibrant neighborhoods, enhance our children’s education, and fuel the creative economy with measurable economic benefits for Multnomah County.

### Program Description

RACC plays a vital role in Multnomah County’s economic and community development efforts. RACC leverages private and public dollars to provide artists, creatives, and arts organizations with base financial support needed to serve the community; our Advocacy & Engagement program liaises between city, county, and national offices, including state arts orgs and congressional leaders regarding impactful legislation affecting the arts and culture in our region. We advocate for and support community still experiencing impacts from COVID-19. A RACC team member serves on the Planning Management Team for the regional cultural plan process. RACC’s Advocacy program provides a community-based equity lens with over 50 years’ worth of arts and culture knowledge and expertise. We leverage community with community. RACC’s nationally acclaimed Public Art program, including the Multnomah County 2% for Art Ordinance, integrates a wide range of art into public spaces. This program is reported on via a separate reporting mechanism. We sit on local and national panels to enrich the narrative and the conversation.

RACC continues to focus and advocate for a well-rounded arts education to uplift arts and culture in all of our districts in the county. Our advocacy into East County has highlighted, and continues to focus on, inequity in the distribution of the Arts Education and Access Fund (AEAF) monies specifically within Reynolds School District. We will continue to pursue equitable access to arts education as we lean into East County through data collection and the artlook@oregon platform, administered by RACC. RACC has partnered and held listening sessions with Congresswoman Bonamici regarding her Arts Education for All initiative. We also addressed the mental health needs of K-12 arts educators and offered free supportive Trauma Informed Care workshops. An expanded opportunity for Multnomah County to support this is included with this budget request. RACC invests in programming that supports vulnerable populations and marginalized communities including low-income Oregonians, veterans, communities of color, the LGBTQIA+ community, East County, seniors, and people experiencing homelessness. RACC’s community services include workshops for artists, consulting for arts organizations, and a variety of printed, digital, and electronic resources. RACC serves as a fiscal sponsor for the Multnomah County Cultural Coalition as well as other local organizations.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Dollars leveraged from other sources (FY 2022 includes ARPA and NEA funding)	\$6.8 million	\$8 million	\$12 million	\$12.8 million
Outcome	Direct Investment in artists & arts & culture organizations (includes ARPA and NEA funds)	\$9.2 million	\$4.5 million	\$6.1 million	\$7.1 million
Output	RACC-funded artists and creatives who identify as immigrant or refugee	11%	N/A	13%	15%
Output	RACC-funded artists who identify as Black, Indigenous, and People of Color and/or reside in East County	61%	45%	45%	45%

### Performance Measures Descriptions

RACC’s work in the community is guided by our pledge towards increasing equity and access. Our performance measures speak to an increasing engagement across a spectrum of community groups and individuals. The new measurements and the ones tracked for FY 2023 from 2022 will be reported on an annual basis and can be informed by Multnomah County’s access and equity goals.

## Legal / Contractual Obligation

RACC operates as a steward of Multnomah County investments in arts and culture via contract #440000704.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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:** FY 2023: 10020 Regional Arts & Culture Council

For FY 2024, RACC will be re-aligning its Programs offering under the umbrella of a central Program hub. This will ensure cohesion and organization-wide engagement at the Programs. We are excited to bring this synthesis to the organization and the community. The Arts Education Program will focus more deeply in K-12 services. The relocation of the AEAF (Arts Tax Ordinance) to the City of Portland (for City program streamlining) has enabled RACC to take a holistic approach for how we support and advocate for our arts teachers, liaisons, coordinators, and parents. The ramping up of the artlook@oregon online tool will support this work and continue to reveal inequities and opportunities that exist within our communities around student access to art in their well-rounded curriculums.

**Department:** Nondepartmental      **Program Contact:** Christian Elkin  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program accounts for facilities charges for the State Courts sites downtown and in East County and for the Tax Supervising & Conservation Commission. It also accounts for a portion of the debt service on the East County Courthouse, for pass-through payments to the Multnomah Law Library, and the State Watermaster.

**Program Description**

ORS 1.185 requires that counties provide court space for the operation of the state circuit courts. Multnomah County operates courts at the downtown Courthouse, the Multnomah County Justice Center, the Donald E. Long Juvenile Justice Center, and at the East County Courthouse. County-provided courtroom space is a key resource in the County's criminal justice system. Multnomah County courts' central and eastside locations allow easy access to the court system, provide visibility into the public safety system at work.

The County's 17 story courthouse located at the west end of the Hawthorne Bridge which opened in 2020, houses 44 courtrooms and staff from the District Attorney's Office. The courthouse was built to acquire a Leadership in Energy and Environmental Design. LEED-Gold certification using less water and energy and reduce greenhouse gas emissions.

The County's Facilities Division is responsible for operating and maintaining County courtrooms. The Facilities Division provides services ranging from planning, construction, and building operations and maintenance to cleaning the buildings and maintaining the grounds for courtrooms located in Multnomah County's owned and leased facilities.

This program also includes:

- A \$5,000 pass thru payment for the State Watermaster.
- Funding for the Law Library. The 2011 Legislature passed several bills that changed the way court fees are allocated among local programs. One local program, the Multnomah Law Library, is a recipient of an allocation of fees through Multnomah County to the Law Library. The allocation will be monitored to see if changes are made for the upcoming State biennium.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Preventive maintenance work order costs as a percent of total maintenance work order costs	42%	45%	41%	45%
Outcome	Customer satisfaction surveys with a result of "very satisfied" out of 100%	82%	90%	85%	85%

**Performance Measures Descriptions**

These measures are the same as those used for the County's other building operations, see program offer 78202.

PM #1 - The percentage of proactive maintenance work demonstrates the level of effort on proactive monitoring and maintenance of building systems. Focus on preventive maintenance maximizes life cycle and reduces cost of breakdown repair.

PM #2 - Customer satisfaction surveys: Percentage of submitted customer reviews marked "very satisfied" out of 100%

## 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$1,205,000	\$0	\$1,205,000	\$0
Materials & Supplies	\$174,877	\$0	\$183,621	\$0
Internal Services	\$10,900,571	\$1,773,508	\$11,709,799	\$1,765,188
<b>Total GF/non-GF</b>	<b>\$12,280,448</b>	<b>\$1,773,508</b>	<b>\$13,098,420</b>	<b>\$1,765,188</b>
<b>Program Total:</b>	<b>\$14,053,956</b>		<b>\$14,863,608</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Fees, Permits & Charges	\$1,200,000	\$0	\$1,200,000	\$0
<b>Total Revenue</b>	<b>\$1,200,000</b>	<b>\$0</b>	<b>\$1,200,000</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 \$413,475 per year (net) from FY 2012 through FY 2020, and \$1.7 million per year from FY 2021 through FY 2030.

## Significant Program Changes

Last Year this program was: FY 2023: 10021 State Mandated Expenses

**Department:** Nondepartmental      **Program Contact:** Jeff Lewis  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 78003  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Multnomah County Central Courthouse (MCCCH) is located in downtown Portland. The downtown area is experiencing a significant increase in property damage and graffiti. In FY 2023, Facilities and Property Management (FPM) contracted for expanded overnight security services to deter such activities. This program offer will fund the continuation of these services in FY 2024.

**Program Description**

This program funds the continuation of overnight security services for the MCCCH with the goal to reduce property damage to the building and to protect the County's newly built asset. These expanded services have significantly reduced property damages to the building and have been a deterrent.

Future security needs at the site will be included in the countywide safety and security efforts to plan, develop, and implement a security program led by the Department of County Assets in coordination with the Chief Operating Officer and countywide leadership.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of overnight incidents identified: 136	N/A	0	136	0
Outcome	Reduction in overnight incidents identified	N/A	100%	34	100%

**Performance Measures Descriptions**

Measure the number of incidents and amount of property damage due to continued funding of overnight security at the MCCCH. Incidents tracked include Vandalism, graffiti, alarm responses, trespasses, and unsecured access. Reduce identified incident types by 25%

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Internal Services	\$165,000	\$0	\$191,100	\$0
<b>Total GF/non-GF</b>	<b>\$165,000</b>	<b>\$0</b>	<b>\$191,100</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$165,000</b>		<b>\$191,100</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:** FY 2023: 10021B Courthouse Security

In FY 2023, this program was funded with one-time-only General Fund and is again asking for one-time-only funds while the security assessments are conducted.

**Department:** Nondepartmental

**Program Contact:** Jeff Renfro

**Program Offer Type:** Existing

**Program Offer Stage:** Adopted

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

This program offer accounts for Business Income Tax (BIT) collected on behalf of and passed through to the east county cities of Gresham, Troutdale, Fairview, and Wood Village. These payments are prescribed in an intergovernmental agreement (IGA) that shares revenue from the BIT. Under the terms of this agreement, the four cities share 25% of the first 0.68% of BIT collections. In March 2020, the BCC made adjustments to the BIT affecting the rate, as well as the owners compensation deduction and gross receipts adjustments.

**Program Description**

The BIT is imposed on the net income derived from business activity within Multnomah County. The BIT was originally set at a rate of 0.6% of net income. In 1985, the tax was increased to 0.95%. In 1987, the tax was further increased to 1.46%. In 1993 the rate was reduced to 1.45% due to the consolidation of collections with the City of Portland's Business License Fee (BLF). The County entered into a tax sharing agreement with the four east county cities, in part to acknowledge the value of business income derived from those cities. The County acts as a fiduciary agent for the four east county cities.

In March 2020, the Board of County Commissioners increased the tax to 2.00%, and increased the owners compensation deduction and gross receipts adjustments. The percent of total collections passed-through was updated to dedicate a portion of the new revenue to East County Cities.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Regularly share updates on current collections with East County Cities.	N/A	6	8	6
Outcome		N/A	N/A	N/A	N/A

**Performance Measures Descriptions**

Measure refers to number of BIT revenue update emails sent to East County Cities.



## 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 0.68% BIT increment.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$11,560,000	\$0	\$13,181,051	\$0
<b>Total GF/non-GF</b>	<b>\$11,560,000</b>	<b>\$0</b>	<b>\$13,181,051</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$11,560,000</b>		<b>\$13,181,051</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

The BIT pass-through is 25% of the first 0.68% of BIT collections.

## Significant Program Changes

**Last Year this program was:** [FY 2023: 10022 Pass-Through Payments to East County Cities](#)

**Department:** Nondepartmental

**Program Contact:** Eric Arellano

**Program Offer Type:** Existing

**Program Offer Stage:** 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 26-118 in November 2010 that provides for levy support at the rate of \$0.05 per thousand of assessed value and renewal of the second five-year period at the same rate. In May of 2021, measure 26-174 approved a third levy renewal from fiscal years 2021-22 through 2025-26.

**Program Description**

OHS operates the Oregon Historical Society Museum, the 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 and was overwhelmingly renewed by Multnomah County voters in 2016 and 2021) has provided basic operational support for our core programs, including our exhibit series; statewide education programs; public programs; Digital Collections website and online digital history resources like The Oregon Encyclopedia; research library services as well as funding to underwrite the improved hours of service in the library, free admission to residents of Multnomah County, improved collections development and care. OHS is committed to serving the diverse communities of Multnomah County and the State of Oregon, and it reflects that commitment in every aspect of its operations.

Four East Multnomah County historical societies-- East County Historical Organization, Gresham Historical Society, Troutdale Historical Society, and Crown Point Country Historical Society-- together now receive \$200,000 annually from the levy proceeds. These funds are critical to the continued operation of these four organizations. The levy allocates the balance, estimated at \$3.2 million in FY 2022-23 to the Oregon Historical Society for its programs and operations.

The 2022 OHS exhibit series portrayed connections to the past and to one another through various art forms. The photography, paintings, music, even the art of a carousel, were selected to give a sense of time, place, and who we are. Last year's informative exhibits included: I Am An American: Stories of Exclusion and Belonging (The Immigrant Story presents an exhibition that explores the different facets of Asian American experiences) Frances Stilwell: Oregon's Botanical Landscape featuring paintings of Oregon's native plants in their natural habitats; and twin exhibits highlighting the natural beauty of Oregon's State Parks, A Walk in the Park with images from OHS's collection and A Century of Wonder: Celebrating 100 Years of Oregon State Parks, that includes contemporary images of the parks. To complement the museum exhibit, highlights from A Century of Wonder were used to form a traveling exhibit.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Multnomah County residents admitted free of charge	3,890	17,500	8,382	9.640
Outcome	Improved library hours per week	32	32	32	32
Output	Increased number of public programs	187	205	100	100
Quality	Care of Collections through additional curator/registrar	0	0	1	0

**Performance Measures Descriptions**

While the lifting of many COVID-19 pandemic restrictions by the State and County allowed OHS to fully open and to sponsor in person lectures and programs, OHS continued to sponsor many virtual and hybrid programs. School tours also began to return in the fall of 2022. OHS continues to reach out to educators through an education-related E-Digest, and through in-person programs. A broader weekly e-digest is now sent out to over 20,000 subscribers. The annual Oregon History Day competition was held virtually but will return in-person in 2023.

## 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 \$200,000 per year from the levy proceeds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$3,643,039	\$0	\$3,873,074
Internal Services	\$0	\$29,000	\$0	\$29,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,672,039</b>	<b>\$0</b>	<b>\$3,902,074</b>
<b>Program Total:</b>	<b>\$3,672,039</b>		<b>\$3,902,074</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$0	\$3,646,083	\$0	\$3,861,074
Interest	\$0	\$3,000	\$0	\$3,000
Beginning Working Capital	\$0	\$22,956	\$0	\$38,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,672,039</b>	<b>\$0</b>	<b>\$3,902,074</b>

## Explanation of Revenues

This program generates \$29,000 in indirect 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 2023: 10023 OHS Local Option Levy

**Department:** Nondepartmental

**Program Contact:** Jeff Renfro

**Program Offer Type:** Existing

**Program Offer Stage:** 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.

**Program Description**

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. The law was not 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	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$80,125	\$0	\$80,125
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$80,125</b>	<b>\$0</b>	<b>\$80,125</b>
<b>Program Total:</b>	<b>\$80,125</b>		<b>\$80,125</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$80,000	\$0	\$80,000
Interest	\$0	\$100	\$0	\$100
Beginning Working Capital	\$0	\$25	\$0	\$25
<b>Total Revenue</b>	<b>\$0</b>	<b>\$80,125</b>	<b>\$0</b>	<b>\$80,125</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 \$60,000 over the past several years.

## Significant Program Changes

Last Year this program was: FY 2023: 10024 County School Fund

**Department:** Nondepartmental

**Program Contact:** Eric Arellano

**Program Offer Type:** Existing

**Program Offer Stage:** 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 Description**

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 estimated the total economic impact at \$773 million and over 7,300 jobs.

The Visitors Facilities Intergovernmental Agreement (VFIGA) was amended in FY 2020. 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 amended agreement established the Multnomah County "Livability and Safety Support Services" allocation. The funding supports services and programs for people experiencing homelessness, or who are at risk of becoming homeless, and services and programs addressing the community livability and safety concerns associated with homelessness.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Impact (\$ in millions) of Convention Center Visitors to County Economy	487	550	579	670
Outcome	Number of Employees in Travel/Tourism Industry (Est.)	4,810	5,300	5,378	6,064

**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. Due to the COVID-19 pandemic, the Convention Center saw a reduction in event (cancelled or delayed) activity but has steadily recovered in FY 2022-23. The Convention Center has served as a shelter during emergency events (warming or cooling) for those individuals experiencing homelessness.

## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Contractual Services	\$0	\$35,315,375	\$0	\$41,576,080
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$35,315,375</b>	<b>\$0</b>	<b>\$41,576,080</b>
<b>Program Total:</b>	<b>\$35,315,375</b>		<b>\$41,576,080</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Taxes	\$0	\$35,225,475	\$0	\$41,430,330
Interest	\$0	\$8,000	\$0	\$10,000
Beginning Working Capital	\$0	\$81,900	\$0	\$135,750
<b>Total Revenue</b>	<b>\$0</b>	<b>\$35,315,375</b>	<b>\$0</b>	<b>\$41,576,080</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 2023: 10025 Convention Center Fund

The travel industry has been one of the hardest hit by the COVID-19 pandemic. Lodging occupancy rates hit historic lows locally during peak of COVID-19 pandemic. Transient Lodging Taxes have seen steady improvement in FY 2022 and into FY 2023 but still well below peak level collections. Transient Lodging Taxes are estimated to be at 77% of peak level in FY 2023. Motor Vehicle Rental Taxes have recovered much faster, tax collections recovered to peak levels in FY 2022.

**Department:** Nondepartmental

**Program Contact:** Eric Arellano

**Program Offer Type:** Existing

**Program Offer Stage:** 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 Description**

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 2017 (\$164.1 million) - Full Faith & Credit
- Series 2019 (\$16.075 million) - Full Faith & Credit (Bank Placement)
- Series 2021 (\$89.58 million) - Full Faith & Credit (Refunding - Sellwood Bridge Bonds)
- Series 2022 (\$25.095 million) - Full Faith & Credit (Bank Placement)

The outstanding debt issues have funded a number of capital improvements and acquisitions. These include the construction of the East County Courthouse and the new Multnomah County Courthouse, the Sellwood Bridge replacement project, the new Health Department Headquarters building, the implementation of a new ERP system, and the NEPA/Design/Right of Way phases of the Burnside Bridge replacement project. All binding obligations were approved by the Board of County Commissioners.

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.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$3,000	\$0	\$3,000
Debt Service	\$0	\$29,467,603	\$0	\$30,703,930
Unappropriated & Contingency	\$0	\$2,724,647	\$0	\$1,171,700
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$32,195,250</b>	<b>\$0</b>	<b>\$31,878,630</b>
<b>Program Total:</b>	<b>\$32,195,250</b>		<b>\$31,878,630</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$237,730	\$0	\$212,600
Other / Miscellaneous	\$0	\$28,231,873	\$0	\$22,710,330
Financing Sources	\$0	\$0	\$0	\$6,783,000
Interest	\$0	\$50,000	\$0	\$60,000
Beginning Working Capital	\$0	\$3,675,647	\$0	\$2,112,700
<b>Total Revenue</b>	<b>\$0</b>	<b>\$32,195,250</b>	<b>\$0</b>	<b>\$31,878,630</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.

In FY 2024, General Fund one-time-only resources will be used pay for last year of debt service for the ERP portion of the FFC Series 2017 Bond.

## Significant Program Changes

**Last Year this program was:** FY 2023: 10026 Capital Debt Retirement Fund

In September of 2022, the County financed a portion (30%) of the Design and Right of Way phase of the Burnside Bridge Replacement Project totaling \$25.095 million. The financing was a FFC Direct Bank Placement and will fully mature in fiscal year 2032.



## Legal / Contractual Obligation

The County is authorized by ORS 287A.100 to issue general obligation bonds to finance capital costs if such financing is approved by a majority of the governing body. Principal and interest on the voter approved General Obligation Bonds are a binding debt that the County must pay. The property tax levy used to pay the debt is outside of the property tax constitution limits imposed by State Ballot Measure #5 approved in 1990 and State Ballot Measure #50 approved in 1997.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Debt Service	\$0	\$51,974,193	\$0	\$53,808,115
Unappropriated & Contingency	\$0	\$799,082	\$0	\$1,893,900
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$52,773,275</b>	<b>\$0</b>	<b>\$55,702,015</b>
<b>Program Total:</b>	<b>\$52,773,275</b>		<b>\$55,702,015</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$0	\$52,419,815	\$0	\$53,808,115
Interest	\$0	\$100,000	\$0	\$175,000
Beginning Working Capital	\$0	\$253,460	\$0	\$1,718,900
<b>Total Revenue</b>	<b>\$0</b>	<b>\$52,773,275</b>	<b>\$0</b>	<b>\$55,702,015</b>

## Explanation of Revenues

Revenues to pay the debt service is derived from property taxes and interest earned on the cash balances.

## Significant Program Changes

Last Year this program was: FY 2023: 10027 Library GO Bond



## 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

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$25,461,495	\$0	\$455,495
Debt Service	\$0	\$29,675,000	\$0	\$31,325,000
Unappropriated & Contingency	\$0	\$40,092,116	\$0	\$44,356,667
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$95,228,611</b>	<b>\$0</b>	<b>\$76,137,162</b>
<b>Program Total:</b>	<b>\$95,228,611</b>		<b>\$76,137,162</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Other / Miscellaneous	\$0	\$35,082,027	\$0	\$34,108,050
Financing Sources	\$0	\$25,000,000	\$0	\$0
Interest	\$0	\$315,000	\$0	\$700,000
Beginning Working Capital	\$0	\$34,831,584	\$0	\$41,329,112
<b>Total Revenue</b>	<b>\$0</b>	<b>\$95,228,611</b>	<b>\$0</b>	<b>\$76,137,162</b>

## Explanation of Revenues

Interest earnings on the fund balance and service charges are assessed to departments as a percentage of payroll. In FY 2024, departments will pay 6.50% of payroll costs toward the retirement of the Pension Obligation Bonds.

## Significant Program Changes

**Last Year this program was:** FY 2023: 10028 PERS Pension Bond Sinking Fund

The County established a PERS side account (amount \$25 million) with Oregon PERS in FY 2023, rate relief to begin 7/1/2023. The side account will help mitigate rising PERS costs by providing PERS rate relief. FY 2024 budgeted expenses 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

**Program Offer Stage:** Adopted

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

### Executive Summary

Work experience is critical for marginalized youth to successfully transition into adulthood and toward economic self-sufficiency. In alignment with local violence prevention strategies and youth wellness efforts, this program ensures training, coaching, and job placement for youth who face barriers to employment.

### Program Description

The program supports key interventions to help stabilize vulnerable individuals, reduce recidivism rates, mitigate risk behavior, and create pro-social opportunities in the lives of low-income and disadvantaged youth by connecting them to supported learning experiences and paid work.

The program is coordinated with regional workforce partners and community-based organizations to create a community of practice that supports wellbeing and financial independence for young people. Partners assist in identifying, recruiting and enrolling youth as well as coaching and mentoring.

SummerWorks, a key component of this program, enables youth ages 16 to 24 to gain valuable work experience through paid training, virtual internships, traditional work experiences, and learning opportunities at Multnomah County or in partnership with external work sites that support the County's mission.

FY 2023 funding sustained youth engagement efforts and continued program expansion to offer opportunities for youth year-round (October to May) in addition to SummerWorks (June to September).

Youth Opportunities and Workforce Development will continue the second year pilot of the community leadership and career development program for young Black men ages 16 to 21. The pilot includes two cohorts of youth run during the school year and through the summer. Participants engage with civic partners and stakeholders including community members, law enforcement, elected officials and criminal justice practitioners on issues of public safety, racial equity, and system change. These learning opportunities are followed by internships in various offices related to the criminal legal system, social services and community development.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of participating youth*	320	188	248	200
Outcome	Percentage of youth who complete training and internship hours	89%	80%	84%	80%
Outcome	Percentage of participating youth experiencing barriers to employment**	96%	90%	90%	90%
Outcome	Percentage of youth of color participating	76%	70%	70%	70%

### Performance Measures Descriptions

\*Defined as youth completing 80% of planned work hours or learning opportunities, and received a positive evaluation from their work site supervisor.

\*\*Barriers to employment are self-reported and include, but are not limited to disability, homelessness, criminal justice involvement, immigrant/refugee status, and engagement with the foster care system.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$158,498	\$0	\$180,394	\$0
Contractual Services	\$597,040	\$0	\$626,900	\$0
Materials & Supplies	\$5,998	\$0	\$6,306	\$0
Internal Services	\$5,764	\$0	\$3,940	\$0
<b>Total GF/non-GF</b>	<b>\$767,300</b>	<b>\$0</b>	<b>\$817,540</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$767,300</b>		<b>\$817,540</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 2023: 10029A Youth Opportunity and Workforce Development

- This program combines 10029B Youth Opportunity and Workforce Development - Expansion from FY 2023.
- Persistent impacts from COVID-19 included navigating social distancing guidelines, and increased virtual opportunities and paid training due to fewer in-person internship worksites. During COVID the program model was shifted to Learn and Earn allowing the program to serve more youth who worked or learned for less than 160 hours (the standard for in-person internships). We expect more in-person opportunities in FY 2024 moving back toward 160 hours per internship or work experience.
- In FY 2024 this program includes \$50,000 to continue the second year of the community leadership and career development pilot program for young Black men ages 16 to 21.

**Department:** Nondepartmental      **Program Contact:** Jeff Renfro  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

In FY 2023, several large bargaining units completed successor bargaining. These new contracts featured retention incentives that would be paid out as two lump-sum payments. The Chair chose to extend the retention incentives to most County employees. The specific details of the payments differ by bargaining unit. The first payments retention incentive payments were paid out in FY 2023. This program offer budgets the second retention incentive payment.

**Program Description**

The majority of Multnomah County employees entered FY 2023 with an open labor contract. Successor bargaining for all bargaining units included proposals meant to increase employee retention. The final agreements for each bargaining unit included retention incentives, paid out as two lump-sum payments. The specifics of the payments differ by bargaining unit, but AFSCME Local 88 retention incentives are an FY 2023 payment of 2% of employee pay with a minimum of \$2,500 and an FY 2024 payment of 1% of employee pay with a minimum of \$2,000.

In part to reward Multnomah County employees for the extraordinary level of work provided during the Pandemic and to increase retention, the Chair chose to extend retention incentive payments to most County employees. The first payment was made in FY 2023. ARP resources were used to pay the retention incentives for eligible employees.

This program offer budgets the second retention incentive payment, to be paid out in July 2023. ARP resources will not be used for eligible employees, to preserve ARP funding to winding down pandemic-era programming. The second payment will be covered by One-Time-Only General Fund resources derived from FY 2022 departmental underspending and FY 2022 revenue collections above the forecast. Retention Incentives for Library employees are covered by Library District funding, and are budgeted in Library program offers.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of employees receiving retention incentive payment.	N/A	N/A	N/A	5,073
Outcome	% of employee receiving payment on time.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$14,303,913	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$14,303,913</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$14,303,913</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

The payments are made using One-Time-Only General Fund revenues, derived from FY 2022 departmental underspending and FY 2022 revenue collections above the forecast. The revenue is budgeted as BWC in the General Fund Revenues Program Offer (95001).

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental

**Program Contact:** Christian Elkin

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

**Executive Summary**

In FY 2024, the Board of County Commissioners will have a newly elected commissioner in District 3. This program requests one-time-only funding for the administrative and operational costs associated with the leadership changes.

**Program Description**

In FY 2024, the Board of County Commissioners will have a newly elected commissioner in District 3. With these changes come administrative and operational expenses associated with both the outgoing and incoming staff. These expenses may include leave accrual payouts for staff who leave and set-up expenses for the newly elected District 3 Commissioner and staff.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output		N/A	N/A	N/A	N/A
Outcome		N/A	N/A	N/A	N/A

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$5,000	\$0
Materials & Supplies	\$0	\$0	\$10,000	\$0
Internal Services	\$0	\$0	\$5,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$20,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$20,000</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:** Anna Allen

**Program Offer Type:** New

**Program Offer Stage:** Adopted

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

### Executive Summary

Multnomah County will support Indigenous placemaking by funding the The Center for Tribal Nations (CTN), a Native-led, mixed-use location that will include cultural, office, educational and commercial space. The CTN will act as a cultural embassy, by serving as a vehicle for cultural exchange and education. With nearly 90,000 Native peoples living in the metropolitan area, the County has a responsibility to support the creation of innovative spaces like the CTN, which colocates services that align with the County's mission, vision, and values.

### Program Description

Research demonstrates the efficacy of culturally-responsive services led by community based organizations who hold strong relationships with diverse communities in Multnomah County. The creation of a Center for Tribal Nations and a waterfront education park developed by tribes, Native organizations, and community partners is an opportunity to restore Native communities' presence along the Willamette River, and address shared challenges of sustainability, resilience, and inclusion.

Phase one of the planning work recently concluded. During that process, the Affiliated Tribes of NW Indians, Oregon Native American Chamber, and other partners led a lengthy engagement process that brought together tribes, tribal organizations, and the Portland metro area Native American community to seek their ideas, identify needs, and explore development opportunities for the Center.

This one-time-only program offer supports the next stage of bringing this project to fruition. Phase two, which is already underway, involves design and development led by the Oregon Native Chamber. This funding will support a deeper examination of siting housing, health and social services, and addressing other community needs through the CTN.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	A completed feasibility study	N/A	N/A	N/A	Yes
Outcome	Improved infrastructure to better serve Native American communities and tribes	N/A	N/A	N/A	Yes
Output	1 year of CTN Advisory Committee meetings attended	N/A	N/A	N/A	90%
Outcome	Restored presence of Native communities along the Willamette River in Multnomah County	N/A	N/A	N/A	Yes

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
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>	
<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:** Andrea Damewood  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Complaints Investigation Unit, directed by the Deputy Chief Operating Officer, investigates discrimination and harassment complaints based on a protected class made by County employees. CIU allows for countywide coordination and tracking of the investigations and themes. The centralized placement of the complaints unit is outside of a department and helps employees to come forward when they may otherwise feel uncomfortable reporting to their manager or department, fosters equitable outcomes for employees through the cultural competence of its staff, and creates countywide consistency in the protected class complaint process. Complaints unit staff are knowledgeable and experienced with the many aspects of discrimination and harassment.

**Program Description**

The unit employs 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 unit meets with department and County leadership on a regular basis to discuss investigations and themes.

In addition to conducting investigations, the Complaints Investigation Unit:

- Creates standardized investigation procedures to help employees have the same experience throughout the organization.
- Works closely with Departmental HR, Office of Diversity and Equity and Organizational Learning to find appropriate ways to resolve complaints that may not require a full investigation and ensure proper corrective action is taken.
- Trains HR staff and managers on best practices for conducting non-protected class investigations that departments are responsible for.
- Tracks protected class complaints and reports key themes to County leadership.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Serve as main point of reporting and inquiry for protected class complaints.	92	100	100	100
Outcome	Average number of days investigations completed.	125	100	113	100
Output	Centrally investigate discrimination and harassment complaints filed by employees (except MCSO & DA).	39	50	50	50

**Performance Measures Descriptions**

CIU spends significant time handling cases that do not go to investigation, performing intakes, gathering information in order to make case handling recommendations, and meeting with Depts. and other parties to ensure a proper handoff of cases that are not appropriate for investigation. The first output reflects the total number of inquiries or reports that come to the CIU; while outcome two is the number of days on average it takes for the investigation to take place. The third output is the number of inquiries that reflect the number of inquiries that come to CIU that become full protected class investigations.

## Legal / Contractual Obligation

The Complaints Investigation Unit is responsible for identifying potential violations of Multnomah County personnel rules, which are based on state and Federal laws.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$891,258	\$0	\$958,708	\$0
Contractual Services	\$27,300	\$0	\$28,670	\$0
Materials & Supplies	\$87,495	\$0	\$91,890	\$0
Internal Services	\$121,345	\$0	\$111,918	\$0
<b>Total GF/non-GF</b>	<b>\$1,127,398</b>	<b>\$0</b>	<b>\$1,191,186</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,127,398</b>		<b>\$1,191,186</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 2023: 10040A Complaints Investigation Unit

**Department:** Nondepartmental      **Program Contact:** Andrea Damewood  
**Program Offer Type:** New      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Complaints Investigation Unit (CIU), directed by the Deputy Chief Operating Officer, investigates discrimination and harassment complaints based on a protected class made by County employees. This program funds a position to provide coaching on best practices to managers and HR partners; resolving cases using alternative dispute resolution prior to a case becoming a protected class complaint; and following up with those involved in protected class complaints. This work includes mediation, team building, training, facilitation, restorative justice, etc.

**Program Description**

This program will fund 1.00 FTE that will:

- Work with participants following a Protected Class investigation to determine what steps could be taken to provide restoration for the individual(s) involved, and, when necessary, the larger workgroup.
- Provide alternative dispute resolution in conflicts that may otherwise result in a protected class complaint
- Create recommendations for resolution best practices.
- Monitor cases post-investigation to ensure restoration and alternative dispute resolutions are implemented by individuals and Departments
- Provide coaching to involved HR partners and managers on restorative practices.
- Work collaboratively with reporting party in CIU case to assess needs and make a plan or work collaboratively with the department to assess workgroup needs throughout the investigation and beyond.
- Remain in communication with CIU investigators during the course of their cases and at the completion of a report to have full awareness of cases and to best prepare for post-investigation follow up.
- Stay current on and liaise with additional County resources in Central HR, Equity Management, or external trainings.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Work with the impacted parties in cases on resolution post investigation.	N/A	25	22	25
Outcome	Create recommendations for resolution best practices.	N/A	1	1	1
Output	Collaborating during an investigation with investigators, HR and others to provide solutions and reduce harm.	N/A	N/A	30	30
Output	Provide alternative conflict resolution prior to a complaint or at the receipt inquiry.	N/A	N/A	10	10

**Performance Measures Descriptions**

Right sized and added performance measures to reflect work achieved during the first half of FY 2023. PM #1 creates plans and implements resolution after a CIU investigation. PM #2 creates recommendations for collaborating across depts, CIU and Central HR in resolution practices. PM #3 involves work done in parallel to an investigation, working with stakeholders to provide support to management, staff and work groups while an investigation is ongoing. PM #4 reflects cases able to divert prior to an investigation into an alternative dispute resolution process. making an investigation no longer necessary.



## Legal / Contractual Obligation

The Complaints Investigation Unit is responsible for identifying potential violations of Multnomah County personnel rules, which are based on state and Federal laws; the first year of this pilot has helped to resolve and deter these complaints.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$0	\$0	\$178,909	\$0
Materials & Supplies	\$0	\$0	\$17,491	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$196,400</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$196,400</b>	
<b>Program FTE</b>	0.00	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 2023: 10040B Resolution & Development Coordinator Pilot

In FY 2023, this was a pilot program funded with one-time-only General Fund.

In FY 2024, this program is funded with ongoing General Fund and adds 1.00 FTE HR Analyst Senior (9748).

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:** 25121B  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Residential wood combustion is the largest source of human-caused fine particulate (PM) emissions in Multnomah County, especially in the winter months. Health risks from exposure to wood smoke include heart disease, lung disease, respiratory distress, low birth weight, and a growing body of scientific literature suggests that it can be harmful even when there isn't enough to see or smell. Elevated exposure to PM has also been linked to increased mortality from COVID-19. Wood stove removal and replacement with non emitting sources is a proven best practice for reducing exposure to harmful pollution from wood burning. This investment will support the implementation of a pilot woodstove exchange program.

### Program Description

The 2017 American Community Survey estimates that 3,496 households in Multnomah County use wood burning as their primary source of heat, along with an unknown number of secondary wood stoves and an unknown number of wood burning fireplaces, recreational fire pits, and/or chimineas. According to a DEQ study, Multnomah County residents are responsible for the vast majority of wood burning in the Tri-County region, accounting for 48% of annual wood combustion. Wood combustion emissions impact many more people in Multnomah County because of the sheer volume of emissions and the dense urbanized distribution of people across the County.

This program will pilot the implementation of a woodstove exchange program. The program will prioritize geographic areas in diverse and highly impacted neighborhoods, like Cully in NE Portland, that would have the largest impact. This program will help households replace a wood stove, wood insert, or fireplace used as a primary source of heat with a cleaner burning and more efficient device. The non-wood burning replacement devices, likely ductless heat pump systems, emit less greenhouse gas (GHG) and particulate matter; they also are less likely to be a fire risk, or degrade indoor air quality. Heat pumps also can provide cooling during heat events. The project would fund, in full or in part depending on income, the purchase and installation of a replacement home heating device, and/or the removal and decommissioning of a wood burning device.

The program would prioritize households residing in a census tract identified as a target area with low-income households relying on wood burning devices for heat. Based on information from the Washington County wood stove replacement program, each wood stove replacement to heat pump is likely to cost between \$3,000 - \$11,000 with an average cost of about \$8,500.

### Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of households served with wood burning appliance replacements*	N/A	60-150	5	40
Outcome	Annual Particulate Matter emissions reduction**	N/A	1,200-30,000	1,000	8,000

### Performance Measures Descriptions

\*The number of wood stoves removed will depend on the average cost of each replacement, so it is shown as a range.

\*\*The particulate matter emissions decrease outcome will be heavily dependent on how the corresponding households use wood heat and number of units replaced, therefore it is shown as a range, the value is presented as pounds of particulate matter per year, using an average annual reduction of 200 lbs per year for a wood stove.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$400,000	\$0	\$400,000
Materials & Supplies	\$0	\$100,000	\$0	\$100,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$500,000</b>
<b>Program Total:</b>	<b>\$500,000</b>		<b>\$500,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$500,000	\$0	\$500,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$500,000</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) through State of Oregon Funding (year two of two years) - \$500,000

Significant Program Changes

**Last Year this program was:** FY 2023: 10095 Sustainability - Wood Stove Replacement Pilot

This program offer falls under the County's Public Health Emergency Response ARP Priority Area.

The cost of full replacement has increased due to inflationary pressures.

**Department:** Nondepartmental      **Program Contact:** John Wasitynski  
**Program Offer Type:** Existing      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

Traffic related fossil fuel combustion emissions are the single largest source of air pollution in Multnomah County and the leading source of cancer causing air toxics in Multnomah County. Diesel and gas powered engines, particularly in medium and heavy duty vehicles like school buses are among the leading contributors of traffic related air toxics. Exposure of children to these emissions, especially diesel emissions, is particularly concerning. This investment purchases electric school buses in Multnomah County school districts that are already engaged in fleet electrification projects and will reduce student exposure to toxic pollutants and reduce greenhouse gas emissions.

**Program Description**

Although no area of Multnomah County has safe levels of traffic-related pollution, the pollution “hot-spots” are in neighborhoods with higher proportions of residents who are people of color. The disproportionate exposure to traffic-related emissions mirrors health disparities in the community, particularly asthma, cardiovascular disease, low birth-weights and more recently morbidity and mortality related to COVID-19. Children are especially vulnerable to air pollution because their lungs are still in the developmental phase and they breathe, on average, 50% more air per pound of body weight than adults. School children who ride on older diesel school buses that lack pollution controls have a 4% increased likelihood of developing cancer due to diesel particulate matter in their lifetime. In addition, exposure to diesel exhaust enhances allergic response, can induce new allergies to airborne allergens, and exacerbate asthma. A recent study in Washington State found that children riding on cleaner school buses reduced a marker for inflammation in the lungs by 16 percent over the whole group, and 20-31 percent among children with asthma, depending on the severity of their disease. Moreover, children riding on cleaner buses had a 6-8% reduction in the risk of absenteeism. Cleaner buses means healthier kids who are more ready to learn.

The County will identify a school districts that have access to other sources of funding for school bus electrification. This will be accomplished through collaboration with Portland General Electric, which offers a variety of incentives for fleet electrification, the Department of Environmental Quality that administers clean fleet incentives, and the school districts. By leveraging existing school bus electrification projects, the County can maximize the funds to purchase new buses instead of allocating resources to charging infrastructure. To further maximize funds, the County will pay for the incremental cost of an electric bus over the cost of a conventional diesel powered bus, the remainder of the cost will be reimbursed from the state. In addition, the County will focus on school district owned and operated equipment to make sure these investments stay in Multnomah County. Finally, the County will ask the school district(s) to replace their oldest buses with these funds to help ensure that health benefits are maximized.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of school buses replaced*	N/A	2	0	2
Outcome	Lifetime Cost Effectiveness (\$/short ton reduced) for diesel particulate matter**	N/A	\$62.9 Million	\$0.00	\$62.9 Million

**Performance Measures Descriptions**

\*The estimated incremental cost of replacing a diesel bus with an all electric bus is \$250,000, so a total of two buses will be replaced. \*\*Calculated using EPA Diesel Emissions Quantifier and assumes replacement of a model year 2010 diesel powered bus. Currently the County is in the process of finalizing intergovernmental agreements with Portland Public School District and Centennial School District for the transfer of funding to support the purchase of electric school buses.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$500,000	\$0	\$500,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$500,000</b>
<b>Program Total:</b>	<b>\$500,000</b>		<b>\$500,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$500,000	\$0	\$500,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>	<b>\$500,000</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) through State of Oregon Funding (year two of two years) - \$500,000

Significant Program Changes

Last Year this program was: FY 2023: 10096 Sustainability - Electric School Buses

This program offer falls under the County's Public Health Emergency Response ARP Priority Area.

**Department:** Nondepartmental **Program Contact:** Raffaele Timarchi

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

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

**Executive Summary**

The COVID-19 pandemic has exacerbated economic and social inequities, creating prolonged emotional and financial stress that has fueled a significant uptick in community violence particularly in low income communities of color. Adolescents especially in these communities have experienced psychological distress from increased isolation, disconnection from schools, and disruption of healthy routines and social supports leading to an escalation of risky behaviors and mental health challenges. Youth Connect will identify and engage youth from these communities to provide essential skills training, service learning opportunities, caring adult mentors and stipends to help them successfully transition into adulthood and toward economic self-sufficiency.

**Program Description**

Youth Connect will provide incentivized positive youth development through early career and job skill exposure as a form of violence prevention to build resilience in underserved youth ages 14 to 21 experiencing barriers to employment and in need of interpersonal and community connection. This program offer represents the second phase of a two-year project that includes place-based service learning projects in low-income neighborhoods to create social connections and engage youth as community change agents.

**CORE PROGRAM FUNCTIONS:**

- 1) Identify, recruit and enroll youth ages 14 to 21 facing barriers to employment such as houselessness, juvenile justice involvement, immigrant/refugee status, and engagement with the foster care system.
- 2) Provide up to 200 hours of paid job skill training, work experience, community-based activities, service learning, and support services for each participating youth.
- 3) Coordinate with community partners to develop place-based service learning projects in low income neighborhoods to create social connections and engage youth as change agents and valuable contributors.
- 4) Build organizational capacity at the community level and expand mentor networks and additional supports for youth.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Youth served in professional/educational settings*	N/A	80	118	200
Outcome	% of youth who complete training and internship hours**	N/A	80%	84%	80%
Outcome	% of participating youth experiencing barriers to employment***	N/A	90%	95%	90%
Output	Number of community-based organizations activated to serve as mentors and life coaches.	N/A	2	2	5

**Performance Measures Descriptions**

\*Defined as jobs, internships and paid learning opportunities. \*\*Defined as youth completing 80% of planned hours of work, training or learning opportunity with a positive evaluation and/or passing standardized assessments. \*\*\*Barriers to employment are self-reported and could include disability, homelessness, criminal justice involvement, immigrant/refugee status, and engagement with the foster care system. This program is the first phase and will significantly scale up in year two. By year two, 200 youth will be served, and 5 community-based organizations will be activated as mentors/life coaches.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Contractual Services	\$0	\$1,000,000	\$0	\$600,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$600,000</b>
<b>Program Total:</b>	<b>\$1,000,000</b>		<b>\$600,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,000,000	\$0	\$600,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$600,000</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) through State of Oregon Funding (year two of two years) - \$600,000

Significant Program Changes

Last Year this program was: FY 2023: 10097 Youth Connect

This program offer falls under the County's Crisis Response & Community Recovery ARP Priority Area.





## 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 contingencv can be used are limited. in most cases. to one-time-only expenditures.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2023	2023	2024	2024
Cash Transfers	\$34,798,621	\$3,200,000	\$15,610,285	\$1,874,131
Unappropriated & Contingency	\$89,631,451	\$99,260,847	\$107,000,856	\$104,914,184
<b>Total GF/non-GF</b>	<b>\$124,430,072</b>	<b>\$102,460,847</b>	<b>\$122,611,141</b>	<b>\$106,788,315</b>
<b>Program Total:</b>	<b>\$226,890,919</b>		<b>\$229,399,456</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$6,457,500	\$0	\$6,350,000
Financing Sources	\$4,737,250	\$7,062,417	\$3,672,997	\$0
Interest	\$0	\$935,312	\$0	\$2,000,000
Beginning Working Capital	\$216,439	\$101,374,801	\$990,465	\$107,184,310
<b>Total Revenue</b>	<b>\$4,953,689</b>	<b>\$115,830,030</b>	<b>\$4,663,462</b>	<b>\$115,534,310</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2023: 95000 Fund Level Transactions

No significant changes.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Total:</b>		<b>\$0</b>		<b>\$0</b>
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$7,294,727	\$0	\$7,304,542	\$0
Taxes	\$524,928,237	\$0	\$578,156,246	\$0
Other / Miscellaneous	\$11,602,123	\$0	\$14,739,608	\$0
Interest	\$1,275,125	\$0	\$1,520,000	\$0
Beginning Working Capital	\$160,314,940	\$0	\$177,815,961	\$0
<b>Total Revenue</b>	<b>\$705,415,152</b>	<b>\$0</b>	<b>\$779,536,357</b>	<b>\$0</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 2023: 95001 General Fund Revenues